

If you have any questions, please contact support@bnine.com or (888) 297-5504

Use Appendix A (page 2) or additional pages to document additional disputes. Once completed, please attach this form and any supporting documentation to assist in the investigation of your dispute to the original email ticket you received.

Your Name
Nijal Terrez Pope
Account#
9510018449948222
Last 4 digits of the card#
8503
Transaction date
11/27/2024
Amount\$
\$199.748
Merchant name

daleelstore.com Riyadh

SECTION 1: TRANSACTION NOT AUTHORIZED

I certify that / didn't use nor authorized anyone to use my card for the above transaction. I also certify that / did not receive any value in connection with the Disputed Transaction, I authorize you to share the information provided by me with law enforcement, banking regulators and other third parties in connection with any investigation of the Disputed Transactions, including any criminal investigation. I agree to cooperate in any such investigation and in the prosecution of any person believed to be responsible for fraudulently using my card. I certify that the information in this form is true and correct.

What TIME did you lose your card?							
What DATE did you lose your card?							
STOLEN							
LOST							
■ NOT RECEIVED							
☐ IN MY POSSESSION							
My card was (Select one):							

What TIME did you realize your card was missing?
What DATE did you realize your card was missing?
Do you know who made these transactions? (Select one): NO YES (If yes, complete the following)
Who do you think made or authorized these transactions? A scammer/thief
What is your relationship to this person? No relationship or previous transaction
Have you given permission to anyone to use your card? (Select one): NO YES (If Yes, complete the following) Name:
Relationship:
When was the last time you used your card? Date:
11/27/2024 Time:
08:43:26 am Amount: \$ + \$329.98
Merchant Name or ATM Location:
Where do you normally store your card? On the app. Where do you normally store your PIN? In my head.
Please list other items that were lost or stolen, including your mobile phone or any additional cards (if applicable):

Have you filed a police	report? (Select one)						
NO							
YES (If Yes, complete the following)							
District/Officer name:							
Report number:							
Suspect name:							
Please provide any add	litional relevant info	rmation:					
Cardholder signature:							
Date:							
12/3/2024							
Contact number (durin	g the hours of 8am-5	pm PST):					
205-705-4993							

Appendix A

Transaction date	Amount	Merchant Name	Reason for dispute
11/27/2024	\$95.89	daleelstore.com Riyadh	Unauthorized purchase/Theft
11/27/2024	\$47.95	daleelstore.com Riyadh	Unauthorized purchase/Theft
11/27/2024	\$19.98	daleelstore.com Riyadh	Unauthorized purchase/Theft
11/27/2024	\$19.98	daleelstore.com Riyadh	Unauthorized purchase/Theft