

STATEMENT OF QUESTIONED ITEM FORM

(Retain a copy for your file)

RETURN ADDRESS

Name: _____
Address: WEBER STATE UNIVERSITY
Dept.: _____
Mail Code: _____ UNIVERSITY CIRCLE
 OGDEN UT 84408 - _____
Phone (801) 626 - _____ Fax (801) 626 - _____

TRANSACTION INFORMATION

Purchasing Card #: _____
Reference #: _____
Merchant Name: _____
Amount (as shown on the statement): _____
Transaction Date: _____

To assist our investigation, please indicate below the reason for your dispute by checking the appropriate box. If you have any questions, please call our Dispute Representatives at (847) 488-8885.

I did not make nor authorize the above transaction. (Please indicate the whereabouts of your purchasing card)

There is a difference in the amount I authorized and the amount I was billed. (A copy of your charge must be enclosed) Amount Billed \$ _____ Correct Amount \$ _____

I only transacted one charge, and I was previously billed for this sales draft.
Date of previous charge: _____

The above transaction is mine, but I am disputing it for the following reason: (Please state reason in detail)

Please send me a copy of the sales draft. (Your account will be charged \$5.00 for each copy supplied)

I have received a credit voucher for the above transaction, but it has not yet appeared on my account. (A copy of the credit voucher must be enclosed)

My account has been charged for the above transaction, but I have not received this merchandise. The date of expected delivery was: _____ The details of my attempt to resolve the dispute with the merchant and the merchant's response are:

My account has been charged for the above transaction, but the merchandise has since been returned. (Please enclose a copy of your postal receipt)

Other (please explain): _____

Make sure all copies of documents are dark enough to be legible, especially if faxed. Thank you!

Signature _____ Date _____

Send completed form to: Purchasing Card Dept. 1013 University Circle, Ogden, UT 84408-1013
Or Fax to: (801) 626-6498