## **Merchant Complaint Handling Form**

For Complaints Pertaining to the Code of Conduct.

## **Directions**

Automated electronic transmission is not available for this form. Please print the completed form and email with supporting documentation, where available, to CodeofConductInquiry@discover.com or send to the physical address listed below. Please save a completed form for your records.

Name of Person Submitting the Complaint
Merchant Business Name
Merchant Street Address
City
Province/Territory
Postal Code
Phone Number
E-mail Address
Name of Acquirer
Date Merchant Contacted Acquirer
Name of Payment Processor
Merchant Number
Name of Acquirer Representative
The Policy Element of the Code that the Complaint Pertains to
Please provide a summary of your complaint

E-mail or mail supporting documents, if applicable:

## Email:

CodeofConductInquiry@discover.com

## **Mailing Address:**

Discover Global Network 610 Chartwell Rd, Suite 101 Oakville, ON L6J 4A5







