

# Australia Post Visa Prepaid Gift Card disputed transaction form



**Please note: we cannot assist you if your card has been lost or stolen.**

## Card details

Card ID (the 16 digit number on the back of your card)

Cardholder name

Email address

Contact mobile number

## Disputed transactions

Date	Transaction details	Amount (AUD)
<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"/>	<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"/>

## Reason for dispute

Please tick the one that is most appropriate and ensure that you attach the corresponding documentation if required.

☐ I have not authorised or participated in the transaction(s) listed above.  
Please note that if the above transactions are identified as fraudulent, we may be required to stop your card and issue you with a new one.

☐ I only authorised one transaction for  on . It appears to be ☐ duplicated / or ☐ processed for the incorrect amount.

☐ I have not received the goods or services I have paid for. They were expected on   
I have contacted the merchant to try and resolve this matter. My last contact was on   
Please attach a copy of the document(s) or receipts showing the expected service or delivery date.

☐ The goods or services I have paid for were damaged, defective, or not as described. I returned the goods or cancelled the services on   
A credit for the amount of  was due to be processed to my card on   
I have contacted the merchant to try and resolve this matter on

☐ I paid for the goods or services by other means and my card or account was debited incorrectly. I used cash, cheque or another card.

- Please describe and provide evidence (eg invoice) of the damaged / defective / not as described goods or services.
- Please provide proof that the goods were returned / services cancelled or an attempt was made.
- Please provide details of merchant response in additional information section.

**Important information:** Please ensure you complete page two of this form and attach copies of any documents that support your claim. Lack of documentation may delay resolution of your dispute.

Cardholder signature

Date

Additional information: Please provide any additional information that may help us in assisting with your dispute.

Statutory declaration

Full name

Occupation

I,

Street address

Unit number / street number & street name

Suburb

State

Postcode

of

do solemnly and sincerely declare and confirm that I neither authorised, participated nor performed the above transaction(s) and I have not given my card to anyone else or colluded with anyone to make this transaction on my behalf. I have no objection to a full investigation being made with the named company and I have no objection to police involvement, should this prove to be necessary.

And I make this solemn declaration by virtue of the Statutory Declarations Act 1959, and subject to the penalties provided by that Act for the making of false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

Signature of person making the declaration

Declared at  the  day of  20

Signature of person before whom the declaration is made

Title of person before whom the declaration is made

Before me

A statutory declaration under the Statutory Declarations Act 1959 may be made before the following persons:-

- (a) A Legal Practitioner;

(b) A Justice of the Peace;

(c) A Commissioner for Affidavits;

(d) A Commissioner for Declarations;

(e) A Notary Public;

(f) A person before whom a statutory declaration may be made under the law of the state in which the declaration is made;

(g) An Australian Consular Officer or an Australian Diplomatic Officer as defined by Section Two of the Consular Fees Act 1955; or

(h) Any other person listed in Schedule 2 of the Statutory Declarations Regulations 1993.

**Privacy Notice:** Australia Post is collecting your personal information for the purposes of investigating the disputed transaction. Without this information we will be unable to provide you with the services sought. We may also be required to pass on your personal information to VISA and / or the Heritage Bank Limited (issuer of the card) or other third party service providers in order to properly investigate your dispute. Subject to some exceptions allowed by law, you may be able to request access to the personal information we hold about you. We will assess your request in accordance with the law and tell you why if access is denied. A request to access, update or correct any information should be directed to the Privacy contact officer, Australia Post, GPO Box 1777, Melbourne, Vic, 3001. For further information about how Australia Post handles personal information please see the Australia Post Privacy Policy at [auspost.com.au](https://auspost.com.au/privacy)

Please complete, print and submit your form by fax to: +61 1300 306 865

PRINT

Click here to print this form, sign and submit by fax.

SAVE

Click here to save a copy of this form.

Please keep a copy of this form for your records.