

Appendix 2

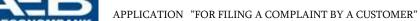
## APPLICATION №\_

for filing a complaint by the customer

## **CUSTOMER DETAILS**

NAME SURNAME PATRONYN	MIC
PASSPORT SERIES, NUMBER, BY WHOM	ISSUED
PLACE OF RESIDENCE	
POSTAL ADDRESS	
PHONE NUMBER(S)	
CONTENT OF THE COMPL	AINT
COMPLAINT IN CONNECTION WITH THE SERVICES PROVIDED BY THE BANK	
THE AMOUNT OF PROPERTY	CLAIM (AMD)

Attached----pages



ÆE	3
ARMECONOMBAN	IK
THEFT OF THE	

«\_\_\_\_\_» «\_\_\_\_\_\_\_» \_\_\_\_\_p. SIGNATURE OF THE CUSTOMER