



HCR CONTRACT CARRIER ACCOUNT DISPUTE FORM

Step 1: COMPLETE CONTACT INFORMATION

Account Number _____

Contact Name _____ Phone Number _____

Email _____ Fax Number _____

Step 2: COMPLETE TRANSACTION DISPUTE INFORMATION

ACCOUNT # (The First Nine Digits of your Card number)	CARD NUMBER/ VEHICLE NUMBER (The Last Six Digits of your Card number)	TRANSACTION DATE	TRANSACTION AMOUNT	DUPLICATE TRANSACTION	UNAUTHORIZED PURCHASE	AMOUNT IN DISPUTE

Additional Information:

Step 3: SUBMIT COMPLETED FORM

Complete form by filling in the appropriate fields. Fax form to: **866-400-5770** OR mail form to:
U.S. Bank PO Box 13050 Overland Park, KS 66282-3050

Questions? Call Customer Service at 800-278-6191

