



**WESTERN UNION  
BORANG ADUAN PELANGGAN  
CUSTOMER COMPLAINT FORM**

**PERMOHONAN UNTUK / APPLICATION FOR:**

<input type="checkbox"/> Pembatalan / <i>Cancellation</i>	<input type="checkbox"/> Pemulangan / <i>Refund</i>
<input type="checkbox"/> Pindaan / <i>Amendment</i>	<input type="checkbox"/> Memperbaharui Urusan / <i>Renew Transaction</i>
<input type="checkbox"/> Pertikaian / <i>Dispute</i>	<input type="checkbox"/> Lain-lain / <i>Others</i>

**MAKLUMAT PELANGGAN / CUSTOMER INFORMATION**

Nama / *Name* : \_\_\_\_\_

No. Dokumen Pengenalan / *ID No.* : \_\_\_\_\_ No. Tel / *Tel No.* : \_\_\_\_\_

Money Transfer Control Number (MTCN) : 

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Tarikh Urusan / *Date of Transaction* : \_\_\_\_\_

Sebab Permohonan / *Reason of Application* : \_\_\_\_\_

Butiran Aduan / *Description of Complaint* : \_\_\_\_\_

Tuntutan Waris / *Beneficiary Claim* :  Kredit BSN Giro/i (No. Akaun / *A/c No.*)

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*Interbank Fund Transfer (IBG)*

Nama Bank Penerima / *Payee's Bank Name* : \_\_\_\_\_

No. Akaun / *A/c No.*

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Alamat Waris / *Beneficiary Address* : \_\_\_\_\_

(Sila isikan alamat waris / *Please fill in beneficiary address*) \_\_\_\_\_

Poskod / *Postcode*: \_\_\_\_\_

Tandatangan Pelanggan / *Signature of Customer* : \_\_\_\_\_ Tarikh / *Date* : \_\_\_\_\_

**UNTUK KEGUNAAN CAWANGAN / FOR BRANCH USE :**

Cawangan / *Branch* : \_\_\_\_\_

Nama & No. ID / *Name & ID No.* : \_\_\_\_\_

No. Tel & Faks / *Tel & Fax No.* : \_\_\_\_\_

Tandatangan / *Signature* : \_\_\_\_\_ Tarikh / *Date* : \_\_\_\_\_

**UNTUK KEGUNAAN JABATAN PENGURUSAN CAWANGAN / FOR BRANCH MANAGEMENT DEPARTMENT USE :**

Nama Pegawai & No. ID / *Officer In-Charge & ID No.* : \_\_\_\_\_

Tindakan / *Action Taken* : \_\_\_\_\_

Tandatangan / *Signature* : \_\_\_\_\_ Tarikh / *Date* : \_\_\_\_\_