

TEMPLATE F - CHARGEBACK ESCALATION

To: Controller

From: Accounting Department

Subject: High-Value Chargeback Requiring Immediate Action

CHARGEBACK DETAILS

Chargeback ID: _____

Deal Number: _____

Customer Name: _____

Product Type: _____

Chargeback Amount: \$_____

Date Received: _____

Days Open: _____

COMMISSION OFFSET STATUS

Commission Offset Applied: ☐ Yes ☐ No

If Yes, Amount: \$_____

REQUIRED ACTION

Recommended Next Step: _____

Timeline for Resolution: _____

Additional Support Required: _____

SUPPORTING DOCUMENTATION

☐ Chargeback Notice from Provider

☐ Deal Jacket Extract

☐ Commission Worksheet

☐ Product Contract

ESCALATION JUSTIFICATION

Amount exceeds \$2,500 threshold requiring Controller approval per Section 6