

NOTIFICATION OF DISPUTE – ATM TRANSACTION

Member Name: _____ Card Number: _____

ATM INFORMATION

Name of Financial Institution: _____

ATM Address: _____

Type of ATM: Lobby Drive-Up

TRANSACTION INFORMATION

Date of Transaction: _____

Approximate Time of Transaction: _____ AM PM

Type of Transaction: Deposit Withdrawal Cash Check Both

Transaction Amount: \$ _____

Denomination of Bills: _____ Number of Checks: _____

Who is the check from? Who is the check payable to? What is the check amount?
(Please list this information for all checks)

Deposit to: Savings Checking Other _____

ADDITIONAL DETAILS – REQUIRED FOR PROCESSING

Please provide a detailed description of your dispute:

Member Signature: _____ Date: _____

Phone Number: _____