



Disputed transaction(s) form

The purpose of this form is to create a report of charges that are unauthorised or that you wish to dispute. Please send your completed form to us via:

Fax: +61 1300 360 017

Mail: Westpac
PO Box 3845
RHODES NSW 2138

Need help?

Call 1300 797 470 in Australia or
+61 2 9155 7744 when travelling for
24/7 support.

Part 1 Please complete each item in this section

Name	Last 4 digits of your card number
<input type="text"/>	<input type="text"/>
Address	
<input type="text"/>	
Suburb	Postcode
<input type="text"/>	<input type="text"/>
Email address	Preferred contact number
<input type="text"/>	<input type="text"/>

Please list the transaction(s) you would like to dispute:

Date of transaction	Merchant name	Amount	Currency
<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"/>

Part 2 Please check the one category which best describes your dispute. You can only choose one

I certify I did not make the transaction(s)
I have not authorised the charge(s) listed above to my account.

OR

I did authorise the transaction(s), HOWEVER:

I have not received the merchandise.
The expected delivery date is/was

I have not received the expected services.
(Note: You must include a copy of the contract or agreement that details these services.)

The merchandise I received was defective.
(Note: You must attempt to return the merchandise to the merchant before filing this claim and then provide proof of return and explanation of the defect.)
Reply was:

(Note: You must include copies of any correspondence between you and the merchant.)

The amount I authorised is different than the amount that showed up on my card account.
(Note: If this is a mail order, you must include a copy of the sales slip or packing invoice.)

I was charged twice for a single purchase.

Valid transaction

Date charged

Invalid transaction

Date charged

None of the above reasons apply. (Please provide a complete description of the problem in Part 3.)

Part 3 Provide a detailed explanation of the transaction(s) disputed. Use additional pages as necessary

A Why are you disputing the transactions?

B How has the merchant responded?

Part 4 Provide bank account details where funds can be returned

Credit funds to account

BSB

Account number

Part 5 Signature and consent


I give my consent to have this dispute/claim reviewed by a dispute investigator and understand that I may be asked to provide additional details for this investigation.

I understand that incomplete or inaccurate information could result in the decline of my dispute or a correction to my account.

Please note that if charges were fraudulently posted to your account (your card or card number was stolen) we will block your current card number.

Cardholder name (print)

Cardholder signature



Date

/ /