

Commercial Card
Statement of Disputed Item

Instructions: You should first make good-faith efforts to settle a claim or dispute for purchases directly with the merchant. If assistance from Bank of America is required, please complete this form, and mail or fax with required enclosures within 60 days from the billing close date to:

ProCard Coordinator
Attn: Don Barwick
Purchasing Department
P.O. Box 3011
Commerce, TX 77429-3011
Phone: 903-468-3056 Fax: 903-886-5039

Company Name: _____
Account Number: _____
Cardholder Name: _____

This charge appeared on my statement:

Billing close date: _____
Transaction date: _____
Reference Number: _____
Merchant Name: _____
Merchant Location: _____
Posted Amount: _____
Disputed Amount: _____

****Please check only ONE of the following****

Unauthorized Transaction

I did not authorize, nor did I authorize anyone else to engage in this transaction. No goods or services represented by the above charge were received by me or anyone I authorized. The card was in my possession at the time of the _____ transaction.

Charge Amount Does Not Agree With Order Authorizing The Charge

The amount entered on the sales slip was changed from \$_____ to \$_____. I have enclosed a copy of the unaltered sales slip.

Merchandise or Services Not Received

I have not received the merchandise or services represented by the above transaction. The expected date of delivery or services was _____. (On your business letterhead, please describe your attempt to resolve this matter with the merchant, the date(s) you contacted them and their response).

Disputed Transaction

I did engage in the above transaction, which I am now disputing. I have contacted the merchant, but I have been unable to return the merchandise and/or I have been unsuccessful in reaching an acceptable resolution with them. (On your business letterhead, please describe your attempt to resolve this matter with the merchant, the date(s) you contacted them and their response).

Defective or Wrong Merchandise

I returned the merchandise on (date) _____ because it was:(please choose one):
___defective ___wrong size ___wrong color ___wrong quantity

Recurring Charges After Cancellation

On _____ (date), I notified the above merchant to cancel our monthly/yearly agreement. Since then, my account has been charged _____ time(s). (Please enclose a copy of the merchant's response to confirmation of your confirmation of your cancellation).

Items Charged Already Paid by Other Means

I already paid for the goods and/or services represented by the above charge by means other than my card. (We must have a copy of the front and back of the canceled check, money order, cash receipt, credit card statement, or other documentation as proof of purchase/payment. On your business letterhead, please describe your attempt to resolve this matter with the merchant, the date(s) you contacted them and their response).

Credit Appears as a Charge

The enclosed Credit Voucher appeared as a charge on my card account

Credit From Merchant Not Received

I did not receive credit for the enclosed Credit Voucher within 30 calendar days from the date it was issued to me by the

Hotel Reservation Canceled

I did make a reservation with the above hotel which I then canceled on _____ (date) at _____ (time). At that time, I asked for a cancellation number which is _____. (Please check one if applies):

___I was not given a cancellation number

___I was not told at the time that I made the reservation that my account would be charged for a "No Show"

Double or Multiple Charges

My account has been doubled charged. The first charge appeared on my _____ (date) billing

Cardholder's Name (Printed)

Cardholder's Signature

Date

Phone Number