

## WHEN COMPLETED, PLEASE FAX TO: US BANK - DISPUTES 701-461-3464

Merchant Name:		Post Date:	(MM/DD/YY)
Dispute Amount:		Transaction Amount: \$	
I have examined the charges made to my account and I am disputing the above item for one of the following reason			
	The sales receipt amount was increased from \$ to \$  I did not authorize nor did I participate in the transaction.  Although I did participate in a transaction with the merchant, I was billed for transactions totaling  \$ that I did not engage in, nor did anyone authorized to use my card. I do have my credit card in my		
	possession. Enclosed is a copy of my authorized sales slip.  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 form of payment (i.e. canceled check, other credit card statement, cash receipt, etc.)		
	I did not receive \$ from an ATM located at  I have not received the merchandise which was to have been shipped to me. The expected delivery date was (MM/DD/YY). I contacted the merchant (MM/DD/YY) and		
	requested that my account be credited. I spoke with		
	defective.  I notified the merchant on(MM/DD/YY) atam/pm to cancel the pre-authorized order/reservation. Cancellation # (required). Reason for cancellation . Person I spoke to		
	I have returned/canceled (circle one) the merchandise on (MM/DD/YY) because		
	Enclosed is documentation showing proof of return or cancellation.  The attached credit slip was listed as a charge on my statement.  I was issued a credit slip for \$		
	Sale #1 \$ Ref. # Sale #2 \$ Ref. # I am not disputing this charge, however, I nee Other, please explain:	d a copy for my records.	
Account #:			
Cardholder's Name:			
Cardholder's Signature:			
Date Signed:		Daytime Phone #:	