

Name: \_\_\_\_\_

Account Number: _____	UCIN (internal Use only): _____
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Transaction Date (dd/mm/yy)	LOCATION (Where applicable)	Channel	Transaction Amount
		<input type="checkbox"/> BRANCH <input type="checkbox"/> INTERNET BANKING	
		<input type="checkbox"/> BRANCH <input type="checkbox"/> INTERNET BANKING	
		<input type="checkbox"/> BRANCH <input type="checkbox"/> INTERNET BANKING	
		<input type="checkbox"/> BRANCH <input type="checkbox"/> INTERNET BANKING	

**Reason for Dispute**  
(Kindly provide statement and any supporting documents)

Please check the reason that best describes the reason for dispute:

The transaction amount(s) noted on my statement differs from the actual transaction amount.

The transaction was processed a number of times as stated above.

The transaction amount(s) noted on my statement were not initiated/authorized by me or anyone authorized by me.

Other reason(s). Kindly specify.

I certify that (please select the ones that are applicable):

I did not benefit from the transactions listed above

I did not use my account nor authorize its use by anyone else after I discovered the unauthorized use of my account

I have made available to JMMB Group all knowledge, ideas or suspicions, regarding this claim and the possible identity of the person who wrongfully accessed my funds and should any other information concerning this matter come to my attention, I will immediately report the same in writing to JMMB Bank

I agree to assist and cooperate fully, without limitation, with any investigation pertaining to this matter whether it is with the Bank Investigators or Police; including testifying as a witness in any hearing proceeding or action brought against the person(s) responsible for the transaction(s).

I give my consent to JMMB Group to release any information regarding this claim to the Police, so that the information can, if necessary be used in the investigation and/or prosecution of any person(s) who may be responsible for fraud involving my account.

I confirm that the foregoing and all other statements made by me in connection with this claim are true and correct and understand that making a false statement is a violation of our laws.

Client Signature: \_\_\_\_\_ Date: [Click here to enter a date.](#)

**FOR INTERNAL USE ONLY**

Report Received by:

Signature:

Date (dd/mm/yy):

Time:

**For Use by Centralized Processing Unit**

Outcome of Investigation.

- The Client was reimbursed. Account Credited \_\_\_\_\_  
Amount \_\_\_\_\_
- The issue was determined to be fraudulent (Further investigation required by Internal Audit)
- A systems issue
- An error in transaction
- Merchant to reimburse client

Additional details if required:

Investigating Officer:

Signature:

Date (dd/mm/yy):

Approved by:

Signature:

Date (dd/mm/yy):

**FOR USE BY INTERNAL AUDIT**

Summary of Outcome of investigation if deemed fraudulent (attach relevant report)

Internal Auditor/Investigator:

Signature:

Date (dd/mm/yy):

Chief Internal Auditor (Bank or Group):

Signature:

Date (dd/mm/yy)

**For Use by Centralized Processing Unit**

Client reimbursed Yes  No

If Yes, account credited \_\_\_\_\_ Amount \_\_\_\_\_

Input by:

Signature:

Date:

[Click here to enter a date.](#)

Approved by:

Signature:

Date:

[Click here to enter a date.](#)