

Disputed Transaction Form



Throughout this form we'll tell you what information we need from you in order for us to deal with your claim. Please also make sure that you include any correspondence or documents you have relating to your dispute - any missing information could cause delay.

Please fill in ALL the boxes below if not typed please enter in BLOCK CAPITALS, using black ink

Important notes

- We might not be able to help with your dispute unless all required documents are submitted with this form
- If you have any questions about this dispute please contact us via the in-app chat, the website chat or via email at help@osper.com
- Please return this form to help@osper.com or by post to: Osper, Office 13 Telfords Yard, 7-8 The Highway, London, E1W 2BS

Cardholder details (Card relating to dispute)

Title:		Surname	
First Name(s)			
Account Number (8 digit number on front of the card)			

Disputed transaction details

Please complete the transaction detail(s) below.

If you are disputing more than three transactions, please provide the details on a separate sheet.

Transaction Date	Merchant Name	Transaction Amount	Disputed amount

Continued overleaf

Disputed Transaction reasons

Please now select the most appropriate reason for the dispute from those listed below with an **X**, attaching any documents that may be requested to your email.

X	Reason
<input type="checkbox"/>	<p>ATM: cash not received/incorrect cash dispensed I, nor my child received some / none of the cash requested. Amount requested was £ , the amount received was £ , <i>(please delete as appropriate)</i>.</p>
<input type="checkbox"/>	<p>Not authorised or participated I, nor my child, authorised or participated in the transaction(s) listed above</p>
<input type="checkbox"/>	<p>Goods or services not received or as described I, or my child, authorised these transactions but did not receive the goods/services or they were not as described. I have attempted to contact the merchant but I have been unsuccessful in resolving this dispute with them. (Please provide any invoices/receipts as well as a copy of all correspondence between yourself and the service provider / retailer)</p>
<input type="checkbox"/>	<p>Transaction amount is incorrect The amount I, or my child, authorised differs to the amount charged to my account. I have attached a copy of the sales receipt / invoice, or other proof, that the amount charged is incorrect</p>
<input type="checkbox"/>	<p>Card charged two or more times for the same purchase My card has been charged <i>(number)</i> times. Only <i>(number)</i> of these transactions were authorised by me, or my child. I have enclosed any relevant documentation to support this.</p>
<input type="checkbox"/>	<p>Only authorised one transaction I, or my child authorised one transaction with the merchant for £ but not for £ . The card was in mine, or my child's possession when the disputed transaction took place. I have enclosed a copy of my sales invoice/receipt or an explanation as to why I don't have this.</p>
<input type="checkbox"/>	<p>Refund not processed The merchant agreed to refund the account with £ , but no refund has been processed. I have enclosed a copy of the refund voucher or letter/email from the merchant confirming a refund is due.</p>
<input type="checkbox"/>	<p>Recurring transaction I, or my child, have previously cancelled the transaction payment with the merchant . The date of the cancellation was / / . I have enclosed a proof of cancellation</p>
<input type="checkbox"/>	<p>Other My dispute does not fall into one of these categories. (Please give a full explanation regarding this dispute below, enclosing any documentation to support your claim.</p>

Additional information *(Please provide any additional information below).*