

## Direct Debit – Customer Claim

<b>Detail of Debit User</b>	Debit User Name _____ Debit User Number _____ Name of Remitter _____ [if different to Debit User]																	
<b>Customer making the claim.</b>	Surname or company name _____ Given names or ACN/ARBN _____ Address _____ _____																	
<b>Name of Financial Institution that holds the account</b>	Financial Institution Name _____ Address _____ _____																	
<b>Details of the DDR being claimed against.</b>	Account Name _____ BSB Number <table style="display: inline-table; border-collapse: collapse; margin-left: 10px;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="width: 10px; text-align: center;">-</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> Account number <table style="display: inline-table; border-collapse: collapse; margin-left: 10px;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> Transaction Amount \$ _____ Transaction Date _____ Lodgement Reference Details _____				-													
			-															
<b>Basis for customer making the claim</b>	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ [This claim in no way represents an agreement by this financial institution or the debit user to make good the payment. The debit user may still refuse this claim.]																	
<b>Signature and address of account holder</b>	Signature _____ (If signing for an organisation, sign and print full name and capacity for signing e.g. Director, Partner etc.) Date ____/____/____																	