



Customer transaction dispute form

Credit Cards, Travel Card, iCash Card and Visa Debit Card.

[BANK STAMP]

Card number:

Primary cardholder name: (as appears on statement)

I wish to dispute the following transactions on my National Bank card account

Date	Merchant	Amount
DAY / MONTH / YEAR	<input type="text"/>	<input type="text"/>
DAY / MONTH / YEAR	<input type="text"/>	<input type="text"/>
DAY / MONTH / YEAR	<input type="text"/>	<input type="text"/>

- A dispute handling fee of \$15 per transaction will be charged to your account for all transactions found to be valid in the course of our investigations.
- For full details about this fee please see the relevant Credit Card Conditions of Use brochure available from any branch of The National Bank.

Please select the reason you would like to dispute this transaction

- I am unsure about this transaction, I do not recognise:
 - Merchant name
 - Merchant location
 - Transaction date
 - Transaction amount
 - Other – please specify more details on page 2.
- I did authorise this transaction however, I have not received any goods or services. They were expected on ____ / ____ / ____ . I have attached documents showing the expected service or delivery date. Please note, you must have contacted the merchant prior to disputing this transaction.
- The merchant was authorised to deduct automatic payments from my account. However, I cancelled / attempted to cancel the authority on ____ / ____ / ____ . I have enclosed a copy of my instructions sent to the merchant to cancel the authority.
- The amount appears to have been altered from _____ to _____ (Please attach a copy of your sales voucher, receipts etc and specify more details on page 2).
- I have already paid for goods or services by an alternate means – e.g. cash, another credit card, travellers cheques
- I only authorised one transaction (possible duplication). The date of the original transaction was ____ / ____ / ____ .
- Neither I nor any additional cardholder have authorised or participated in this transaction from the above merchant, nor received any goods or services.
- I received a credit for _____ on ____ / ____ / ____ which has not been processed. I have enclosed a copy of the credit transaction receipt. Merchandise was returned on ____ / ____ / ____ .
- I attempted to withdraw cash from an ATM and did not receive all or part of the cash (Please specify more details on page 2).

I last contacted the merchant about this matter on ____ / ____ / ____ .

Important: Please ensure you complete page 2 of this form and attach copies of any documentation that supports your claim. Lack of documentation may delay resolution of your dispute.

I confirm that I am not taking any other action in relation to this dispute.

Primary cardholder's signature:

Date:

Additional cardholder's signature:
Where transaction appears to relate to additional cardholder

Date:

