your name You (and your partner, if it's a joint complaint) need to sign here – even if someone else is bringing the complaint on your behalf. I confirm I want to make a formal complaint about the sale of the payment protection insurance described in this questionnaire. I confirm that all the information I have given in this questionnaire is true and accurate to the best of my knowledge. your name your signature else is bringing the complaint on your behalf. If someone is complaining for you (eg a relative or claims manager), your signature here means you authorise the person named on page 1 to represent you in this complaint.

please tick ✓ to confirm you have ...

| ☐ included everything you want to tell us about your complaint |
|--|
| ☐ signed the declaration above |
| ☐ enclosed copies of all relevant documents |
| or |
| ☐ not enclosed any documents with this form |

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