



Customer Complaint Form

You are requested to fill out this form and send it to the following email:

CBFS.compliance@cbq.qa

Date of Complaint	
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Full Name	Address
Phone Number	E-mail
ID number	NIN number

1. Please specify the person/Department against whom the complaint is made
2. Please summarize the Service you are complaining about
3. Please include any relevant dates & details the subject you are complaining about



[Empty rectangular box for content]

4. Date & brief description of CBFS decision (CBFS use)

[Empty rectangular box for content]