Instructions for Reporting Visa and ATM Card Disputes & Fraudulent Charges

To dispute activity on your **Qualstar Visa Credit, Debit/Check, or ATM card**, please follow the instructions provided here and complete all the information requested.

For card transaction(s) in question, all forms must be received within 90 days of the transaction's posting date.

⏩ Please provide to Qualstar Credit Union with the following:

- ☐ A completed and signed Qualstar Cardholder Disputed Item Statement (the **cardholder** must sign the form)
- ☐ A copy of the cardholder's driver's license

Please Note: In cases where fraud has been reported, your card will be blocked.

We will begin investigating your claim upon written or oral notification of a disputed or fraudulent transaction. If the documents are complete and thorough, we will issue a temporary credit to your account within ten (10) business days of receiving them. You will have full use of these funds until the investigation has been completed. If we determine no error or unauthorized activity occurred, we will notify you ten (10) business days prior to reversing the temporary credit to your account. If we need additional information to proceed, we will contact you directly.

⏩ Sending the Documents

The documents can be brought to any Qualstar branch; however if you are unable to bring them to a branch, you can send them via secure email through Home Banking, or you can send it via fax to (425) 460-3944. You can also mail the forms to:

Qualstar Credit Union
Card Services Department
PO Box 3050 Bothell, WA 98041-3050

Please Note: If mailing the documents, we recommend you send them with a delivery confirmation. If you do not hear from us or receive a temporary credit within ten (10) business days, it is your responsibility to verify that Qualstar Credit Union received your dispute paperwork.

*It is your responsibility to make sure we receive all the proper documentation requested and we have a current phone number and address on file. If we are unable to reach you to obtain additional information, it will be necessary for us to close the dispute and you will be responsible for the original amounts disputed. We will notify you in writing if it becomes necessary to close your case because we could not contact you for additional information.

Cardholder Disputed Item Statement

***All fields are required.**

Member Name:_____Account Number: _____

Best Phone Number to Reach You During Business Hours:_____

Best Time to Call: _____Alternate Phone Number:_____

Visa Card Number: _____

Type of Loss: ☐ Lost ☐ Stolen ☐ Card was in my possession when the transaction(s) occurred

Cardholder Signature: _____Date_____

Please Note: *After your dispute paperwork is received, someone from our Card Services Department may contact you for additional information. We may request a police report in cases of fraud.*

I have examined the charge(s) on my account and am questioning the following transaction(s):
(Attach additional sheets if necessary)

Merchant Name	Amount	Transaction Date
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____

The following are the details of my dispute (choose any that apply):

☐ FRAUD: I certify the charge(s) was (were) not made by me or by a person authorized by me to use my Qualstar Visa card, nor were the goods and services represented by the above transaction received by myself or by a person authorized by me. In this case, your card will be blocked right away.

☐ I certify that I participated in the above ATM transaction, but have not received the credit/ did not receive the cash.

☐ I certify that I received a price adjustment (credit) on the above transaction and it has not appeared on my statement. Please include a copy of the credit slip/return receipt.

Date credit was offered by the merchant: _____

Describe your attempts to resolve with the merchant: _____

_____

☐ I certify that this transaction is a duplicate charge. Only one transaction was made with the above referenced merchant. On my statement, the same merchant has processed a second charge to my account, which I neither initiated nor authorized.

Date of valid transaction: _____

Describe your attempts to resolve with the merchant: _____

_____

QUALSTAR CREDIT UNION

Cardholder Disputed Item Statement

☐ I certify that I participated in the above transaction, but have not received the merchandise. Please describe your attempts to resolve the matter with the merchant as well as the expected date of delivery:

Expected date of delivery: _____

Describe your attempts to resolve with the merchant: _____

_____

☐ I certify that I participated in the above transaction, but have returned the merchandise/cancelled services per the merchant's instructions, and have not received credit:
Merchant cancellation policies may apply; please provide additional details if necessary.

Date of return or cancellation: _____

Return tracking number, if applicable: _____

Describe your attempts to resolve with the merchant: _____

_____

☐ I contacted the merchant to cancel a monthly recurring transaction, but a charge still posted after cancelling. Merchant cancellation policies may apply; please provide additional details if necessary:

Date of Cancellation: _____

Describe your attempts to resolve with the merchant: _____

_____

☐ The merchandise or service I received is defective or not as described/agreed upon. Please provide details of the defect or inconsistency, and describe your attempts to return the merchandise or resolve with the merchant:

_____

_____

☐ Other. Please describe below – descriptions of transactions should be typed or written clearly; attach additional sheets if necessary:

_____

_____

Please use the space below to further explain your dispute (attach additional sheets if necessary):

_____

_____

_____

_____

_____

_____

Cardholder Disputed Item Statement: Additional Transactions

I have examined the charge(s) on my account and am questioning the following transaction(s):

Merchant Name	Amount	Transaction Date
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	_____
_____	$ _____	
_____	$ _____	_____
_____	$ _____	_____

Cardholder Signature: _____ **Date:** _____