



4185 Harrison Blvd. Suite #202, Ogden, UT 84403

ATTN: CLAIMS DEPT

Fax : 801-395-8666

# of pages \_\_\_\_\_

**INVOICE DISPUTE FORM**

Please fill out form completely and legibly. For faster service, photocopy and attach any invoices or other documentation. If unable to fax, please mail to above address.

**IMPORTANT-In order to preserve your rights, this form must be faxed within 24 hours of the settlement/attempted settlement involving the disputed invoice.**

Location Name \_\_\_\_\_ Date \_\_\_\_\_

TCH Location ID \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Your Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**TRANSACTION DETAIL**

Transaction Date \_\_\_\_\_ Invoice # \_\_\_\_\_

Card # \_\_\_\_\_

Driver ID # \_\_\_\_\_ Unit # \_\_\_\_\_ Trailer # \_\_\_\_\_ Odometer/Hubometer \_\_\_\_\_

Driver's Company Name \_\_\_\_\_ Authorization # \_\_\_\_\_

**TRANSACTION DESCRIPTION**

Truck Fuel      Gallons                      Price/gallon                      Total \$

Reefer Fuel      Gallons                      Price/gallon                      Total \$

Other Fuel      Gallons                      Price/gallon                      Total \$

Cash Advance Amount    Total \$

Other (please specify)    Total \$

Invoice Total \$

**REASON FOR DISPUTE    METHOD USED TO PROCESS TCH TRANSACTION**

- Duplicate Transaction
  - Transaction amount varies from settlement
  - Transaction not on settlement
  - Unrecognized transaction
  - Other (please explain below)
- TCH Customer Service
  - Automated Authorization
  - TCH Omni 380 VeriFone
  - Other \_\_\_\_\_
- Trendar
  - ROSS

Comments: \_\_\_\_\_

**Invoice Disputes will not be processed without a copy of the transaction invoice.**

Signature \_\_\_\_\_ Date \_\_\_\_\_