



## Texas Credit Union Department Complaint Form

### Instructions:

- File a complaint with the institution in question before filing a complaint with CUD.
- Complete this form. Be as detailed as possible. Print very clearly and neatly in dark ink.
- Enclose or attach copies of all related documents concerning your transactions. Do not send originals!
- A copy of your complaint and attachments will be sent to the credit union.

### **Mail, fax or email this completed complaint form with any attachments to:**

Texas Credit Union Department

914 East Anderson Lane

Austin, Texas 78752-1699

Fax: (512) 832-0278

Email: [complaints@tud.texas.gov](mailto:complaints@tud.texas.gov)

*(Please note: Your e-mailed information will not be encrypted.)*

### Your Information:

Title: Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Other:		
First Name:	Middle Initial:	Last Name:
Street Address:		
City:	State:	Zip:
Phone Number:	Mobile <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>	
Email:		

### Military Service:

Are you a member of the US Armed Forces, Guard, Reserves or a dependent?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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### Credit Union Information:

Name of Credit Union:		
Street Address:		
City:	State:	Zip:
Phone:		
Name in which account(s) are listed:		
Are/Were you a signer on the account(s)? Yes <input type="checkbox"/> No <input type="checkbox"/> (If no, please explain in your narrative.)		
Type of Transaction or Service:		
Date of Transaction:		
Did you sign a contract, such as a loan, an account agreement, etc.? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, please attach a copy.)		
Have you complained to the credit union?	Yes <input type="checkbox"/> If so, when:	
No <input type="checkbox"/> If no, please attempt to resolve this issue by filing a complaint with your credit union prior to filing a complaint with CUD.		
Name of person complained to, if any:		
Do you have an attorney? If so, who:		
If the Texas Credit Union Department is not the appropriate agency, do you grant permission to forward your complaint to the appropriate agency? Yes <input type="checkbox"/> No <input type="checkbox"/>		

**Describe the exact nature of your complaint below. Attach additional pages if necessary.**

**Please indicate what you feel the credit union should do to address your concerns.**

This department does not have the authority to resolve contractual disputes or undocumented factual disputes between member and a credit union. We also do not have the authority to resolve disagreements pertaining to credit union policies and procedures that are a matter of management discretion, or any disputes that are in litigation or about which a court has made a ruling. Please see pamphlet for more information about the complaint process.

The **Texas Public Information Act** may require disclosure of a complaint after a file is closed.

The information given above is true to the best of my knowledge and belief. I authorize the Credit Union Department to send this complaint and attachments to the credit union.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date