

Customer Complaint Form

Client's Details:	
Name:	
Account Number:	
Complaint Details:	
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Cause for the complaint?	
What do you expect?	
Please fill additional fields if a specific order is a	ffected:
Order ID number:	
Date and time (GMT):	
Lots (Volume):	
Currency Pair	
instrument:	
Difference in PIPS:	
Signature:	
Date:	
Customer's Signature:	X

QuadraCP will handle the complaint promptly and comment on it. Please send the complaint form to our compliance department: support@quadracp.com.