Letter of Disagreement Regarding Credit Card Payment

Date: [Insert Date]

[Your Name] [Your Address] [City, State, Zip Code] [Email Address] [Phone Number]

[Credit Card Company Name] [Customer Service Address] [City, State, Zip Code]

Subject: Disagreement Regarding Credit Card Payment

Dear Customer Service Team,

I am writing to formally dispute a charge on my credit card statement dated **[Insert Statement Date]** for the amount of **[Insert Amount]**. The charge was made by **[Merchant Name]** on **[Transaction Date]**.

I believe this charge is incorrect because [Briefly explain the reason for disagreement, e.g., unauthorized transaction, incorrect amount, etc.].

I have attached supporting documentation, including [list any attachments, e.g., receipts, correspondence, etc.] for your review.

I kindly request that this matter be investigated and that the charge be reversed. Please let me know if you require further information from my side.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]