

Cardmember Services
Attn: Corporate Dispute Dept.
P.O. Box 6344 Fargo, ND 58125-6344
701-461-3463

Account #: _____ Cardholder's Name: _____

Merchant Name: _____ Post Date: _____

Dispute Amount: _____ Transaction Amount: _____

CARDHOLDER SIGNATURE DATE (AREA CODE) TELEPHONE NUMBER

Please read carefully each of the following situations and check the one most appropriate to your particular dispute. If you have any questions, please contact Customer Service at 1-800-344-5696 for further instruction.

- 1. UNAUTHORIZED MAIL OR PHONE ORDER**
 I have not authorized this charge to my account. I have not ordered merchandise by phone or mail, or received any goods or services.
- 2. DUPLICATE PROCESSING**
 The transaction listed above represents multiple billing to my account. I only authorized one charge for this amount. Date _____ and Reference # _____ of first transaction.
- 3. MERCHANDISE OR SERVICE NOT RECEIVED IN THE AMOUNT OF \$ _____.**
 My account has been charged for the above transaction, but I have not received the merchandise or service. The expected date of delivery _____ (MMDDYY). I contacted the merchant on _____ (MMDDYY) and requested that my account be credited. I spoke with _____ (name).
- 4. MERCHANDISE OR SERVICE CANCELED IN THE AMOUNT OF \$ _____.**
 I notified the merchant on _____ (MMDDYY) at _____ am/pm to cancel the pre-authorized order/reservation. Cancellation # _____ (required for Hotel Rooms). Reason for cancellation _____ Person I spoke to _____.
- 5. MERCHANDISE RETURNED IN THE AMOUNT OF \$ _____.**
 My account has been charged for the above listed transaction, but the merchandise has since been returned. **(Please enclose a copy of the postal or UPS receipt)**
- 6. MERCHANDISE WAS RECEIVED DAMAGED OR DEFECTIVE**
 The merchandise shipped to me arrived damaged and/or defective (circle one) on _____ (MMDDYY). I returned it on _____ (MMDDYY). I contacted the merchant on _____ (MMDDYY) and requested that my account be credited. I spoke with _____ (name). Enclosed is an explanation of how the merchandise was damaged or defective.
- 7. NOT AS DESCRIBED**
 (Cardholder must specify what goods, services, or other things of value received). The item(s) specified do not conform to what was agreed upon with the merchant. (The cardholder must have attempted to return the merchandise and state so in their complaint). Please provide details on separate sheet of paper.
- 8. PAID BY OTHER MEANS**
 I did participate in the transaction; however, I paid for the transaction using another form of payment. (Describe form of payment): _____ Enclosed is a copy of my proof of other payment (i.e. canceled check, other credit card statement, cash receipt, etc.).
- 9. CREDIT NOT RECEIVED**
 I have received a credit voucher for the above listed charge, but it has not yet appeared on my account. **A copy of the credit voucher is enclosed.**
- 10. ALTERATION OF AMOUNT**
 The sales receipt amount was increased from \$ _____ to \$ _____. **Enclosed is a copy of my receipt.**
- 11. INADEQUATE DESCRIPTION/UNRECOGNIZED CHARGE**
 I do not recognize this charge. Please supply a copy of the sales draft for my review. I understand that when a valid copy is sent to me, a Statement of Questioned Item Form must be provided and will include the copy of the sales draft if a further dispute exists. If a copy of the sales draft cannot be obtained, a credit will appear on my account.
- 12. COPY REQUEST**
 I recognize this charge, but need a copy of the sales draft for my records.
- 13. If none of the above reasons apply – please describe the situation:**

