

**A. Membership Details** (PLEASE PRINT IN BLOCK LETTERS)

Title	Given Name(s)	Surname
Address		Membership Number
<input style="width:95%;" type="text"/>		<input style="width:95%;" type="text"/>

**B. Osko/NPP/Direct Entry Recall Dispute Details** (PLEASE PRINT IN BLOCK LETTERS)

I acknowledge the transaction was authorised. However the BSB, Account or PayID details are incorrect. I am seeking a recall of funds. Note: It may not always be possible to recover a payment paid to an unintended recipient.

<b>Transaction details</b>	Date	Incorrect BSB No.	Incorrect Account No.	Incorrect Account Name	Incorrect PayID
	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
	Amount	Correct BSB No.	Correct Account No.	Correct Account Name	Correct PayID
	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>

I acknowledge the transaction was authorised. However the intended recipient is claiming funds have not been received. I am seeking a recall of funds.

<b>Transaction details</b>	Date	Amount	BSB	Account Number	Account Name
	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>

I agree to pay the dispute fee of \$25.00 PayID

**C. Osko/NPP/Direct Entry Trace Dispute Details** (PLEASE PRINT IN BLOCK LETTERS)

I acknowledge the transaction was authorised. However the BSB, Account or PayID details are incorrect. I am seeking a final destination of funds. Note: It may not always be possible to recover a payment paid to an unintended recipient.

<b>Transaction details</b>	Date	Incorrect BSB No.	Incorrect Account No.	Incorrect Account Name	Incorrect PayID
	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
	Amount	Correct BSB No.	Correct Account No.	Correct Account Name	Correct PayID
	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>

I acknowledge the transaction was authorised. However the intended recipient is claiming funds have not been received. I am seeking a trace on this transaction.

<b>Transaction details</b>	Date	Amount	BSB	Account Number	Account Name
	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>

I agree to pay the dispute fee of \$25.00 PayID

**D. BPay Details for Investigation** (PLEASE PRINT IN BLOCK LETTERS)

Billor Name	Billor Code	Date Payment Due
Customer Reference Number	Receipt Number	Amount \$
<input type="checkbox"/> Payment not received by Billor	<input type="checkbox"/> Payment made to wrong Billor	<input type="checkbox"/> Payment duplicated
<input type="checkbox"/> Payment made with wrong Customer Reference Number		
Incorrect CRN	Correct CRN	
<input type="checkbox"/> Other (please provide details)		
<input type="checkbox"/> I agree to pay the BPay dispute fee of \$22.00		

**Bpay investigations are to be sent to the Finance Department.**

**Declaration**

I declare that the above information is true and correct.

Signature	Signature
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>
Date / /	Date / /

**Remote Access Use Only**

Operator Name	Date and time received
<input style="width:95%;" type="text"/>	<input style="width:95%;" type="text"/>