Confidential



NETS CLICK REFUND FORM

Transaction Details					
Merchant Name					
Terminal ID			Date of Trans	action	
STAN			Time of Transo	action	
Transaction Amount			Amount to be refunded		
Refund Reason					
* Kindly ensure all the details above are fill up before sending the refund form for processing.					
Requestor Information					
Name of Requestor					
Request Date			Contact		
Email Address (Confirmation email to be send via this email)					
Authorised Signatory			Company's S	tamp	
By submitting this form and signing hereunder, I confirm that the personal data submitted is true and accurate and that I consent to the collection, use, disclosure and sharing of this data by NETS for purposes reasonably required as set out in NETS' Data Protection Policy					
For NETS Offical Use					
Maker	Name:	Nam	e & Signature	Date:	
	Remarks:				
Checker	Name:	Nam	e & Signature	Date:	
	Remarks:				

Network For Electronic Transfers (Singapore) Pte Ltd