

# Customer Investigation Request for Disputed Corporate Card Transactions



- Please keep a copy of this completed form and original documentation.
- The signed form must be sent to the address indicated.
- If acknowledgement of your fax is not received within 5 days please follow up.
- Please acknowledge your account maybe stopped and reissued as required.

**Please return completed form to:**

Premium Service Centre, Operations Processing Centre, Reconciliations and dispute.  
 Email: [ibclientservice@cba.com.au](mailto:ibclientservice@cba.com.au)

## Section 1 – Account Details

Credit Card account number	Company name	Facility number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	Surname	Initials
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other	<input type="text"/>	<input type="text"/>

## Section 2 – Type of disputed transaction (please tick as appropriate)

- I did not authorise the transaction(s) nor did any other party to this account.  
 Please acknowledge your acceptance of us stopping your account before we can investigate the dispute , a new card will be issued. We cannot commence with investigation until the card has been stopped.
- I have not completed a transaction for the same amount with a different merchant.
- I only authorised one of the transactions (apparent duplication).
- I did engage in the transaction but did not receive the goods/services ordered (mail/telephone order).  
 I have contacted/attempted to contact the merchant without success.
- I have cancelled the authority with the merchant but my account is still being charged.  
 I enclose a copy of my letter of cancellation to the merchant and confirm the authority was cancelled on
- The attached credit voucher has not been credited to my account.
- I used another method of payment for this transaction, not the above credit card account and I enclose my proof of payment.
- Other (e.g. amount(s) incorrectly processed).



**Please attach copy of voucher(s) and any other documentation available that may assist us in our investigation.**

## Section 3 – Please specify the exact nature of the dispute and if contact has been made with the merchant involved.

  


## Section 4 – Details of disputed transaction(s) as they appear on your statement. Please attach a copy of statement(s) if available.

Date	Merchant description	\$ Amount

I authorise the Bank to stop my account as required and correct the transaction(s) in dispute.



We cannot commence with this investigation if the account is not stopped.

Cardholder signature	Date	
<input type="text"/>	<input type="text"/>	
Address		
<input type="text"/>		
	State	
	Postcode	
Home telephone number (incl STD area code)	Business telephone number (incl STD area code)	Email address
<input type="text"/>	<input type="text"/>	<input type="text"/>