



wantedavenue

Customer Compliant Form

Clients Details:	
Name:	
Account Number:	
Complaints Details:	
<small>Related Product:</small>	FOREX <input type="checkbox"/>
Cause for the complaint?	
What do you expect?	
Please fill additional fields if specific orders are affected:	
Order ID number:	
Date and time (GMT):	
Lots (Volume):	
Currency Pair instrument:	
Difference in PIPS:	
Signature:	
Date:	
Customer Signature:	<div>X</div> <hr/>

Dream Equity Ltd will handle the complaint promptly and comment on it. Please send the compliant form to our compliance department support@wantedavenue.com