

## **Customer Dispute Request Form**

Forward by:

Fax: 419-426-1320

Email: custservice@suttonbank.com

Mail: Sutton Bank P.O. Box 505

| Card # Cardholder Name:  | Attica, OH 44807  |
|--|---|
| Cardholder Name:   |   |
|  | -   |
| Dismuted Thomas stien(s) (Ann. 1.4.11); AE. 163. A. 17   |   |
| <b>Disputed Transaction(s)</b> (Attach Additional Form If Neede  |   |
|  | erchant Name:   |
| Date: Amount: \$ M   | erchant Name:   |
| Date: Amount: \$ M   | erchant Name:   |
| Date: Amount: \$ M   | erchant Name:   |
| Date: Amount: \$ M   | erchant Name:   |
|  | erchant Name:   |
| I've attempted in good faith to resolve this dispute with the mercl  |   |
| Category Check one category below that best describes your dispute for the Unauthorized / Fraud I didn't authorize or engage in the transaction. The card is hot-carded.  Returned Merchandise I returned merchandise to the merchant on   | Credit Slip Issued and Not Processed I was issued a credit receipt that didn't post to my account. A copy of the credit receipt is enclosed with this form.  Cancelled Services / Merchandise / Reservation I cancelled the services/merchandise/reservation on (date). However, the merchant continues to bill me. The |
| Debit Card Account Billed Twice  I was incorrectly charged \$ on (date).  The correct transaction for \$ posted on (date)  Copy of receipt required.   | Paid by Other Means I paid for this transaction using cash, check or another bank card. A copy of my cash receipt, cancelled check or other bank card statement is enclosed.  |
| Defective Merchandise/Not as Described  The merchandise arrived broken, defective or otherwise unsuitable OR the product or service received was not as described by the merchant. The merchant's advertisement and a letter explaining what I expected to receive are enclosed. I returned the merchandise on (date). |   |
| Incorrect Amount  I was billed \$, but the correct amount is \$  Evidence of the correct amount is enclosed.   | Expected deliver date:  ATM/Deposit/Withdrawals Date of Trans:  Amt. Requested: \$ Amt. Received: \$  |

Cardholder Signature (must be the name listed on the card)

Date