Intragovernmental Dispute Resolution Request Form Submit completed form to

IBR.Dispute.Resolution@fiscal.treasury	/.gov

Part I: Dispute Resolution Details		
Entity Initiated	Fiscal Service Initiated	
Section A: Entity Information		
Entity One:	Entity Two:	
Contact Name:	Contact Name:	
Title:	Title:	
Email Address:	Email Address:	
Phone Number:	Phone Number:	
Section B : Total Difference Amount The total difference amount affecting both agencies.(attach any additional information)		
Section C : Affected Reciprocal Categories and USSGL Accounts		
(attach any additional information)		
Section D: Difference Duration		
Time period from when the difference was first developed. (attach any additional information).		
Section E: Difference Explanation		
Why the difference occurs and what has been done in attempt to reconcile?(attach any additional information)		

Section F: Any Additional Supporting Documentation Attached Section A Additional Information Attachment Section B Additional Information Attachment Section C Additional Information Attachment Section D Additional Information Attachment Section E Additional Information Attachment Material Difference Report Targeted Difference Report Auditor's Documentation Correspondence between agencies (emails, meeting minutes, etc.) Authoritative Reference Other Section G: Certification Signature confirms that no IPAC chargebacks, rejections or new transactions were created to solve this dispute outside of the business rules. I certify that this written submission and supporting documentation are, to the best of my knowledge, complete and accurate. Signature, Chief Financial Officer or Designee Title Date

Part II Dispute Decision

FOR DEPARTMENT OF THE TREASURY, FISCAL SERVICE USE ONLY

ACCEPTED TO DISPUTE RESOLUTION PROCESS:

REJECTED FROM DISPUTE RESOLUTION PROCESS:

DISPUTE RESOLUTION CASE NUMBER:

I certify that the submitted difference is accepted into the Dispute Resolution Process.

Fiscal Service Representative

Signature

Print Name

Date