

MERCHANT COMPLAINT FORM

Name of person submitting complaint	
Name of business	
Street address of business	
City	Province or territory
Postal code	Phone number
Email address	
Date merchant discussed the issue with the acquirer	
Merchant number	
Name of acquirer's representative	
Element of the Code of Conduct under dispute	
Please summarize your complaint	

Supporting documentation to be attached to the complaint, sent by email or mailed, as applicable