

Cardholders' Statement of Questioned Item Form (CSQI)

Directions

1. Attempt to resolve the dispute with the vendor.
2. Complete the Cardholder's Statement of Questioned Item Form (CSQI). This form is available from your Approving Official or Agency Program Coordinator.
3. Pay particular attention to:
 - Describing the attempted vendor resolution
 - Signing the form
 - Providing your day time telephone number including area code
 - Attaching any supporting documentation such as credit vouchers or return shipping documents such as postal receipts, UPS receipts, etc.
4. Return the original form to:
 - U.S. Bank I.M.P.A.C. Governmental Services
 - P.O. Box 6346
 - Fargo, North Dakota 58125-6346
 - Fax: (701) 461-3910
5. The Statement of Questioned Item (CSQI) must be returned to Mount Diablo Unified School District promptly after the statement date on which the transaction appeared in order to preserve your rights to dispute the transaction.
6. Retain a copy for your files and forward a copy with your Certified Statement of Account to your Approving Official or other routing as indicated by your office's internal procedures.

If you have any questions concerning disputing a transaction, you are encouraged to call the Mount Diablo Unified School District Purchasing Department at (925) 825-7440, ext. 3741 so that we might assist you.

[Form to submit is below](#)

**MOUNT DIABLO UNIFIED SCHOOL DISTRICT
CARDHOLDER STATEMENT OF QUESTIONED ITEM**

(Please print or type in black ink)

Cardholder's Name (please print or type)

Account Number

Cardholder's Signature

Date

(_____)_____
Telephone Number

The transaction in question as shown on Statement of Account:

Transaction Date	Reference Number	Merchant	Amount	Statement Date
_____	_____	_____	_____	_____

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 at (925) 825-7440, ext. 3741. We will be more than happy to advise you in this matter.

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 DATE OF THE FIRST TRANSACTION WAS _____
 The transaction listed above represents a multiple billing to my account. I only authorized one charge from this merchant for this amount. My card was in my possession at all times.

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. I have contacted the merchant, but the matter was not resolved. (Please provide a separate statement detailing the merchant contact, and the expected date to receive merchandise).
 My account has been charged for the above listed transaction. I have contacted this merchant on _____ (date) and canceled the order. I will refuse delivery should the merchandise still be received.

4. MERCHANDISE RETURNED IN THE AMOUNT OF \$ _____
 My account has been charged for the above listed transaction, but the merchandise has since been returned. *Enclosed is a copy of my postal or UPS receipt.

5. CREDIT NOT RECEIVED
 I have received a credit voucher for the above listed charge, but it has not yet appeared on my account. A copy of the credit voucher is enclosed. (Please provide a copy of this voucher with this correspondence).

6. ALTERATION OF AMOUNT
 The amount of this charge has been altered since the time of purchase. Enclosed is a copy of my sales draft showing the amount for which I signed. The difference of amount is \$ _____.

7. 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 (CSQI) 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 appear on my account.

8. COPY REQUEST
 I recognize this charge, but need a copy of the sales draft for my records.

9. SERVICES NOT RECEIVED
 I have been billed for this transaction; however, the merchant was unable to provide the services.
 Paid for by other means. My card number was used to secure this purchase; however, final payment was made by check, cash, or another credit card. (Enclosed is my receipt, canceled check (front & back), copy of credit card statement, or applicable documentation demonstrating that payment was made by other means).

10. NOT AS DESCRIBED
 (Cardholder must specify what goods, services, or other things of value were 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 compliant).

11. NONE OF THE ABOVE REASONS APPLY
 If none of the above reasons apply – please describe the situation:

(Note: Provide a complete description of the problem, attempted resolutions and outstanding issues. Use a separate sheet of paper, if necessary, and sign your description statement).