STATE OF CALIFORNIA – DEPARTMENT OF FINANCE

INVOICE DISPUTE NOTIFICATION

STD. 209 (REV. 10/2019)

Clear Print

(Mail in a window envelope.)

VENDOR ADDRESS

DATE OF DISPUTE

INVOICE NUMBER

AMOUNT

INVOICE DATE

REFERENCE NUMBER(S)

(fold)

The invoice referenced above is disputed for the following reasons:

- ☐ Goods/Services not received
- ☐ Noncompliance with contract
- ☐ Incorrect billing/amount due
- ☐ Partial shipment received
- ☐ Other
- ☐ Duplicate billing
- ☐ Invoice belongs to another department
- ☐ Damaged goods
- ☐ Invoice not properly executed

THIS NOTIFICATION IS A FOLLOWUP TO A PHONE CONVERSATION WITH THE PERSON FROM YOUR COMPANY WHOSE NAME APPEARS BELOW

NAME

DATE OF CONVERSATION

IF YOU HAVE ANY QUESTIONS REGARDING THIS DISPUTE, CONTACT:

NAME

E-MAIL

TELEPHONE NUMBER

(fold)

FOR STATE AGENCY USE ONLY

DATE DISPUTE RESOLVED

INITIAL

RESOLUTION

RETURN A COPY OF THIS NOTIFICATION WITH THE CORRECTED INVOICE (IF APPLICABLE)

(For your convenience, the return address has been positioned for use in a window envelope.)

RETURN TO:

DISTRIBUTION:

Vendor — original and one copy
Purchasing — one copy
Accounting — one copy
File — one copy