

COMPLAINT (REKLAMO) FORM

Date (Petsa) _____

Name of Complainant: _____ Tel./Fax/Cellphone No. _____
(Pangalan ng Nagrereklamo)

Name of Cooperative/Office _____
(Pangalan ng Kooperative/Tanggapan)

Coop/Office Address _____
(Tanggapan/Lugar)

Residence Address: _____ E-Mail Address: _____
(Tirahan)

Name of Person Being Complained of: _____

Particulars of Complaint (Detalye ng Reklamo):

Signature (Lagda)