

J JANA SMALL FINANCE BANK



To: The Branch Manager

.....(Name of the Branch).....(Name of the City)

Name of the Customer:.....

Account No.

Debit Card/Credit Card/ATM Card No.

ATM ID/Location, if ID not available:.....Name of the Bank owning the ATM:.....

a) Complaint relating to Cash Withdrawal

Amount requested for withdrawal Rs..... Amount actually dispensed by ATM Rs.....

Amount debited to the account Rs..... Date of Transaction

DD	MM	YY	YY
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 Time of Transaction.....

b) Other Complaints:

Contact No. (R)..... (M) Email ID

Date: / /

Signature of the Customer

Received from on at hrs.

Complaint relating to: ☐ Cash Withdrawal ☐ Others

Complaint reference no. :

Date: / /

Signature/Stamp

We acknowledge the receipt of complaint from..... in respect of

We note to keep the customer informed on the closure of the complaint.

Date: / /

Signature of Bank official
with Seal