

Account • Card • Crypto • Trade • Invest •

Complaint Form			DATE OF COMPLAINT
PERSONAL INFO	RMATION		
Full Name :			
Full Address (including pos	stal code):		
User Name:			
Personal ID or Date of Birth	n:		
Email:			
Phone:			
IF YOUR COMPLAINT IS R	RELATED TO A PAYMENT	TRANSACTION, PLEASE PROVI	DE THE DETAILS BELOW:
Date and time of the affected transactions:			
Amount and currency of the affected transactions:			
Brief Description of the Co	mplaint:		

(Please include as many details as possible, such as references to the relevant transactions or crypto services, dates of the facts that led to the complaint, description of damages, losses or detriment caused, your claim, etc.)

Please attach the relevant evidence and supporting documentation for your complaint (i.e. documentation supporting damage, loss or detriment caused) such as screenshots, reports, error messages and error codes, etc.

Please note that If you wish to submit files, kindly send them via email to support@purewallet.app.