

**Attachment F.  
Lamoille North p-CARD STATEMENT DISPUTE FORM**

Name: \_\_\_\_\_

Position Title: \_\_\_\_\_

p-Card Number: \_\_\_\_\_

**User Statement of Disputed Item(s)**

*If you believe an item on your statement is in error, complete and sign this form within 60 days after billing.*

***Please be as complete as possible when explaining your inquiry and remember to include relevant documents if any. Insufficient documentation may delay the resolution of your inquiry. Also, please be sure to make a good faith effort to resolve with the merchant prior to filing a dispute.***

School/Department Name \_\_\_\_\_

Amount in question \$ \_\_\_\_\_ Post Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Transaction Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Reference Number \_\_\_\_\_

Merchant Name \_\_\_\_\_

**I have examined charges made to my P-Card statement and dispute the following item(s).  
Check the box below that best fits your situation and supply the requested items or information.**

\_\_\_ 1. A credit for \$ \_\_\_\_\_ was not applied to my card number. **(Attach credit slip)**

\_\_\_ 2. The amount charged to my card number is incorrect. The correct amount is \$ \_\_\_\_\_.  
**(Attach copy of the sales slip that shows the correct amount)**

\_\_\_ 3. I certify that the charge listed above was not made by me. Nor were the goods or services for this charge received by me or anyone authorized by me.  
**(Attach detailed letter outlining your attempts to resolve with merchant)**

\_\_\_ 4. Although I did participate in a transaction with the merchant, I was billed for additional transactions, which I did not authorize. The valid charge was billed to my card number on \_\_\_\_/\_\_\_\_/\_\_\_\_ (date) in the amount of: \$ \_\_\_\_\_. I am disputing the additional amount of: \$ \_\_\_\_\_.  
**(Attach a copy of the authorized sales slip)**

\_\_\_ 5. I have not received the merchandise that was to have been shipped to me. Expected date of delivery was \_\_\_\_/\_\_\_\_/\_\_\_\_ (date). I contacted the merchant on \_\_\_\_/\_\_\_\_/\_\_\_\_ (date)

\_\_\_ 6. I have \_\_\_ returned \_\_\_ cancelled merchandise on \_\_\_\_/\_\_\_\_/\_\_\_\_ (date) because \_\_\_\_\_

**Please provide proof of return/cancellation. If this is a hotel cancellation, please provide cancellation number.**

\_\_\_ 7. Merchandise that was shipped to me has arrived damaged and/or defective on \_\_\_\_/\_\_\_\_/\_\_\_\_.

\_\_\_ 8. Other (please specify) \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**I have reviewed the above information for Bank action.**

\_\_\_\_\_ Date \_\_\_\_\_

Central Office