



CARDHOLDER DISPUTE FORM



Cardholder's Name			Date		
_____	_____	_____	_____	_____	_____
Last Name		First Name	Middle Name		_____
Month		Day	Year		_____

EastWest Credit Card Number of Disputed Transaction											
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
(First and Last Four Digits ONLY)											

TRANSACTION(S) FOR DISPUTE
(If more than 5 transactions, write the details in a separate sheet of paper)

Sale Date	Post Date	Merchant Name/Transaction Description	Amount
Total			

REASON/DISPUTE TYPE (choose 1 or 2)

- 1** I/My supplementary made the transaction(s) but (check the most applicable reason below)
- I was billed twice, i.e. 2 or more transactions with the same transaction date, amount, and establishment name
 - I cancelled the transaction(s), but still appeared on my statement of account (attach the cancellation document)
 - The good(s) and/or service(s) I ordered on my card was/were not delivered/rendered (indicate the following details below)
- | | |
|---|--|
| Expected date of receipt of good(s) and/or service(s) | |
| Specific description of good(s) and/or service(s) | |
- The transaction amount on my statement of account is different from the amount on my charge slip* (attach a clear charge slip)
*please note that the following are valid transactions that may not be reflected in your original charge slip(s): (a) tips not part of the billed amount or (b) foreign currency conversion fee
 - I returned the item(s), but the transaction(s) was/were not reversed (attach the return confirmation document from the merchant)
 - The transaction(s) was/were paid through cash, debit or another credit card but still appeared on my statement of account. (provide the charge slip or receipt of the transaction)
- 2** I/My supplementary card did not make the transaction(s) (check the most applicable reason below)
- I was billed for transaction(s) with an EastWest Credit Card that I do not have, i.e. I never received or applied for the credit card.
 - The transaction(s) was/were made using a lost/stolen card that I have reported.
 - I have the physical credit card but got billed for transaction(s) that I did not make i.e. questionable online transaction(s) or charges from merchants that I did not transact with.

The circumstances I have stated are true and correct and the documents I have submitted are authentic or duly issued.

- By sending this form, I understand that:
- ✓ The investigation may take 45 calendar days;
 - ✓ Applicable fees shall be applied if the disputed transaction(s) is/are proven valid such as, not only limited to retrieval fee, card replacement fee, finance charge and transaction amount;
 - ✓ The transaction(s) may be put on hold or temporarily reversed during investigation;
 - ✓ The disputed transaction(s) will be processed upon receipt of complete documents;
 - ✓ I shall update EastWest Bank for any changes in my contact numbers (mobile number or e-mail address) to enable the Bank to communicate to me the updates/requirements to process the dispute; and
 - ✓ I have given my consent to use the information I provided for the sole purpose of reviewing and processing of dispute.

Please send this form to csdocs@eastwestbanker.com or via fax at (+632) 8784-5601 to 02.

SIGNATURE OVER PRINTED NAME

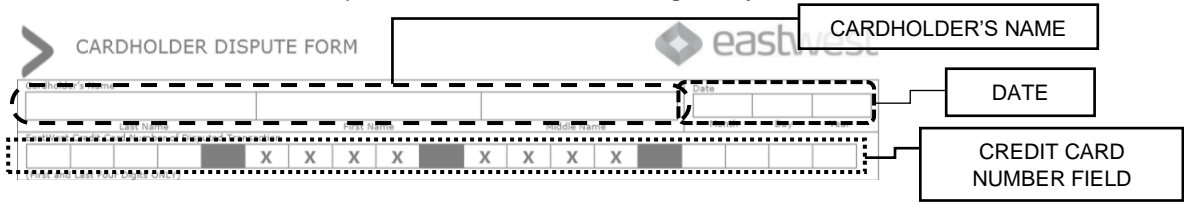
For inquiries and feedback, you may call EastWest's 24-Hour Customer Service at (+632) 8888-1700, e-mail cards@eastwestbanker.com or text EWBCCS<space><your message> and send to 09178881700.

EastWest is regulated by Bangko Sentral ng Pilipinas with email address at consumeraffairs@bsp.gov.ph.

