BP FEDERAL CREDIT UNION Debit Card Affidavit of Disputed Item(s) or Unauthorized Use Fax to : 281-870-9251 or email to: cu@bpfcu.org

IMPORTANT: The account holder disputing the item(s) or alleging unauthorized use should complete this form. This form MUST be completed in their normal handwriting.

Visa Debit Card #		Member Number						
l an Nar	-	and state that I an	<u>.</u> ו:					
Mai	iling Address							
City	, State, Zip Code							
Phone Number Home			Work		Cell	Cell		
Date of first transaction		Place of first transaction						
Deb		d above. The tran		-	-	ave originated through my question and I am hereby		
Reason Transaction Date		Transaction Date	Posting Date	Reference Number	Merchant I	Name Amount		
1.	Please place the most appropriate "reason code number" from the options below, in the "Reason" column above to aid us in settling your disputed item(s). Although I did engage in the above transaction, I dispute the entire charge or a portion in the of \$							
2. 3. 4.	I certify that the charge listed above was not made by me or by a person authorized by me to use the card. Nor were the goods or services represented by the above transaction received by myself or by a person authorized by me. I received a price adjustment (credit slip) on the above transaction and it has not appeared on my statement. Attached is a copy of the credit slip. I only authorized one charge to my account in the amount of \$ I did not authorize any additional							
		oossession of all va		o me.				
5.		ne sales slip was ind			to \$	Enclosed is my		
6.	copy of the sales slip prior to alteration. The sale was duplicated. Only one change was authorized. I have contacted the merchant and it has been 30 days since they stated they would credit my account.							
7.	The credit slip wa	as listed as a sale o	n my statement.					
8.	Other							
		fy to the truth her	eof before any c	-	fficer, or person in a	nd I will testify, declare, any case now or hereafter tion.		

Date

Date

Signature of Primary Account Holder

Signature of Secondary Account Holder (if joint)