



Date
day month year

The Manager, _____ Branch,
 United Arab Emirates.

CUSTOMER REFERENCE

Customer account number -
22 digits

Account title _____

Card type Business | Personal Card number
first 6 digits last 4 digits

Dear Sir/Madam,

I/We hereby request you to kindly credit funds that were;
 deposited at ATM/CDM machine but not credited in my/our account.
 debited from my/our account, but ATM/CDM failed to dispense cash.

The details of the transaction are as follows:

TRANSACTION DETAILS

Transaction type : Deposit | Withdrawal

Transaction date :
day month year

Transaction time : : : AM | PM
hour(s) minute(s) second(s)

Transaction amount : (_____)
in words

Deposit amount denomination:

DENOMINATION	NUMBER OF NOTES	AMOUNT (AED)
1000	<input type="text"/>	<input type="text"/>
500	<input type="text"/>	<input type="text"/>
200	<input type="text"/>	<input type="text"/>
100	<input type="text"/>	<input type="text"/>
50	<input type="text"/>	<input type="text"/>
TOTAL DEPOSIT CLAIM AMOUNT	AED	<input type="text"/>

ATM/CDM location : _____

I/We hereby confirm being the beneficiary of the funds and authorize you to debit my/our account with equivalent amount if the payment is wrongly claimed.

Yours faithfully.

authorized signatory(s)

name(s)

place

FOR OFFICE USE

_____ signature
 Verified by _____