

Please complete this form if you wish to query a transaction on your card account. This form must be completed and signed by the Card Holder.

| Card Holder Details       |                                       |                |                  |  |  |
|---------------------------|---------------------------------------|----------------|------------------|--|--|
| Member Number             |                                       | Home Phone     |                  |  |  |
| Title Given Name(s)       | Other Name(s)                         | Work Phone     |                  |  |  |
| inter entername(3)        |                                       |                |                  |  |  |
| Surname                   |                                       | Mobile         |                  |  |  |
| Residential Address       |                                       | Email          |                  |  |  |
| Suburb                    | State Post Code                       |                |                  |  |  |
| Card Type                 |                                       |                |                  |  |  |
| Visa Credit Card          | Visa Debit Card                       |                |                  |  |  |
| Card Details              |                                       |                |                  |  |  |
| Account Number            | Card Number (last                     | 4 digits only) | Card Holder Name |  |  |
| Card Query                |                                       |                |                  |  |  |
| Are you an existing memb  | er?                                   |                |                  |  |  |
| No - Go to Transaction    | n Details section.                    |                |                  |  |  |
| Yes - Complete the fo     | -                                     |                |                  |  |  |
| Police Report Number      | Report Date                           |                | Police Contact   |  |  |
| Has the PIN been recorde  | d anywhere (e.g. on the card, on p    | paper)         |                  |  |  |
| No Yes If yes             | , where                               |                |                  |  |  |
| Has the PIN been disclose | ed to a third party (e.g. a family me | ember/friend)  |                  |  |  |
| No Yes                    |                                       |                |                  |  |  |



# **Transaction Details**

Date

### Merchant Name (as shown on statement)

# Amount

| \$<br> |  |
|--------|--|
| \$     |  |
| \$     |  |
| \$     |  |
| \$     |  |
| \$     |  |
| \$     |  |
|        |  |

# **Reasons for Query**

Which of the following would best describe the reason for your query?

- I did not authorise the transaction/s, nor did any other party to this account.
- I do not recognise a merchant's name although I have completed a transaction for the same amount.
- I only authorised one of the transactions from the merchant (i.e. possible duplication).
- I did not receive the goods or services (ordered by mail or telephone) and have contacted/attempted to contact the merchant. (Please provide any proof of contact.)
- I have cancelled the authority with the merchant but my account is still being charged. I confirm the authority was cancelled on . I enclose a copy of my letter of cancellation to the merchant.
- I do not recall the transaction(s) and request Australian Military Bank to provide further details.
- I used another method of payment for this transaction, not the above card, and I enclose my proof of payment.
- I did not sign-up for or subscribe to the service being charged to my card.
- I was short-paid when withdrawing at an ATM (please provide details here).

Date

Time

#### Amount withdrawn

Amount received

| \$<br>\$ |
|----------|
| \$<br>\$ |
| \$<br>\$ |

## **Important Details of the Situation**

Before we can investigate your query, we need to know the details of the situation and what contact has been made with the merchant/s involved. (You should attach copies of voucher/s and any other documentation that may assist with our investigation).

You must complete this section.

### **Declaration and Signature**

I understand that if the disputed transaction/s are found to have been authorised correctly, my account will be debited the applicable fees and charges.

#### Signature of Applicant

Name of Applicant

Signature

Date

#### Please note the following:

- Upon receipt of all requested information, your dispute should be resolved within 90 days. If this time frame is exceeded, we will advise you in writing.
- We will make a determination of liability for the disputed transaction and will advise you in writing of the outcome of the investigation.
- ▶ If you subsequently recognise the transaction/s and no longer wish for us to investigate please contact us on 1300 13 23 28.
- The resolution of your dispute will be in accordance with the ePayments Code, Visa International Operation Regulations and the Terms and Conditions of your account.

## How to submit completed form:

Email: carddisputes@rslmoney.com.au | Post: PO Box H151, Australia Square NSW 1215

