

## ELECTRONIC FUNDS TRANSFER ERROR REPORT (ATM/DEBIT CARD DISPUTE)

fcbbanks.com 1-866-323-4322

| Date  | Account Number  |
|---|---|
| Cardholder Name   | ATM/Debit Card Number   |
| Address   | Debit Card Expiration Date  |
| City/State/Zip  | Current Email Address   |
| Telephone Number  |   |
| ABOUT MY CARD   |   |
| ☐ I have my card in my possession   |   |
| ☐ I have reported my card lost/stolen. I discovered the ca  | rd was lost/stolen on (date). I reported this to FCB  |
| Banks on (date).  |   |
| Is there another person that could have conducted this tran   | saction?   YES   NO   |
| Have you ever authorized anyone to use your ATM/Debit can   | rd? 🗆 YES 🗆 NO If yes, with whom & when   |
| $\operatorname{Did}\nolimits$ you attempt or regain possession of your card from that   | person?   YES   NO When?  |
| $\square$ I have contacted the Police and filed a report: $\square$ YES   | □ NO If yes, with whom & when   |
| If not, will you consider filing a report and providing us a  | a copy? 🗆 YES 🗆 NO  |
| ABOUT THE TRANSACTION - Check one box only - one train  | nsaction per form please  |
|   | Transaction Amount \$   |
| Merchant/Terminal Name on Statement   |   |
| ☐ Incorrect amount of cash received from ATM Requeste   | ed \$ Received \$   |
| <del></del>   | \$Credited \$   |
| ☐ I have my receipt   |   |
| ☐ I did not receive the merchandise   |   |
| ☐ I authorized one transaction in the amount of \$  | The Merchant deducted \$  |
| ☐ My debit card was charged twice for the amount of pure  | chase \$  |
| Services were cancelled ( <i>if marked, an attempt to resol</i>   | ve with Merchant section below needs to be completed)   |
| ATTEMPT TO RESOLVE WITH MERCHANT  |   |
| I have contacted the Merchant:   YES   NO   | Date Time   |
| Name of Contact Cancellation N  | Number  |
| Results   |   |
| Was product received?   YES   NO If yes, was item   | returned?   |
| Proof (RMA #)   |   |
| Note: A copy of any written documentation (i.e. Cancellation Reque  | est Letter, e-mail correspondence, etc.) is required. By signing below, I   |
| acknowledge receipt of the Electronic Fund Transfer Disclosure.   |   |
| X   |   |
| Customer Signature  |   |
|   | ) business days after your complaint is submitted and will correct any error  |
|   | may take up to ninety (90) days. If more time is needed, your account will be n error. You will have use of the funds during the time it takes us to complete |
| our investigation. If you are asked to submit your complaint or que   | estion in writing, and you do not comply with ten (10) business days, your  |
| account may not be credited.  |   |
| If warranted, by signing below you release FCB Banks to share infor federal law enforcement agencies for further investigation. | rmation from this electronic transaction error report with local, state and/or  |

Customer Signature