

## GLOBAL MARKETS GROUP LIMITED - COMPLAINT FORM

Way of Communication:	FAX <input type="checkbox"/>	Email <input type="checkbox"/>	Tel <input type="checkbox"/>	Letter <input type="checkbox"/>
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Client details					
Name:				Surname:	
Account Number:					
Legal Entity Name (if applicable):					
Address:					
Post Code:	City:	Country:			
Telephone Numbers:	Home:	Work:	Mobile:	Fax:	
Email:					
<b>Brief Summary of the complaint</b> Please answer in <a href="#">details</a> the questions below:					
1) the affected transaction(s) <a href="#">numbers</a> ;					
2) the date and time of the disputed issue/ <a href="#">trade</a> ;					
3) a brief description of the issue.					
Please enclose any other relevant documentation that may enable us to handle and resolve the complaint.					
I hereby certify and confirm that to the best of my knowledge, the information furnished above is true, accurate, <a href="#">correct</a> and <a href="#">complete</a> .					
Signature:				Date:	