



Please enclose/attach any other relevant documentation (including any correspondence exchanged with the Company) that may help us handle your complaint.

Signature	
Name & Surname	
Date	

### FOR INTERNAL USE ONLY

Complaint received by: .....

Date of reception: .....

Reference number: .....

Service/department to which the complaint refers: .....

Details of the employee responsible for the service/s rendered to the client: .....

Organizational unit/department where the relevant employee, which is responsible for the service/s rendered to the client, belongs:.....

Initial response to client: Yes  Check Box No  Check Box Date: .....

Initial Action Taken: .....

Informed Client of Initial Action Taken: Yes  Check Box No  Check Box Date: .....

Further Action Taken: Yes  Check Box No  Check Box Date: .....

File handed on to Compliance Officer: Yes  Check Box No  Check Box Date: .....

Settlement of Complaint: Yes  Check Box No  Check Box Date: .....

Summary of how the complaint was settled:.....

Signature of responsible Officer: Date: .....