



Please complete the details below and return to **GE Money Chargeback Department**. If you have any queries, please call 03 9921 6963.

**Return Details**

**TO: The Manager**  
GE Money Chargeback Department  
Reply Paid 1076J  
Melbourne VIC 3001

You may also return via;  
**Fax: 1300 652 704**  
**E-mail: chargebacks.aus@ge.com**

**Your MasterCard Card Details**

MasterCard Account Name

Title	First Name	Middle Initial	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

GE Money MasterCard Card Number

5	<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"/>
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**Transaction Details**

Date	Amount	Merchant Name

Please be advised that I am disputing the abovementioned item(s) charged to my MasterCard account because:

- I do not recognise the transaction(s) and would like more information.
- Neither myself nor anyone authorised by myself has engaged in the transaction(s).
- I had an agreement with merchant to supply goods or services. I have not received any goods or services for the above transaction(s) and have contacted/attempted to contact the merchant to resolve the issue on \_\_\_\_\_.
- Although I did have an agreement with the Merchant to debit my account, I cancelled this Authority on \_\_\_\_\_.
- ATM failed to dispense requested amount of cash. Amount received \$ \_\_\_\_\_.
- Other (please specify\*) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\*Please attach additional pages if required

**Please Sign Here**

Signature of Primary Cardholder  Date  /  /