HawaiiUSA Federal Credit Union Cardholder Statement of Dispute

INSTRUCTIONS

Please follow the 5 steps below

1. Please call us at (808) 534-4300 or toll free at (800)379-1300 to cancel your ATM or debit card prior to completing the dispute forms.

2. Complete page 2 and 3.

3. Keep page 4 for your records.

4. Should you have any questions regarding how to complete the form, please do not hesitate to call us at (808) 534-4300 or toll free at (800) 379-1300 and we will be more than happy to assist you.

5. Mail to:

   HawaiiUSA Federal Credit Union
   ATTN: CO Card Services
   1226 College Walk
   Honolulu, HI 96817

12/19/2013

HawaiiUSA Federal Credit Union Cardholder Statement of Dispute

Please read each section and ensure that you have provided all information. We may need additional information from you for your claims. Please ensure your contact information is current.

SECTION1 – Cardholder Information

☐ Account opened less than 30 days?

Cardholder's Name	Daytime Phone No.

Card Number	Account Number/Share ID	Card Expiration Date	Date Card Captured

SECTION2 – Description of Transaction(s) *ATM/POS and Debit disputes must be disputed on separate form

Transaction Type (Check ONE only): ☐ ATM/POS ☐ Debit (Use page 3 SECTION7 for additional transactions)

Amount	Transaction Date	Post Date	Merchant/Bank Name/Terminal ID
$			
$			
$			

SECTION3 – Dispute Type (Check ONE only)

1. ☐ I do not agree with the amount billed. The amount should be $ _____. Note: Must Attach Receipt
2. ☐ The change in question was a single transaction, but the charge posted twice to my account. I did not authorize the second charge. Note: Must Attach Receipts
3. ☐ I did engage in the transaction, however, the merchandise/service requested was not as the merchant described and was returned. Date Returned: _____ Note: Must Attach Receipt
4. ☐ I notified the merchant to cancel this pre-authorized order or reservation on
5. ☐ I did not authorize the transaction(s).
6. ☐ Other (explain): _____
7. ☐ ATM did not dispense funds.
8. ☐ ATM dispensed partial amount of funds. Amount Received: $ _____ Amount Requested: $ _____

For DISPUTE TYPE 7-8, skip section 4 & 5 and complete section 6.

SECTION4 – Card Information

Is the card missing? ☐ Yes ☐ No Police Report # _____ If applicable

When/Where did you last use the card? _____

Was the PIN given to anyone? ☐ Yes ☐ No if yes, to whom? _____

The ATM/Debit Card was lost/stolen on _____ The lost/theft was reported to HawaiiUSA on _____

SECTION5 – General Information

Please describe in detail the circumstances surrounding the disputed transactions. If applicable, please include resolution attempts made with the merchant in question, identifying dates, names, and brief summaries of all conversations made related to dispute. If merchandise was received and returned, please include date item was returned provide shipping receipt. (If more space is needed, please use page 3 SECTION7.)

©2012 HawaiiUSA FCU COPS-07 (11-13)

SECTION6 – Certification

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. I HAVE RECEIVED THE PROVISIONAL CREDIT NOTIFICATION LETTER.

Cardholder's Signature Date

FOR OFFICE USE ONLY

I have read and reviewed the entire document.

Supervisor's Signature Date

SECTION7 – Part I: Description of Transaction(s) – Additional Transactions

Card Number

Transaction Type ☐ ATM/POS ☐ Debit

Amount	Transaction Date	Post Date	Merchant/Bank Name/Terminal ID
$			
$			
$			
$			
$			
$			
$			
$			
$			
$			
$			
$			
$			

SECTION7 – Part II: General Information – Additional Space

Mail to: ATTN: CO Card Services HawaiiUSA Federal Credit Union • College Walk 1226 • Honolulu, HI • 96817

HawaiiUSA
FEDERAL CREDIT UNION

Life matters.

Re: PROVISIONAL CREDIT NOTIFICATION

Dear Member:

This letter is to inform you that your account may be given a provisional credit. This is a temporary credit provided for you until we have completed your claim.

This provisional credit is in response to the electronic fund transfer claim you filed. This credit is being made to your account while we investigate your claim. The final resolution of your claim will be determined as quickly as possible. Until your claim is resolved, you have full use of these funds.

If your claim is denied, this provisional credit will debited (charged) against your account. You will be notified of this event.

Should you have questions regarding this provisional credit, please do not hesitate to call us at (808) 534-4300 or toll free at (800) 379-1300.

Sincerely,

Jo Ann Nagatori
Assistant Vice President
Central Operations – Card Services Division
HawaiiUSA Federal Credit Union

mail 1226 College Walk / Honolulu, HI 96817 call (808) 534.4300 / (800) 379.1300 toll-free fax (808) 534.4362 visit www.hawaiiusafcu.com