

Company Response Survey (Paper Form)



Provide feedback about the company's response to your complaint.

[INSERT: DATE]

[INSERT: [CONTACT'S FULL NAME]

[INSERT: CONTACT'S ADDRESS 1]

[INSERT: CONTACT'S ADDRESS 2]

[INSERT: CONTACT'S CITY], [CONTACT'S STATE] [CONTACT'S ZIP]

Dear [INSERT: CONSUMER FIRST NAME LAST NAME],

Thank you for contacting the Consumer Financial Protection Bureau. When you called about the company's response to your complaint you requested a paper feedback form. The feedback form and instructions are included with this letter.

You have **60 days** from when the company sent their response to complete and return your feedback form.

You can return your feedback by:

- Mail:
Consumer Financial Protection Bureau
P.O. Box 4503
Iowa City, IA 52244
- Fax: (855) 237-2392

We appreciate your participation in the complaint process.

Thank you,

Consumer Financial Protection Bureau

consumerfinance.gov

(855) 411-2372

QUICK LINKS

More about our complaint process: consumerfinance.gov/complaint/ or call (855) 411-2372

For legal assistance visit the Legal Services Corporation website: lsc.gov

Additional financial information and resources: consumerfinance.gov



Submit your feedback on the company response

OMB NO. 3170-XXXX





EXPIRATION DATE: [XX/XX/XXXX]

Name: [Consumer First name Last name]

Complaint Id: [Complaint number]

You will have 60 days from when the company responds to complete your feedback.

The CFPB will share your feedback responses with the company and use the information to help the CFPB's work with consumer complaints. Participation is voluntary, you are not required to submit feedback.

| How to submit this feedback form | Other ways to submit feedback |
|---|---|
| <p> By fax (855) 237-2392</p> <p> By mail Consumer Financial Protection Bureau PO Box 4503 Iowa City, IA 52244</p> | <p> Over the phone (855) 411-2372</p> <p> Online consumerfinance.gov/complaint</p> |



Consumer Financial
Protection Bureau

SUBMIT YOUR FEEDBACK ON THE COMPANY RESPONSE

Submit your feedback

Only provide feedback about the response that you received from the company.

1 The company's response addressed all of my issues. Yes No

Please provide any additional comments to explain your response.

(Optional)

Do not include personal information, such as your name, account number, address, Social Security number, etc.

2 I understand the company's response to my complaint. Yes No

Please provide any additional comments to explain your response.

(Optional)

Do not include personal information, such as your name, account number, address, Social Security number, etc.

3 The company did what they said they would do with my complaint. Yes No

Please provide any additional comments to explain your response.

(Optional)

Do not include personal information, such as your name, account number, address, Social Security number, etc.

SUBMIT A COMPLAINT ABOUT A FINANCIAL PRODUCT OR SERVICE

Paperwork Reduction Act

CFPB will treat the information received consistent with its confidentiality regulations at 12 C.F.R. Part 1070, et seq.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB Control Number for this study is 3170-XXXX. The control number expires on XX/XX/XXXX. The estimated time to complete this survey is about 5 minutes. If you have any comments regarding the time estimates associated with this study or suggestions on making this process simpler, please contact the Consumer Financial Protection Bureau (Attention: PRA Office), 1700 G Street NW., Washington, DC 20552; 202-435-9575; or CFPB_PRA@cfpb.gov.

Privacy Act Statement

5 U.S.C. 552a(e)(3)

The information you provide through your participation in the Company Response Survey will provide valuable feedback to the company about how they handled your complaint. Your answers to this survey will be available to the company. If you have provided consent, the CFPB may publish your de-identified responses on the Consumer Complaint Database.

The Consumer Financial Protection Bureau ("CFPB") will use your responses to inform CFPB's work.

Information collected by the CFPB will be treated in accordance with the System of Records Notice ("SORN"), CFPB.022 - Market and Consumer Research Records, <https://www.federalregister.gov/articles/2012/11/14/2012-27582/privacy-act-of-1974-as-amended>. This collection of information is authorized by Pub. L. No. 111-203, Title X, Sections 1013 and 1022, codified at 12 U.S.C. §§ 5493 and 5512.

Participation in this survey is voluntary. You are not required to participate.

The information given is true to the best of my knowledge and belief. I understand that the CFPB cannot act as my lawyer, a court of law, or a financial advisor.

I want the CFPB to publish this feedback on consumerfinance.gov so that others can learn from my experience.