

Travel Related Disputes

Date _____

Cardholder Information Account Number _____ Phone _____
 Name(s) _____ Fax _____
 Transaction Information Merchant Name _____ Phone (if known) _____
 Merchant Location (if available) _____
 23 Digit Reference # _____
 Transaction Date ____/____/____ Transaction Amount \$ _____ **Disputed Amount** \$ _____

I am initiating this dispute on behalf of the customer

Name _____ Relationship to cardholder _____

Signature: _____

PLEASE CHECK THE APPROPRIATE DISPUTE AND COMPLETE THE CORRESPONDING INFORMATION

The charge is mine, however I need a copy

I don't recognize this sale

I never authorized this transaction

***Cardholder Signature required:*

I paid for this transaction by other means

***Must provide copy of the front & back of canceled check, other credit card statement showing the second charge, cash receipt, etc. as supporting documentation.*

I was billed a different amount than my receipt shows

If transaction involves lodging or car rental, please indicate which portion of the charge you are disputing and the reason why

***Must provide copy of the receipt showing the amount that should be billed.*

For the following inquiries, please answer the questions below

➤ **An attempt to resolve this dispute with the merchant must be made. Please describe your attempt(s):**

➤ **On what date(s) did you contact the merchant to resolve this concern?** ____/____/____

I canceled my hotel stay and have been charged a No Show fee

➤ Date of cancellation: ____/____/____

➤ Time of cancellation: _____

➤ Cancellation number provided: _____

➤ I am unable to provide a cancellation number, please provide details of call:

***If unable to provide cancellation number, must supply a copy of the phone bill reflecting the call to the merchant*

➤ Person I spoke with: _____

I was billed for a No Show charge and accommodations were used

➤ Please indicate disputed amount \$ _____

➤ The 23 digit reference# of the valid charge is: _____

***If another method of payment was used, provide a copy of the front & back of canceled check, other credit card statement showing the second charge, cash receipt, etc. as supporting documentation.*

➤ Date merchandise was returned, or attempted to return. ____/____/____ ***Must attach proof of return, if applicable*

I received alternate accommodations and was billed in error

➤ The 23 digit reference# of the valid charge is: _____

➤ Reason for alternate accommodations (e.g., room was not available and the hotel made arrangements at another hotel)

I was charged a No Show rate different than I was quoted. Please provide details

I was not advised that a No Show fee would be charged. Please provide details

I did not request a guaranteed reservation. Please provide details

The airline went bankrupt & services were not rendered.

➤ Name of airline _____ and when was the expected date of flight: ____ / ____ / ____

➤ Indicate the disposition of the tickets? _____

***Must provide proof of return, if they were returned*

➤ Note: If tickets are still in your possession, retain a copy for your records and return them via **certified/registered mail to:**

**Bank One
PO Box 2015
Ill - 6225
Elgin, IL 60121-2015
Attn: Dispute Department**

Please include additional comments that are pertinent to your dispute:

***Supporting documentation may be faxed to 1-888-297-0785/847-488-7985 or mailed to:*

**Bank One
PO Box 2015
Elgin, IL 60121-2015
Attn: Dispute Department**

Bank One USE ONLY Circle applicable reason code 32 41 53 55 56 57 60 59 (RS1 RS2 RS3 RS4 RS5)

“I certify that the facts were obtained from my discussion with the cardholder and are accurate to the best of my knowledge”

Chargeback representative _____

_____ Date

Recap of representatives attempt to resolve dispute with merchant directly:

Check applicable regulation for appropriate timeframes and member message fields

Call Taken By/Ext. _____ Date: _____

Supervisor _____

Best Time to call _____ Number we may reach customer back at _____