

## Fraud Dispute Questionnaire

### Visa Resolve Online

**VROL Case Number 2195087492**

**Member Case Number: D-7362389976**

**Processing Date: 2/2/2021**

#### Transaction Information

Card/Acct #: 4587236908230087

Tran Type: Sale

Issuer: ABZY Bank, N.A - VISA

Network/Card: Credit, VISA

Tran Date: 12/10/2021

Tran ID: 436791123450946

Tran Amount: 5600 USD

Acquirer: WEFA Bank, National Association

ARN: 23678000042456295430000000324

Jurisdiction: Domestic-US

Merchant: Qmed Pharmacy

Retrieval Ref#: 1334735790643

Address: 27 Rider Lane, Mill Valley, CA, 94941 United States

Location: California, US

#### Dispute Information

Dispute Amount #: 5600 USD

Dispute Category/Condition: 83 Fraud – Card Absent Environment

Dispute Date: 12/10/2021

#### Certification/Elaboration

Certification that the cardholder denies authorizing or participating in the disputed transaction

#### Fraud Report

Fraud Type: 83 – Card Absent Environment

#### Comments and Documents

Comments:

Documents:

#### Issuer Contact Information

Name:

Phone:

Email:

#### Cardholder Contact Information

Name Type:

Prefix:

First Name:

Middle Name:

Last Name:  
Suffix:  
Phone:  
Business Phone:  
Cell Phone:  
Fax:  
Email:  
Address:

City:  
State/Region:  
Postal Code:  
Country: US  
Region:  
Best Time to Call:  
Does the cardholder give permission to release this information to the Merchant: No

Closure Report Type :S

Data Missing/Stolen :

Security Closure Date :20211224

Stolen Card info :

Stolen Explanation :NA

Card Type :

Reported to Police : No

Any Addl Closure Info Provided:NA

Police Report Case Number :

Police Report City :

Police Report Precinct :

Police Report Phone Number :

Police Report Detective Name :

Arrest Made? :N

Suspect cited? :

Suspect Name : Mike White

Suspect Address Street :

Suspect Address City :

Suspect Address State :

Suspect Address Zip Code :

Suspect Reason :

Suspect Phone :

Suspect Relationship :

Account provisioned to a mobile contactless device :

Multiple Accounts Provisioned :

Unauthorized provisioning :

Phone lost or stolen :

Name of user whose phone lost or stolen :

Phone number of the lost/stolen/missing mobile device :

Fraud Transaction/Authorization Details

Acct #	Sale Date	Merchant name/City/State	Amount	MCC	POS Mode Indicator	MCCText	Point of Sale	Person Code	Original Account Number	SEID/Stable Hardware ID
4587236908230087	20211210	Qmed Pharmacy	5600	1098	01	DENTAL/MEDICAL	Card		4587236908230087	

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By completing this form, you agree that the information captured is correct to the best of your knowledge. Any available documentation which supports this dispute should be attached.