**KADA POROMAN MICROFINANCE LIMITED**

**ATM – CUSTOMER TRANSACTION DISPUTE FORM**

Voucher No.:\_\_\_\_\_\_\_\_\_\_\_

DATE: …………………………….

CUSTOMER NAME: ……………………………………………..

A/C NUMBER: …………………………………………………..

DISPUTE AMOUNT: K………………………………...................

TRANSACTION DATE: ………………………………………….

TRANSACTION TIME: …………………………………………..

ATM LOCATION: ……………………………………………….

DISPUTE DETAILS: ……………………………………………………………………………......

……………………………………………………………………………………………………..

CUSTOMER SIGNATURE: ………………………………………

BANK OFFICER SIGNATURE: ………………………………….

ACTION TAKEN:

…………………………………………………………………………………………..................

………………………………………………………………………………………………………

APPROVAL OFFICER: ………………………….. DATE: ………………………….