FORM OF COMPLAINT

1.a. Personal data of the complainant

LAST NAME/LEGAL ENTITY NAME	FI	FIRST NAME		REGISTRA or ID NUM			P	LEI (IF AVAILABLE)		CLIENT REFERENCE (IF AVAILABLE)
ADDRESS: STREET, NUMBER, FLOOR (for firms registered office)			Р	POSTCO		E CIT		ГҮ		COUNTRY
			1						1	
TELEPHONE					EMAIL					
1.b Contact details (if different from 1.a) LAST NAME/LEGAL ENTITY NAME FIRST NAME										
LAST NAME/LEGAL ENTITY NAME			AIVIE	IE FIRST NAME						
ADDRESS: STREET, NUMBER, FLOOR (for firms registered office)		Р	POSTCO		CITY		ΓΥ	COUNTRY		
TELEPHONE						EMAIL				
2.a Personal data o				=					attorn	ey or other
LAST NAME		FIF	FIRST NAME/LEGA ENTITY NAME				REGISTRATION NUMBER AND LEI (IF AVAILABLE)			

ADDRESS: STREET, NUMBER, FLOOR (for firms registered office)		POSTCODE		CITY		COUNTRY
TELEPHONE	EMAIL					
2.b Contact details (if o	different from	n 2.a)				
LAST NAME/LEGAL	ME	FIR	ST NAME			
ADDRESS: STREET, NUMBER, FLOOR (for firms registered office)		POSTCO	DE	CITY	COUNTRY	
TELEPHONE		EMAIL				
3. Information about to 3.a Full reference of the (i.e. name of the crypto other references of the	e crypto-ass o-asset servi	set service o ice provider	, cryp			
3.b Description of the o	complaint's s	subject-mati	ter			
Please provide docume 3.c Date(s) of the facts						

3.d Description of damage, loss or detriment caused (where relevant)	
3.e Other comments or relevant information (where relevant)	
In(place) on(date)	
SIGNATURE COMPLAINANT/LEGAL REPRESENTATIVE	
Documentation provided (please check the appropriate box):	
Power of attorney or other relevant document	
Copy of the contractual documents of the investments to which the complaint relates	
Other documents supporting the complaint:	