US Bank Dispute Form
(for use by University of California, Berkeley Cardholders only)

Mail or fax completed form to: Cardmember Services, Attn: Corporate Dispute Dept., P.O. Box 6344 Fargo, ND 58125-6344, FAX# 701-461-3463
Also, mail or fax a copy to: bluCard Administration, 6701 San Pablo Ave, Ste 218, MC #5600, Berkeley, CA 94720-5600, FAX# 510-642-6803

Account #: __________________________ Cardholder's Name: __________________________
Merchant Name: __________________________ PUID / Bank Ref #: __________________________
Department Name: __________________________
Department Address: __________________________
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 US Bank 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.

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.

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.

5. **MERCHANDISE RETURNED IN THE AMOUNT OF $_____________.**
   - My account has been charged for the above listed transaction, but the merchandise has since been returned.

6. **MERCHANDISE RECEIVED DAMAGED OR DEFECTIVE**
   - The merchandise shipped to me arrived damaged and/or defective (circle one) on ________________ (MMDDYY).

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.

9. **CREDIT NOT RECEIVED**
   - I have received a credit voucher for the above listed charge, but it has not yet appeared on my account.

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 appears 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:

____________________________________________________

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