

## **Travel Money ATM Shortpay Request for Investigation**

## Instructions

- Please keep a copy of this completed form and original documentation.
- The signed form must be sent by mail to the address indicated or emailed to arbitration@cba.com.au.
- If acknowledgement of your request is not received within 10 business days, please call Travel Money on 1300 660 700.

To: 2067 Operations Processing Centre, Reconciliations and Disputes

PO Box 492, Lidcombe NSW 1825 Facsimile number: (02) 8737 3623

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	Mrs	Miss Ms	Other			
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Home telephon	e number	Business telephor		ile number		
Customer emai	l					
Section 2 – Ca	rd details (give	details of card tha	at initiated the trar	saction)		
				,	d number - Backup	
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