ALLPOINT SURCHARGE REIMBURSEMENT FORM

Please fill out as completely as possible and fax to Dylan Conklin at 301-492-2101 or email to dconklin@cardtronics.com Allpoint will research the transaction and issue a credit to the card issuing-institution as soon as the transaction is verified (usually takes 24-48 hours).

First Six Digits of Card Used: __ __ __ __ __ __

Client Name: _____

ATM Location Name: _____

ATM Location Address: _____

_____

Date and Time of Transaction: _____

Amount of Withdrawal: _____
(Note: The amount listed should be the total amount of the transaction)

Terminal ID: _____
(Note: The terminal ID can be found either on the ATM receipt or in the card processor's transaction records, and is generally an alphanumeric code of 6-8 digits)

Contact Information: _____

Other Comments: _____

_____

_____

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