



## قسم: التوعية المصرفية وحماية الجمهور Complaint Form

Bank of Jordan  
IRAQ

Bank Name		Branch	
Name of compliant	<input type="checkbox"/> Natural <input type="checkbox"/> Moral		
Phone NO.		E-mail address	
Address		Account type	
Occupation		Account number	
Balance	<input type="checkbox"/> Dinar <input type="checkbox"/> Dollars <input type="checkbox"/> Other _____		
The subject of the compliant			
Documents if any	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Type of attached documents			
Declaration			
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 complainant		Date	
Signature of the employee who received the complaint		Date	
Result was reached by the banking awareness and consumer protection department			
Signature of the BAACPD manager		Date	