

PURCHASING CARDHOLDER DISPUTE FORM

CARDHOLDER INFORMATION

Name _____ Dept PO Box _____

City/State/Zip _____ Work Phone _____

Home Phone _____ Last 4 Digits of your card _____

SIGNATURE _____ DATE _____

DISPUTE

Credit Not Posted (Attach Credit Slip)

Duplicate Posting

Erroneous Amount (Attach Sales Receipt)

Other _____

MERCHANT NAME/DESCRIPTION

DOLLAR AMOUNT

_____	_____
_____	_____
_____	_____

DESCRIBE DISPUTE

SEND DISPUTE TO

US Bank Visa Purchasing Card
ATTN: Purchasing Card Disputes
P O Box 6335
Fargo, ND 58125-6335

Customer Service:
Toll Free: 1-800-344-5696
Fax: 701-461-3463