

Personal Information

Cardholder Name: _____

Surname: _____

Contact Number: _____

Email: _____

Card Number: _____

Account Number: _____

Transaction Information

Merchant/ATM Name: _____

Transaction Date: _____

Amount: _____

I have checked my statement and dispute the abovementioned transaction for the following reason (tick applicable box):

Merchant / ATM Transaction

- ☐ I attempted to withdraw funds at the ATM but the ATM did not give me any cash.
- ☐ I attempted to withdraw funds at the ATM but the ATM only paid out an amount of _____
- ☐ I returned the goods to the merchant and received a credit voucher, which does not appear on my account. (Attach credit voucher)
- ☐ I only did one transaction at this merchant (Attach a copy of your transaction slip). I did not authorise the additional transaction.
- ☐ Transaction was paid for in another way. (Attach proof of payment)
- ☐ Request for copy of the transaction voucher from the merchant. (Kindly note that we will charge a fee for requesting a copy of the transaction voucher from the merchant. Please refer to the Pricing Guide which is available at any FNB Branch or on our website www.fnb.co.za)

Travel and Entertainment

- ☐ I made a hotel / vehicle hire booking, but cancelled the booking. (Attach proof of the cancellation letter)
- ☐ I made a hotel booking, stayed at the hotel and was charged a "No Show". I attempted to resolve the dispute with the merchant more than 30 days ago. (Attach copy of communication to merchant)

Mail / Telephone / Online Purchase

- ☐ I supplied my card details by mail, telephone or internet order for a purchase. I tried to contact the merchant to stop the payment more than 30 days ago. (Attach copy of communication to merchant/ service provider)
- ☐ I never received the merchandise that I have been debited for. I attempted to resolve the dispute with the merchant more than 30 days ago. (Attach copy of communication to merchant/ service provider)
- ☐ I returned the merchandise. (Attach a copy of the return slip)

Your Declarations – by signing this form I confirm the following

- I will be legally responsible to pay the required fees should FNB request a copy of the transaction voucher from the merchant on my behalf. (Please refer to the Pricing Guide which is available at any FNB Branch or on our website www.fnb.co.za)
- All information and documents that I have given FNB are true, authentic and correct.

Date: _____

Full Name: _____

Client Signature: _____

For Office Use Only – Form submitted by

Employee No: _____

Branch Code: _____

To prevent any delays in processing the dispute please ensure that all supporting documentation is attached where required.

Email this form to fnbcard@fnb.co.za or Fax to 011 699 0981

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