



Business Purchasing Service Center

# Dispute Form

Cardholder Name:

CE Number:

Transaction Date:

Transaction Amount: \$

Merchant Name:

Please return this completed and signed Dispute Form to the Business Purchasing Service Center by fax at 866-452-3664 or email at [BPSCdispute@wellsfargo.com](mailto:BPSCdispute@wellsfargo.com). All disputes must be received within 60 days from the posting date of the charge.

Please check the statement that best describes your dispute (select only one option). Attach any supporting documentation such as credit receipts, copies of other payment method, or merchant correspondence.

Prior to filing with Wells Fargo Bank you must review the dispute resolution process to resolve your dispute.

Duplicate Transaction: A single transaction has posted more than once.

Cancelled Transaction: cancelled the transaction

Incorrect Amount: A transaction for \$ \_\_\_\_\_ posted on my statement as \$ \_\_\_\_\_. I have enclosed my receipt which shows the correct charge amount.

Merchandise/Service not Received: I did not receive the service or merchandise requested.

Paid by other means: I have already paid this transaction (please attach copy of other payment)

Check     Cash     Other Credit Card     Money order

Credit Not Posted: The merchant did not process a credit transaction receipt. (Please attach receipt copy).

Returned Merchandise: returned the merchandise to the merchant and have not received a credit

Unrecognized Transaction: I do not recognize the transaction

Copy Request: I would like to request a copy of the transaction. I am aware this is not a formal dispute.

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

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

If claiming an unauthorized transaction, your account must be closed.  Yes  No