



**PROCUREMENT CARD**  
**CARDHOLDER DISPUTE FORM**

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

Card Number: \_\_\_\_\_

College Phone Number: \_\_\_\_\_

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

Date of Disputed Transaction: \_\_\_\_\_

**DISPUTE TYPE:**

\_\_\_ Incorrect Charge      \_\_\_ Credit Not Received

\_\_\_ Duplicate Charge      \_\_\_ Replacement Not Received

\_\_\_ Erroneous Charge      \_\_\_ Other

Explanation of Dispute: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Merchant's Response: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Date: \_\_\_\_\_