



ATM DISPUTE FORM (CASH OR CHECK)

Account Information:

Name: _____ Member Number: _____
Card Number: _____ Phone Number: _____

Dispute Reason:

- Attempted a withdrawal, but did not receive the requested funds
Attempted a withdrawal for \$_____ and only received \$_____
I deposited \$_____ and received credit for \$_____
I deposited \$_____ and the funds were not credited to my account

Transaction Information:

Transaction Date: _____ Transaction Amount: \$_____
Time of Transaction: _____ Dispute Amount: \$_____

Account:
[] Checking
[] Savings

Funds:
[] Cash
[] Check

Terminal (ATM Information):

- Foothill Credit Union ATM
o City _____
o Please describe which ATM: _____
• Arcadia: ATM near the branch entrance or ATM near the street
• Covina: Member facing branch entrance; ATM to the right or ATM to the left
• Glendora: Walk up ATM or Drive-up ATM
Non-Foothill Credit Union Atm
o Receipt Attached
o Atm Location: _____

Describe Situation:

Member Signature: _____ Date: _____

Internal Use Only:

Terminal Location: _____ Branch: _____
Terminal Number: _____ Teller Number: _____