

Complaint Form

Bank Name			Branch					
Name of complaint					Natural		Moral	
Phone No.			E mail add	lress				
Address			Account T	ype				
Occupation			Account Nur	nber				
Balance			□Dinar		ollars	□oth	ner ()
The Subject of The Complaint								
Documents if any			fes	No				
Type of attached documents								
Decleration								
I confirm that all information provided above is correct and in accordance with reality and take the full responsibility for the inaccuracy of the above information, also confirm that the subject of the complaint has not been presented to the Judiciary authorities and I have not right to take any further actions in case got the agreement with the bank or the company as a corrective action on the subject of the compliant and will complete the required procedure by the bank or the company concerned.								
Signature of the com	plainant				Date			
Signature of the complainant employee					Date			
Results was reached by the Banking Awareness and Consumer Protection Department								
Signature of the Head of Department								