

# Card Transaction Enquiry

For the investigation of POS/ATM/VISA transactions



## A. Membership details (PLEASE PRINT IN BLOCK LETTERS)

|         |               |         |               |
|---------|---------------|---------|---------------|
| Title   | Given name(s) | Surname | Membership no |
| Address |               | State   | Postcode      |
| Mobile  | Email         |         |               |

Card Number

|                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|

## B. POS dispute - PIN used (PLEASE PRINT IN BLOCK LETTERS)

|                    |      |        |               |
|--------------------|------|--------|---------------|
| Date               | Time | Amount | Merchant name |
| Merchant location  |      |        |               |
| Details of problem |      |        |               |

## C. ATM dispute details - PIN used (PLEASE PRINT IN BLOCK LETTERS)

- |  |                                      |   |
|--|--------------------------------------|---|
| <input type="checkbox"/> ATM cash withdrawal malfunction | <input type="checkbox"/> ATM fraud   | <input type="checkbox"/> Card compromised |
| <input type="checkbox"/> ATM cash deposit malfunction    | <input type="checkbox"/> Card stolen | <input type="checkbox"/> Card lost        |

All ATM frauds must be reported to the police and card cancelled

|                        |                                    |
|------------------------|------------------------------------|
| Police report number   | Police station                     |
| Name of police officer | Date & time police report was made |

### Transaction details

|                    |                     |                    |
|--------------------|---------------------|--------------------|
| Date               | Time                | Location           |
| ATM/system owner   | Amount requested \$ | Amount received \$ |
| Details of problem |                     |                    |

An ATM dispute fee of \$25.00 per transaction will be charged if any of the disputed transactions prove to be valid

## D. Visa transaction dispute details - PIN not used (PLEASE PRINT IN BLOCK LETTERS)

- Card lost     Card stolen     Card compromised

All card present Visa transactions (paywave) must be reported to the police and card cancelled

|                        |                                    |
|------------------------|------------------------------------|
| Police report number   | Police station                     |
| Name of police officer | Date & time police report was made |

### Reason for dispute

- I did not authorise the transaction(s) nor did any other party on the account
- I only authorised one of the transactions (apparent duplication)
- I acknowledge the transaction(s) occurred. However the amount on my statement is incorrect.  
correct amount    \$
- I did engage in the transaction but did not receive the goods/services ordered (e.g. mail/telephone order)
- I cancelled the authority with the merchant on the following date     /  /   
a copy of the cancellation letter to the merchant must be provided
- A refund receipt was issued but credit has not been received

**Details of disputed transaction(s) (PLEASE PRINT IN BLOCK LETTERS)**

Please list disputed transactions individually below

| Date | Merchant name | Amount (Aust \$) | Amount (foreign \$) |
|------|---------------|------------------|---------------------|
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |
|      |               | \$               | \$                  |

**A Visa investigation fee of \$25.00 per transaction will be charged if any of the disputed transactions prove to be valid**

Please provide additional information on the true nature of the dispute

**Declaration**

I declare that the above information is true and correct.

Signature  
X \_\_\_\_\_ Date / /

Signature  
X \_\_\_\_\_ Date / /

**Office use only**

Operator name \_\_\_\_\_ Date and time received \_\_\_\_\_

- Fraud disputes** - scan and email to Fraud and Administration
- ATM disputes (not fraud)** - scan and email to Support Services