

Association Member Complaint Receipt

Date: [Insert Date]

Complaint ID: [Insert Complaint ID]

Member Name: [Insert Member Name]

Member ID: [Insert Member ID]

Complaint Details

Nature of Complaint: [Insert Nature of Complaint]

Description: [Insert Detailed Description]

Received By

Representative Name: [Insert Representative Name]

Position: [Insert Position]

Next Steps

Your complaint will be reviewed and addressed within [Insert Time Frame]. You will be notified regarding the status via [Insert Communication Method].

Thank you for bringing this matter to our attention.

For any further inquiries, please contact us at [Insert Contact Information].