



## PFCU MEMBER COMPLAINTS FORM

Complainant's contact information:

Name:	Account No:
Address:	
Phone No:	Email:

Details of complaint:

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Complainant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Send completed form to:** The Complaints Officer, People First Credit Union, James Fintan Lalor Avenue, Portlaoise, Co. Laois. R32XE18.

Alternatively - Email completed form to: [info@peoplefirstcu.ie](mailto:info@peoplefirstcu.ie)