

## **Customer Complaint Form**

| Clients' Details:                                 |              |
|---|--------------|
| Name:   |              |
|   |              |
| Account Number:                                   |              |
|   |              |
| Complaints' Details:                              |              |
|   | REX          |
| FOF   | REX U        |
|   |              |
| Cause for the complaint?                          |              |
| ·   |              |
|   |              |
|   |              |
|   |              |
| What do you expect?                               |              |
| , .   |              |
|   |              |
| Please fill additional fields if a specific order | is affected: |
| Order ID number:                                  |              |
|   |              |
| Date and time (GMT):                              |              |
| Lots (Volume):                                    |              |
| Lots (volume).                                    |              |
| Currency Pair                                     |              |
| instrument:                                       |              |
| Difference in PIPS:                               |              |
|   |              |
| Signature:  |              |
| Date:   |              |
| - Juice.  |              |
|   |              |
|   |              |
|   |              |
|   | X            |
| Customer's Signature:                             | -            |
|   |              |

VESTINGFX will handle the complaint promptly and comment on it. Please send the complaint form to our compliance department: support@vesting100.email