

DISPUTED TRANSACTION FORM

PART A: Please fill in ALL fields below in BLOCK CAPITALS					
Cardholder's Name & Surname					
Card Number					
Please select the most appropriate:		Card was in my possession at the time of the transaction Card was Lost / Stolen			
PART B: Disputed Trans	saction Deta				
If you are disputing more than seven (7) transactions, please provide the transaction details on a separate sheet.					
, ,			Transaction Amount		
Transaction Date	Merchant N	Name	(in transaction currency)		
/					
/					
/					
/					
/					
PART C: Disputed Transaction Reasons					
Please select the most appropriate reason for the dispute:					
FRAUDULENT TRANSACTION(S) I never authorised or participated in any of the transactions listed above/marked with an asterisk on the attached separate sheet.					
2. GOODS OR SERVICES NOT RECEIVED OR AS DESCRIBED					
I have attempted to contact the merchant but I have been unsuccessful in resolving the dispute with them.					
I authorised these transactions but the goods/services:					
Were not received.					
Were not as described and were returned to merchant/cancelled. ☐ YES ☐ NO (select applicable)					
Were previously cancelled.					
I provide the following relevant documentation to support the above claim:					
Copy of original invoice/contract to explain goods/services ordered.					
Terms & Conditions of purchase.					
Copy of all correspondence with supplier/service provider.					
Proof that goods were returned to supplier.					

3. ATM CASH NOT RECEIVED / INCORRECT CASH DISPENSED

	I have received some / none of the cash requested. Amount requested was the amount received was				
4.	PAID BY OTHER MEANS				
	I paid the merchant by (method of pay transaction was also debited to my card. I have contacted or attempted to contact the mer dispute and the merchant refused to refund.	yment), but this chant to resolve the			
	I have enclosed proof of payment (e.g. cash receipt, other card receipt)				
5.	REFUND NOT PROCESSED				
	The merchant agreed to refund the card with the amount ofhas been processed. I have enclosed a copy of the refund voucher or letter/email from the refund is due.	but no refund merchant confirming a			
6.	RECURRING TRANSACTION				
	I have previously cancelled the transaction payment with the merchant (name) on/ (date). (If you have proof of cancellation please pro	ovide copies)			
7.	SAME PURCHASE CHARGED TWO OR MORE TIMES				
	My account has been charged (number) times. Only (number were authorised by me. (If you have any relevant documentation to support this please production)				
8.	TRANSACTION AMOUNT IS INCORRECT				
	The amount I authorised differs from the amount charged to my account. I have enclosed vouchers/invoice or other proof, that the amount charged is incorrect.	a copy of the sales			
9.					
	I authorised one transaction with the merchant for (transaction currency & amount). My card wa the disputed transaction(s) took place. (<i>Please enclose a copy of the sales voucher, if you</i>	s in my possession when			
10.	OTHER				
	My dispute does not fall into one of these categories. (Please give a full explanation regarding this dispute below, enclosing any documentation to support it. If you require more space, provide it on a separate sheet and attach it to this form)				
PART D: Declaration I hereby confirm that the information provided is true to the best of my knowledge.					
	urdholder's Signature:	te: / /			
Completed form, together with the required documents, to be returned to Hellenic Bank Public Company Ltd, Card Services Fraud & Chargebacks, by email to cardservices.fraud@hellenicbank.com or by hand to any Hellenic Bank					

Branch.