



## COMPLAINT FORM

**Client Name:**

**Account**

**Number ID:**

**Residential**

**Address:**

**Telephone**

**Number:**

<b>Date &amp; Time the disputed situation arose:</b>	
<b>Services provided by the Company:</b>	
<b>Employee responsible for the provision of those services:</b>	
<b>Department where the employee belongs:</b>	
<b>Affected transactions:</b>	
<b>The ID's of the affected positions:</b>	
<b>Equity before:</b>	
<b>Equity after:</b>	



SWISS MARKETS

BDS LTD

<b>Claimed magnitude of damage:</b>	
<b>Suggested way to be resolved:</b>	

**Brief Description of the Complaint:**


**Date:**

\_\_\_\_\_

**Signature:**



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Please enclose any relevant evidence and supporting documentation such as: screenshots, reports, error messages and error codes (if any)

Submit the form to [complaints@swissmarkets.com](mailto:complaints@swissmarkets.com)

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**Complaint Registration Form (For Internal Use)**

Complaint received by: \_\_\_\_\_

Employee handling the complaint: \_\_\_\_\_

Date of Receipt: \_\_\_\_\_

Date initial response: \_\_\_\_\_

Action taken by the Company:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Result and Date of final response: \_\_\_\_\_

Head of Back Office Department signature: \_\_\_\_\_

Head of Compliance Department signature: \_\_\_\_\_

Senior Management signature