

**Format for lodging complaint by customers relating to ATM transactions.**

To

The Branch Manager

The Catholic Syrian Bank Limited

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[Name of the Bank]

[Name of the Branch] \*

[Name of the City]

1.	<b>Customer Information:</b> Name of the Customer: Account No.: Debit Card/ATM Card No.:	
2.	<b>ATM Information:</b> ATM ID/Location, if ID is not available: Name of the ATM Bank:	
3.	<b>Nature of the Complaints:</b> a) Complaint relating to Cash withdrawal: Amount requested for withdrawal Amount actually disbursed at ATM Amount debited to the account Date of transaction: Time of transaction: b) Card Capture by ATM: c) Other complaints:	 : Rs : Rs : Rs ___/___/___(mm/dd/yy)
<p>Date: ___/___/___</p> <p align="right">Signature of the Card Holder</p> <p align="right">Contact Tel/Mobile No.</p>		

\* (Name of the bank branch where cardholder account is maintained which is linked to ATM card)