

RCS Form for ICT Zone Ventures Bhd

Date: _____

 Request

 Complaint

 Suggestion
Investor Details

Investor ID: _____ Certificate No: _____

Investor Name: _____ NRIC No: _____

Agent ID: _____ Agent Name: _____

Request / Complaint / Suggestion

Natures of Request/Complaint/ Suggestion:

1) _____

2) _____

Requested by:

Date:

Recommended by:

Date:

Approved by:

Date:

For office use only

Action:

1) _____

2) _____

 Cost Incurred: Yes No Amount: RM _____

Received by:	Processed by:	Checked / Verified by:
Date:	Date:	Date: