



BANK OF BHUTAN LIMITED

BRANCH _____

Date:

ATM CARDHOLDER COMPLAINT FORM

Cardholder Name : _____

Account Number : _____

Card Number : _____

ATM ID & Location : _____

REF. NO. (Refer Receipt) : _____

Transaction Date (Refer Receipt) : _____

Transaction Time (Refer Receipt) : _____

Transaction Withdrawal Amount : NU _____

Reasons: _____

(Cardholder Signature)

Contact No.

----- FOR BANK'S ATM CUSTODIAN USE ONLY -----

Physical Cash verified by:

Name: _____

Name: _____

Signature: _____

Signature: _____

----- FOR CARDHOLDER USE ONLY -----

I, hereby declare that I have received the full payment of my above Cash Amount from the Bank's ATM Custodian on the Day _____ Month _____ Year _____.

(Cardholder Signature)