



Complaint Form

Contact Information

Name:

Mailing Address:

City/Town: Province: Postal Code:

Home Phone: Work Phone: Email:

Credit Union Information

Name of Credit Union Branch

Complaint Information

Your complaint concerns: Account Loan or Mortgage
 Debit Card Quality of Service
 Privacy Other (*please specify*) _____

Your account number (*if applicable*):

Details about your complaint

Provide a brief description of your complaint. Write down the events leading to it in the order in which they happened. Include specific dates, times, individuals you dealt with and the actions you took. (*attach additional sheets as required*).
