The purpose of this form is to express all of the facts, allegations, information, data and documentation concerning your complaint about a member of the NATB. You may be entitled to compensation if a decision is made in your favor. Either party involved has the right to an appeal, as outlined in the NATB Complaint Procedures.

Todays Date | **Date of Purchase** | **Name Of Event**

Event Date | **Event Time** | **$ Amount Paid (Per Ticket)** | **Quantity of Tickets**

Name Of The Broker Complaint Is About | **How Did You Pay**

Were Your Tickets Delivered? | **If So, How?** | **Name Of The Person You Spoke With At The Company**

Please Detail Your Complaint

Your Name | **Street Address**

Your State | **Your Zip** | **Home Phone** | **Work/Cell Phone**

Thank you for taking the time to fill out this form. The Broker will have a chance to reply in writing and the complaint committee will make a determination that will be forwarded to you. Please include a copy of any receipts, supporting documentation, or contracts that you may have. By signing this form I also waive the confidentiality of information and documentation provided and I understand that any information or documentation may be provided to concerned parties including but not limited to members of any panel reviewing this complaint, the accused member, potential witnesses and members of the board of directors of the NATB.

National Association of Ticket Brokers (NATB)
430 Palisade Avenue #501, Jersey City, NJ 07307
Phone: 630-510-4594
info@natb.org | www.NATB.org

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Complainant Signature