

ATM Dispute Form

Member Name: _____

Member Number: _____ Account Number: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____

Card Number: _____

Transaction Date; Amount Requested; Amount Dispensed; Receipt #; Time

Please list the location/address of the AMOCO ATM:

AMOCO Federal Credit Union will issue "provisional credit" to your account within ten (10) days for a disputed amount. Provisional credit is issued while your disputed transaction is being investigated and can be withdrawn from your account if it is later determined that the transaction is valid.

Member's Signature: _____

Date Signed: _____

Today's Date & Time: _____

Employee Name: _____