

Bank of Saint Lucia

ALL THE BANK YOU NEED

CARDHOLDER DISPUTE FORM FRAUDULENT TRANSACTIONS

NAME:

CARD NUMBER: _		
ACCOUNT NUMBI	ER:	
I am disputing the	following transaction(s) for the reason indicated	l:
location. However	e participation in at least one transaction at the r, I neither engaged in nor authorized the transaction at the nature appearing on the disputed sales draft is not the disputed sales draft is not transaction.	ction in question. I therefore
• •	te below mentioned charge(s) was not made not by me to use my card.	authorized by me or by any
	ne signature on the sales slip is not mine and I My card was in my possession and control at	
DETAILS OF DIS	PUTED ITEM(S):	
TRANSACTION DATE	MERCHANT NAME	TRANSACTION AMOUNTS





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_		
	Total \$ of Unauthorized Transaction	\$
	t the timeframe to resolve my dispute is approvided with feedback when the information become	
I will be pro saction prove		omes available. Should
I will be pro saction prove	vided with feedback when the information become to be genuine, I authorize that my account car	omes available. Should
I will be pro saction prove	vided with feedback when the information become to be genuine, I authorize that my account car	omes available. Should
I will be pro saction prove	vided with feedback when the information become to be genuine, I authorize that my account car	omes available. Should
I will be pro saction prove 00 (relevant t	vided with feedback when the information become to be genuine, I authorize that my account case account currency) administration charge.	omes available. Should
I will be pronsaction prove	vided with feedback when the information become to be genuine, I authorize that my account case account currency) administration charge.	omes available. Should

(Cardholder Signature as it appears on card)





FOR CARD SERVICES USE ONLY

CADDIIOI DED DETAIL C

CARDHOLDER DETAILS	
CONTACT NUMBER(S):	
EMAIL ADDRESS:	
STAFF DETAILS	
Prepared by:(Name of staff)	
(Signature of Staff)	
Date Received:	

