



FORMAL COMPLAINT FORM

If you are making a suggestion rather than a complaint please use the form on the other side.

Member making complaint	Member's name	
	Membership number	
	Date complaint made	
Details of complaint	Please continue on a separate sheet of paper if necessary and attach it to this form	
	How many sheets are attached?	
Signature of member making the complaint		
Person receiving complaint	Name	
	Position	
	Signature	
Office use only	Complaint reference (Year/No)	
	Complaint category	
	Date received in office	
	Date logged	
	Person investigating	
	Date resolved	
	Supporting papers references	

Ellesmere Port & Neston Credit Union Ltd

Reg office: Unit C20 Stanlaw Abbey Business Centre, Dover Drive, Ellesmere Port, CH65 9BF
 Authorised and Regulated by the Financial Services Authority FRN 225532 Registration No 700C