Advantis credit union
P.O. Box 14220
Portland, OR 97293-0220
503 785-2528 ▪ 800 547-5532
Fax: 503-785-2528
www.advantiscu.org

VISA/POS Dispute or Fraud Form

MEMBER INFORMATION

MEMBER NAME | MEMBER NUMBER

CARD NUMBER | CONTACT PHONE NUMBER

CONTACT EMAIL ADDRESS

TRANSACTION INFORMATION

DATE	MERCHANT	AMOUNT
DATE	MERCHANT	AMOUNT
DATE	MERCHANT	AMOUNT
DATE	MERCHANT	AMOUNT
DATE	MERCHANT	AMOUNT

DETAILS OF DISPUTED TRANSACTION(S)

REASON FOR DISPUTE

POLICE CASE NUMBER -- RECOMMENDED FOR ALL DISPUTES WHERE FRAUD IS INVOLVED

In Good Faith, if your transaction routes through the VISA network, you must first attempt to resolve all disputes with the merchant. Once you have made that attempt, Advantis must receive notice from you no later than sixty (60) days after the first statement on which the problem or error appeared. Attach any information to support your claim, including receipts, invoices, etc. You may also e-mail your additional documentation to disputes@advantiscu.org. This and the following information is required by VISA for all disputes:

NAME AND CONTACT INFORMATION FOR MERCHANT

CONFIRMATION, TRACKING, OR CANCELLATION NUMBER(S)

DISCLOSURES AND SIGNATURE

Within ten (10) business days of receiving your notice of a disputed transaction, we will place a provisional credit in your Advantis account while we investigate.

Initials

Initial to the left to acknowledge that you understand: If you are disputing a transaction(s) that was not authorized by you, Advantis must deactivate your card immediately. Visa regulators require us to immediately deactivate any card for which there is a claim of fraudulent or otherwise unauthorized activity. This will ensure that any future attempts at unauthorized access by use of the card will be denied. A new card will be ordered and should arrive within 10 business days.

By signing below, you warrant the above statements and information to be true and complete.

FOR INTERNAL USE ONLY

Signature Verification performed by: _____ (Teller Number)

Signature

Date