[First and Last Name]  
[Street Address]  
[City, State Zip]

[Month Day, Year]

Chase Customer Service  
P.O. Box 15298  
Wilmington, DE 19850-5298

**Re: Rejection Notice for Binding Arbitration Agreement**  
To Whom It May Concern:

I REJECT the Chase Binding Arbitration Agreement. Please confirm receipt of this rejection. My name, account number, billing address, and personal signature are below.  
  
Name: [First and Last Name]  
Account/Card Number(s): [XXXX-XXXX-XXXX-XXXX]   
Billing Address: [Street, City, State Zip]

Signature:

[Include Signature Above]