

Gopher GOLD™ Account Error Resolution Request

- ▶ To be eligible to complete this form, today's date must be no more than sixty (60) calendar days since you were provided the FIRST statement or receipt on which the problem or error occurred.
- ▶ Upon receipt and review of this form, the U Card Office may request additional documentation from you to support your initial inquiry or to assist with an investigation into the error.
- ▶ The U Card Office will determine whether an error occurred and, if so, your account will be credited with the amount of the error within ten (10) business days of your inquiry.
- ▶ If the U Card Office is unable to determine if an error occurred within ten (10) business days, the U Card Office may take up to forty-five (45) business days to investigate your inquiry. If the investigation is extended to forty-five (45) days, your account will be credited for the amount you believe is in error so you have access to the disputed amount during the time it takes the U Card Office to complete the investigation. If the U Card Office determines the amount in question was not an error, the credited amount will be reversed and you may be charged for any amount of that credit used while the investigation was in progress.
- ▶ Errors involving new accounts, point-of-sale, or foreign-initiated transactions, the U Card Office may take up to ninety (90) days to investigate your complaint or question. For new accounts, the U Card Office may take up to twenty (20) business days to credit your account for the amount you think is in error.
- ▶ You will be notified of the investigation results via email or mail within three (3) business days of the completed investigation. If the U Card Office determines that there was no error, the U Card Office will send you a written explanation. You may request copies of the documents used in the investigation. Some documents may not be available for cardholder review due to inclusion of confidential information.
- ▶ Please complete the Gopher GOLD Account Error Resolution Request Form below and drop it off at the U Card Office or mail it to the address listed above.

For office use only. Received by _____ Date Received _____

Gopher GOLD Account Error Resolution Request Form

Cardholder Information (please print and complete all fields)				
Last Name:	First Name:	MI:	7-Digit Employee/Student ID # (if known): _____	Date:
E-mail Address:	Telephone #:	17-Digit Card #: _____		
Street Address:	City:	State:	Zip:	
Type of Transaction (Copying, Printing, Vending, Deposit, Value Port, etc.):		Amount of Transaction:	Date of Transaction:	
Description of error or transaction in question, include location of transaction:				