

STATE OF NEW MEXICO

MICHELLE LUJAN GRISHAM, GOVERNOR

Clay Bailey, Superintendent

Mark Sadowski, Director

## **COMPLAINT FORM**

In filing this complaint, I understand that the Financial Institutions Division (Division) does not serve as legal counsel or a private lawyer in representing private citizens. I am filing the complaint to notify your office of activities of a regulated industry and to request your assistance in resolving this matter.

Have you referred this matter to an	attorney, the courts, or	r other regulatory authority?	Yes	No
If you marked "Yes" above, please name, case number, or other tracking				
Tell us about yourself:				
Name:				
Address:		City/State/Zip:		
Phone numbers: Home:	Work:	Cell	l:	
E-mail address:				
Loan or Deposit Account # (if applied	cable):			
Your complaint is against:				
Business Name:		Type of business:		
Individual's Name:				
Address:		City/State/Zip:		
Email address:				
Phone number:				
What is your complaint? Attach a and material(s). Documentation wi	1 0	essary and include <i>copies</i> of all	supporting do	cumentation



What would you consider a satisfactory i	resolution of this complaint? Attach additional pages if necessary	•
	laint may be sent to the personal against whom I am filing I have knowingly filed false or misleading information, the Divis	
Your signature:	Date:	
Please Note: If you have retained counsel t	to represent you on your specific complaint, or if there is any court of	cas

Please Note: If you have retained counsel to represent you on your specific complaint, or if there is any court case or administrative proceeding already pending concerning the subject or your complaint (i.e. bankruptcy, foreclosure, civil suit, etc.), the Division will make a record of your complaint and will evaluate any information/claims determined to fall withing the Division's jurisdiction and authority, but the Division will not be able to mediate your complaint.