



Dispute Resolution Form

The purpose of this form is to create a report of charges (called transactions) that you would like to challenge or reject (called a dispute). After completing this form, please mail it to:

RêV Australia Private Ltd (Account Management)
Reply Paid 614
Pyrmont, NSW 2009

Questions?
Call our Cardholder Services Team
1800 171 254

Part I - Please complete each item in this section.

Full Name _____	Card Number _____
Address _____	City _____ State _____ Post Code _____
Email Address _____	Mobile Phone Number _____

Is your RêV Card in your possession: Yes ____ No ____		
Please list the charge(s) you would like to dispute:		
Transaction Date _____	Merchant Name _____	Amount \$ _____
Transaction Date _____	Merchant Name _____	Amount \$ _____
Transaction Date _____	Merchant Name _____	Amount \$ _____
Transaction Date _____	Merchant Name _____	Amount \$ _____

Part II - 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 authorized the charge(s) listed above to my account. I have not ordered merchandise associated with these charges by phone or mail, or received any goods or services.

- I did authorize 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.)
 - I attempted to cancel this purchase with the merchant on the following date. The merchant's reply was _____ . (Note: You must include copies of any correspondence between you and the merchant.)
 - I cancelled a reservation but was still charged.
Date of cancellation _____ Cancellation No. _____



- I authorized one charge but more than one charge was made to my card.
- The amount I authorized is different that the amount that showed up on my card. (Note: If this is a mail order, you must include a copy of the sales slip or packing invoice).
- I received a credit slip but the credit has not appeared on my statement. (Note: You must include a copy of your credit slip).
- I cancelled a membership but was still charged. Date you contacted the merchant _____
Date of cancellation _____ Cancellation number _____
Reason for canceling the membership _____ (Note: You must enclose a copy of letter, email, or fax informing the merchant of cancellation).
- I used my card number to reserve a purchase but then paid with check, cash, or a credit card. (Note: You must include a copy of the cash receipt, or the front and back of the cancelled check.
- I was charged twice for a single purchase.

Valid Transaction \$ ____ Date Charged _____ Invalid Transaction \$ ____ Date Charged _____

- I made a withdrawal at an ATM but I received a different amount than I requested.

Amount Requested \$ _____ Amount Received \$ _____

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

Part III – 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 IV – 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.

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 and issue you a new one for your protection and security.

Cardholder Signature: _____ Date: _____