

Card Dispute Form

LANDBANK CREDIT CARD

MASTERCARD TRANSACTION DISPUTE FORM

Our ability to assist you in receiving reimbursment on the item(s) below is based upon the information and documentation that you will provide to support your claim for the disputed transactions.

Date Form Completed: _____ Cardholder Name: _____

			th to resolve this d empt was made			Yes	_No	
Card Number	r:							
Cardholder N	lame:							
(Family Nam					(Given Na	,	(Middle Name)	
Cardholder H					W	ork Phone Nu	ımber:	
Disputed T	ransa	ctions	s:					
Date	Ame	ount	Merchant Information		Date	Amount	Merchant Information	
			Please attach sta		onal charges	(Please use se	parate sheet if necessary)	
Check One			Category		Me	erchant Inform	nation	
		Cancelled Membership/ Subscription		I have cancelled the subscription/membership on// (dd/mm/yy) yet the charge was billed to my credit card. (Enclosed is a proof of my cancellation with the merchant)				
		Cancelled Reservations		I was charged for a hotel room, which I cancelled on// (mm/dd/yy). Please note cancellation number (Proof of cancellation required)				
		Refund/Credit Not Processed		I have not received my refund from the merchant. Enclosed is a copy of my credit voucher.				
		Double Billing		I have been billed more than once for the same transaction. I authorized only one charge with this merchant for the amount of on// (dd/mm/yy)				

	Incorrect Amount	I made a transaction a I am disputing the diff	mounting to ference of	However, I was charged for (Provide copy of the sales slip)	
	Merchandise or Services Not Received			_ (mm/dd/yy) with expected delivery t response after being notified)	on
	Paid by Other Means	I paid for the transac (Provide a copy of the	•	ck or other credit card. vment)	
	Returned Merchandise	I returned the mercha (Provide merchants re			
	Unauthorized Transaction		ne transaction(s) and r	ansaction(s) indicated above or authoriz my card was in my possession at the time	
	Undispensed Cash Advance	I attempted to withdr at(A dispensed. Enclosed	rea, City) on/	me of bank) ATM locat _/ (mm/dd/yy), however no cash w Slip.	ed /as
	Others			of the dispute along with your attempt documentation that support your claim	
NOTE: Please attach a	all supporting documents to	o support your case. (i.	e., Credit Slip, Proof	f of payment by other means, cancella	ation
if needed.		portion of my valid II	D. I shall send the p	physical card for proper investigation	on,
 If necessary, I agree resolution of my di The LANDBANK Copractices and proced. Any amount credit Should the transact and charge slip/sa Should my dispute faith, without any control and charge back perion That I consent LAN other supporting defor all legitimate interesting the control of the control of	spute claim; fredit Card dispute claim in sedures; ed to my account is provise etion in dispute is proven t les draft retrieval fees whe e claim be filed past charg guarantee of reversal of m ind is 60 calendar days from NDBANK in the collection locuments, including othe	edit Card block my cravestigation is in accommodate in accommodate in accommodate. In accommodate in accommodat	redit card account ordance with acceputcome of the invendent I shall be liad DBANK Credit Card y personal information oblution of this disputation of this disputation.	effective immediately, pending the oted and standard credit card businestigation; able for corresponding finance chard shall only process my claim in go tion as contained in this form and that may be further requested of mute, in accordance with the Republ	rges od ie
Contact Number	er:		Birthplace:		
Tax Identification	on Number (TIN):	Email address:			

SEND TO LANDBANK Credit Card at 28F LANDBANK Plaza, 1598 M.H. Del Pilar corner Dr. J. Quintos Sts., Malate, Manila OR FAX TO (02) 8528-8547 or email scanned copy to CCAD@mail.landbank.com.