REF NO. ASCCS/F/BDM/010

P. O. BOX 44071, 00100, NAIROBI TEL. +254 020 2785000, +254 0111035600.
Email: info@apstarsacco.coop Website: www.apstarsacco.coop

MEMBER COMPLAINT FORM

Complainant Name …….....

ID/Passport No. of Complainant: …….....

Mobile No. ……... Email address …….....

Postal Address of Complainant …….....

Employer of Complainant …….....…….....

DESCRIPTION OF COMPLAINT:

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Continue on a separate sheet if necessary

(Please attach copies of any relevant documentation)

…… ……...

Signature of Complainant **Date**