

Fifth Third Credit Multi-Card Dispute Form

Thank you for contacting us regarding a dispute on your Visa/MasterCard. Please complete the form and indicate the circumstances that apply to your dispute. Mail or fax the completed form to:

Fifth Third Bank Madisonville Operation Center Mail Drop 1MOC2G Cincinnati, OH 45263 Fax: (513) 358-7327

I. Report Taken By: _____ Telephone #: _____ Date: _____ Time: _____
Card Number: _____ Cardholder's Name: _____
Transaction Date: _____ Dollar Amount: _____
Merchant Name: _____

II. Please check the ONE category that best describes your dispute:

- I certify that I did not make or participate in this purchase.
- The purchase was made by cash, check, or credit card, but also appeared on my statement. **A copy of a) the cash receipt, or b) the front and back of the cancelled check, or c) the statement on which the purchase appears is REQUIRED.**
- The amount I purchased differs from the amount billed. **(A copy of the sales slip or packing invoice for mail orders is REQUIRED.)**
- I have returned the merchandise and a **copy of the credit slip is attached.**
- I have returned the merchandise on _____ and have not received a credit slip/acknowledgement of return. **(Please provide proof of return.)** The Merchant's response to the return was _____
- I have not received the merchandise. The expected delivery date is/was _____. I contacted the merchant on _____ and their response was _____
- I have not received the expected services. (Explain in full on separate sheet of paper.)
- The merchandise received was defective and was returned on _____. I contacted the merchant on _____ and their response was _____
(PROOF OF RETURN AND EXPLANATION OF DEFECT IS REQUIRED.)
- I attempted to cancel this purchase with the merchant on _____.
The merchant's reply was _____
(PLEASE INCLUDE COPIES OF ANY CORRESPONDENCE BETWEEN YOU AND THE MERCHANT.)
- This sale was a cancelled hotel reservation. My cancellation number is #_____
Date of cancellation _____
(If no cancellation number given, please explain in full on.)
- Only one sale was authorized. The amount in question is a duplicate of a sale charged to my account on _____. The card(s) is/are still in my possession.

III. YOUR SIGNATURE MUST APPEAR BELOW IN ORDER FOR REQUEST TO BE PROCESSED.

_____	Home Phone # _____
Date	
_____	Work Phone # _____
Signature	

NOTE: Please provide a detailed explanation of the above dispute. See second page.

