

P.O. Box 182084 Columbus, OH 43218 Bread Savings Customer Care: 833-755-4354 Savings.Breadfinancial.com

Instructions for Completing a Dispute Form

Each disputed transaction must meet the following criteria in order to be processed:

- 1. The account holder must notify Bread Savings and complete this form within <u>60 Calendar Days</u> of the statement date on the statement the disputed transaction first appeared.
- 2. One form may be used for multiple transactions.
- 3. All sections must be completed.

For questions about filling out this form, please contact Bread Savings at:

(833) 755-4354, Monday - Friday, 8am - 4:00 CT

Please submit the <u>Dispute Form</u> by one of the following methods:

Secure Message	Login to your online banking and select "Messages" from your menu or Dashboard then select to "Start a Conversation" → select the ⊕ icon next to "Type your message" → select "Files" → select the completed form → type and title your message: Dispute → select "Send"		
Fax	801-542- 9056		
Mail	Bread Savings	For Overnight Delivery	
	Attn: Bread Savings Management	Bread Savings	
	P.O. Box 182084	Attn: Bread Savings Operations	
	Columbus, OH 43218	3095 Loyalty Circle	
		Columbus, OH 43219	

Dispute Form

1.	I am first duly sworn and state I am:	Account			
	Name_				
	Mailing Address				
	City, State, Zip Code Phone Number Home				
	Email Address				
2.	The disputed transaction(s) is/are a: (check all that apply)				
	☐ Check				
	☐ Wire				
	\square ACH (Electronic Funds Transfer)				
	\square Other (please describe)				
3.	Transaction Details:				
	<u>Date</u>	<u>Description</u>	<u>Amount</u>		
					
	(16 m	· · · · · · · · · · · · · · · · · · · ·			
	(ii more	space is required, use a separate sheet)		
4.	Description of dispute				
	· · · · · · · · · · · · · · · · · · ·				
5.	I understand this dispute may be subject to investigation by local, state, and/or federal law enforcement agencies. I				
	may be required to comply with a court order or subpoena to give testimony.				
6.	_	nderstand making a false sworn statement is subject to federal and/or state statutes and may be punishable by			
	fines and/or by imprisonment.				
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Sig	nature:	Date:			
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