

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