

LANDBANK Credit Card

MASTERCARD TRANSACTION DISPUTE FORM

Our ability to assist you in receiving reimbursement 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 _____

Card Dispute Form

I have attempted in good faith to resolve this dispute with the merchant: ____ Yes ____ No

(Required) Date in which attempt was made _____

Card Number:

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Cardholder Name: _____
(Family Name) (Given Name) (Middle Name)

Cardholder Address: _____

Cardholder Home Phone #: _____ Work Phone # _____

Disputed Transactions:

Date	Amount	Merchant Information	Date	Amount	Merchant Information

Total: _____ Please attach statement for additional charges *(Please use separate sheet if necessary)*

Reasons for Dispute (Check One), Highlighted fields are required:

Check One	Category	Description
<input type="checkbox"/>	Cancelled Services	I cancelled the services on _____ (date), however the merchant continues to bill me. (Provide proof of cancellation)
<input type="checkbox"/>	Cancelled Reservations	I was charged for a hotel room, which I cancelled on _____ (date). Please note cancellation number _____. (Proof of cancellation required)
<input type="checkbox"/>	Credit Not Received	I was issued a credit receipt that did not post to my account. A copy of the credit receipt is enclosed with this form. (Credit slip required)
<input type="checkbox"/>	Double Billing	I was billed twice for the same transaction and I was in possession of my card. The transaction was posted to my account on _____ (date).

Signature and Date are required on page 2

<input type="checkbox"/>	Incorrect Amount	I was billed _____, but the correct amount is _____. (Provide copy of your receipt)
<input type="checkbox"/>	Merchandise or Services Not Received	I did not receive the merchandise or service I expected to receive on _____ (date). (Provide merchant response after being notified).
<input type="checkbox"/>	Paid by Other Means	I paid for the transaction using cash, check or other credit card. (Provide a copy of the proof of alternate payment).
<input type="checkbox"/>	Returned Merchandise	I returned the merchandise on _____ (date). (Provide merchants response after being notified).
<input type="checkbox"/>	Unauthorized	I did not authorize or engage in this transaction. (Provide Fraud Statement)
<input type="checkbox"/>	Others	

Please provide description and circumstances surrounding your disputed transactions:

NOTE: You must attach all supporting documents to support your case. (i.e., Credit Slip, Proof of payment by other means, cancellation confirmation, rental agreement, etc.)

Enclosed is a photocopy of the front and back portion of my valid ID. I shall send physical card for proper investigation, if needed.

I HEREBY AGREE TO THE FOLLOWING:

1. LANDBANK Credit Card, if needed, reserves the right to investigate and confirm my dispute claim;
2. If necessary, I agree to have LANDBANK Credit Card block my credit card account effective immediately, pending the resolution of my dispute claim;
3. The LANDBANK Credit Card dispute claim investigation is in accordance with accepted and standard credit card business practices and procedures;
4. Any amount credited to my account is provisional pending final outcome of the investigation;
5. Should the transaction in dispute prove to be valid, I understand that I shall be liable for corresponding finance charges and charge-slip/ sales draft retrieval fees where applicable; and
6. Should my dispute claim be filed past charge back period*, LANDBANK Credit Card shall only process my claim in good faith, without any guarantee of reversal of my dispute.

** Charge back period is 60 calendar days from transaction date.*

Signature : _____
Name : _____
Contact No. : _____
Tax Identification Number (TIN) : _____

Date : _____
Birthdate : _____
Birthplace : _____
Email address: _____

SEND TO LANDBANK Credit Card at 28F LANDBANK Plaza, 1598 M.H. Del Pilar corner Quintos Sts., Malate, Manila OR FAX TO (02) 528 85 47 or email scanned copy to CCAD@mail.landbank.com.