

Complainant's copy/Branch copy/H.O.copy

_____Urban Co-operative Bank
_____Branch

COMPLAINT BOOK

Serial No. _____
Date _____

Shri/Smt./Kum. _____
Address _____

Nature of Account, if applicable/maintained _____
Complaint in brief _____

(Signature of Complainant)

Sent to Controlling Office on _____

Remarks: _____

Date of Final Disposal

Signature of Bank Branch Manager