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	Date: D D M M CY Y Y Y Y			
E-CHANNEL T	RANSACTION COMPLAINT Branch			
CUSTOMER INFOR	RMATION			
Name				
Account Number				
Card Type	Verve Mastercard Visa Others			
Card Number	Last four digits			
Channel User ID				
Phone Number				
Email address				
TRANSACTION DET	TAILS			
Channel	ATM POS FirstBank Online IVR FirstMobile Banking First-Trade Others			
Туре	Cash Withdrawal Cash Deposit Transfer POS Purchase Cash Card Load			
	Card Withheld echarge/TopUp Bill Payment Others			
Transation Date				
Transaction Amount				
Disputed Amount				
Amount in Words				
Other Details				
 I / WE CONFIRM THAT THE INFORMATION PROVIDED BY ME/ US IS TRUE, CORRECT AND COMPLETE I / WE HEREBY AGREE THAT THE INFORMATION I/WE HAVE PROVIDED ABOVE WILL BE USED BY THE BANK TO UPDATE MY BANKING RECORDS FROM TIME TO TIME I / WE AGREE TO INFORM THE BANK FROM TIME TO TIME, IF THE INFORMATION PROVIDED ABOVE CHANGES 				
FOR BANK USE ON				
Reversal Entries De	etails A/C Credited A/C Credited			
Amount	In Figure In Words			
Narration				
Initiator	Signature			
Authoriser	Signature			
COMPLAINT CONF	IRMATION SLIP (CUSTOMER'S COPY)			
FirstBank Since 1894				
	ed by the Bank's official			
Branch	Date: D D M M V Y Y Y Y			
*Please do not lose this sli	ip as it will be required to track the status of your complaint where necessary Officer's Stamp and Signature			
eRiz #3 13				