ANNEX 2 – COMPLAINTS HANDLING FORM

Name of Client	
Date when the complaint was received	
From whom was the complaint received? [insert name and contact details]	
How was the complaint submitted? [all back up documentation, including original letters must be submitted together with this form]	
Brief description of the Complaint	
Name of the officer receiving the complaint	
Compliance Officer Feedback	
Additional comments and feedback	
Was the complaint closed?	
Completed by:	
Signature:	
Date	