



Investigation Request for Disputed Corporate Card Transactions

- Please keep a copy of this completed form and original documentation.
- Please acknowledge your account maybe stopped and reissued as required.



Privacy Notice:

We collect personal information such as contact and identity details of each person nominated on this form to verify your personal details to fulfil the nominated role on behalf of your account holding company. If you would like to know more about how we handle your personal information or how you can access or correct it visit our Privacy Statement on our website <http://www.commbank.com.au/privacy>

Section 1 – Account Details

Card number Company name Facility number (N/A for Prepaid)

Cardholder surname Cardholder full given name(s)

Select card type

Corporate Card Procurement Management Account Virtual Card Prepaid Card

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 amount with a 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. (DD/MM/YYYY)
- 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 card account and I enclose my proof of payment.
- Other (e.g. amount(s) incorrectly processed).



Please attach copy of 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 (DD/MM/YYYY)	Merchant description	\$ Amount
<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"/>	\$

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

Cardholder signature (or Point of Contact) Date (DD/MM/YYYY)

Primary email address for communications regarding this dispute Secondary email address (if required)