

Credit Reporting Dispute Form



P.O. Box 492395, Redding, CA 96049
(530) 222-6060 | (800) 303-3838 | m1cu.org

Member Name: _____

Address: _____

Phone Number: _____

Account Number and Suffix: _____

Social Security Number: _____

What are the details of the dispute? _____

Please mail this form along with any supporting documentation to:

Members 1st Credit Union
P.O. Box 492395
Redding, CA 96049

Signature: _____ Date: _____