Senator Dispute Form

To: Senator Cards, Spire Bank Limited

Through _____ Branch _____

Date | D | D | M | M | Y | Y | Y | Y |

REF : TRANSACTION DISPUTE LETTER

Cardholder Name: First _____ Middle _____ Last _____

ID/Passport No _____

Card Number | | | | | | | | | | | | | | | | | | |

ACCOUNT NO (For all debit cards) _____

I am the holder of the above card and advise that a transaction at (outlet name) _____ of Kshs/Dollars _____ dated _____ has been debited to my account and I request for a reversal of the same for the following reason(s).

- ☐ was not successful; settled my bill by other means (i.e cash, other card) Attach evidence of other payment
- ☐ was duplicated
- ☐ Cash was not dispensed at the ATM
- ☐ I did not participate and did not authorize the transaction (internet transactions only)
- ☐ was not successful and goods/ services were not supplied
- ☐ Do not recognize the transaction

(Tick as appropriate)

Any other reason: _____

_____

I have also attached a copy of the transaction receipt for your review and action.

NB: Where the dispute turns out to be a genuine transaction, customer will be charged an administration fee of KSh 500 for cost incurred in validating the transaction.

Name _____ Signature _____ Date _____

BANK USE ONLY

Signature verified Name _____ Signature _____ Date _____