

OTHERS (Please Specify)

C) Declaration

I hereby affirm that the information furnished above is true to the best of my knowledge.

Signature _____

Date

D	D	M	M	Y	Y	Y	Y
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Important

Please enclose the relevant statement copy duly marking the disputed amount(s). Please include all relevant documents such as your charge slip copy, correspondence with the merchant, cash receipt, postal receipts etc., to enable us review further.

Please send this form through email / courier / registered mail along with the enclosures within 7 days of receipt of this CDF failing which any temporary credits provided earlier will be reversed.

Email ID: 'customer@ghanbank.co.in'

Toll Free No. **1800 425 1747**

Cardholders' service Help Desk: The Dhanalakshmi Bank Ltd., Credit Card Division, Buhari Towers, M.G.Road, West Fort, Thrissur - 680004, Kerala.