Credit Report Dispute Form

Instructions:

- Provide the requested information in the below blanks:
- Include a copy of the page of the credit report that you are disputing;
- Provide copies of any other documentation you believe supports the dispute;
- Sign the form; and
- Mail the completed form with copies to the address listed below.

Contact Information - Required

Name:		
	State:	
Phone:	Email:	
Dispute Information - Required		
Business Address:		
Business City:	State:	Zip:
	Loan Number:	
 This is not my account. I am a victim of identity theft. I have never paid late. I paid this before it went to contact. 	This account is in bankruptcy This account is closed I have paid this account in full ction or before it was charged off.	
_ Other:		
Have you previously made this disp	ute:YESNO If yes, ple	ase explain:
Signature:		Date:

Please include a copy of the page of the credit report that contains the item you are disputing. DO NOT SEND THE ENTIRE CREDIT REPORT

Other Documentation

If you have any other documentation that you want to provide to support the dispute, please only send copies of the documentation. Examples of documentation:

- For a bankruptcy: Chapter 7, 11, or 13 case number, district, and date filed
- For identity theft: police report and/or affidavit(s)
- Cancelled checks
- Correspondence about the account
- If you have spoken to us about the account, the name of the Commerce employee and date of the conversation

Mail

SBA Commercial Credit Disputes 1000 Walnut, BB4-4 Kansas City, MO 64106 Fax#: 816-760-8760