PROCEDURE ON HOW TO FILL OUT THE DISPUTE FORM ACCURATELY

STEP 1: CARD HOLDER INFORMATION SECTION

- Fill out the **Cardholder's Name**, **EW Credit Card Number** where there is/are disputed transaction/s and **DATE** when the form was accomplished.
- Note that for Credit Card Number, just fill in the **first and last four digits only**.



STEP 2: TRANSACTION(S) FOR DISPUTE SECTION

- Fill out the form with the transactions that are being requested to be disputed.
 - Sale Date – Date when the transaction(s) were made.
 - Post Date – Date when the transaction(s) were posted in the system
 - Merchant name / Transaction Description – Name of the merchant and the description of transaction.
 - Amount – Amount of the transaction
- Note that if the count of dispute is more than 5, the additional transactions should be written on a separate sheet of paper.

Sample Transaction Slip

Merchant Name: **SUPERMARKET**

Sale Date: **JUN 03, 20 18:28:57**

Amount: **PHP4,517.15**

Sample SOA

Sale Date	Post Date	Transaction Details	Amount
04/23/20	04/26/20	PREVIOUS STATEMENT BALANCE	10,227.09
04/28/20	04/29/20	CARD NUMBER	
04/28/20	04/29/20	MERCURY DRUG 0146 MANILA PHL	3,812.50
04/30/20	05/03/20	Reference: 1 0	2,415.00
05/08/20	05/10/20	MERCURY DRUG 0249 MANILA PHL	500.00
05/08/20	05/10/20	Reference: 1 0	
05/12/20	05/13/20	PAYMAYA ADD MONEY MANDALUYONG PHL	500.00
05/16/20	05/17/20	Reference: 1 0	
		PAYMAYA ADD MONEY MANDALUYONG PHL	3,328.40
		Reference: 1 0	
		SUPER 8 GAGALANGIN TON MANILA PHL	-5,000.00
		PAYMENT RECEIVED - THANK YOU	2,155.50
		MERCURY DRUG 0249 MANILA PHL	
		Reference: 1 0	
		PAYMENT RECEIVED - THANK YOU	-5,228.00
		SUB TOTAL	12,710.49
		TOTAL	12,710.49

STEP 3: REASON/DISPUTE TYPE SECTION

REASON/DISPUTE TYPE (choose 1 or 2)

1/My supplementary made the transaction(s) but (check the most applicable reason below)

- I was billed twice, i.e. 2 or more transactions with the same transaction date, amount, and establishment name
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Expected date of receipt of good(s) and/or service(s)	
Specific description of good(s) and/or service(s)	
- The transaction amount on my statement of account is different from the amount on my charge slip* (attach a clear charge slip)

*please note that the following are valid transactions that may not be reflected in your original charge slip(s): (a) tips not part of the billed amount or (b) foreign currency conversion fee
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- The transaction(s) was/were paid through cash, debit or another credit card but still appeared on my statement of account (attach the return slip or receipt of the transaction)

2/My supplementary card did not make the transaction(s) (check the most applicable reason below)

- I was billed for transaction(s) with an EastWest Credit Card that I do not have, i.e. I never received or applied for the credit card.
- The transaction(s) was/were made using a lost/stolen card that I have reported.
- I have the physical credit card but got billed for transaction(s) that I did not make i.e. questionable online transaction(s) or charges from merchants that I did not transact with.

Put a checkmark on the applicable transaction history (made or did not make the transactions).

After choosing the applicable transaction history, put a check mark on the specific applicable reason.

- **Transaction History Option 1** under 3rd option – Ensure to fill out the table below.
- **Transaction History Option 2** – Make sure to read the descriptions carefully. For example, if the transaction is unauthorized/unrecognized and physical card is with you, put a check mark on the 3rd option.

STEP 4: SIGNATURE SECTION

Please send this form to csdocs@eastwestbanker.com or via fax at (+632) 8791-2401 to 07.

SIGNATURE OVER PRINTED NAME

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Put the signature over the printed name of the cardholder.