

Client Complaint Form

At Gemini Accounting, we take quality control very seriously. We commit to and strive for excellence in our service to you, our valued client. We have adopted this form as part of our complaints process, which is an integral part of our Quality Control system. Through complaints, we can learn, and therefore improve the level of service we can provided to you. Please use this form to lodge a formal complaint under any service level, code, law or regulation where you believe Gemini Accounting has not performed well. We thank you for making appropriate use of this form.

This form can be submitted by post, hand delivery, fax or email. It can also be used to guide and document a conversation held.

Your personal information

We will handle your personal information in accordance with the Australian Privacy Principles. We may also need to disclose your information to others who have information relevant to your complaint, if necessary.

Please confirm your understanding by checking the box below:

I understand that Gemini Accounting may need to use/disclose my personal information.

Accessing your information

If you would like to access to the information about you that Gemini Accounting holds, please contact us. If you have any questions about the personal information we collect and how we will handle your information, please contact us or see our privacy policy.

Please send this completed form to us by:

Date of your complaint:

Post	Drop-Off	Email	Fax
PO Box 1041 Oxley QLD 4075	33 Muirfield Cres. Oxley QLD 4075	leslie@geminiaccounting.com.au	(07) 3879 8112



About You – the Complainant

First name		Last name		
Preferred contact method (you mus	t provide at leas	t one contact meth	nod)	
Phone		Email		
Address line 1				
Address line 2				
Suburb/City	State		Postcode	
Previous Dealings				
If prior complaints lodged and these	e remain unresol	ved, please provid	e the date/s of prior co	mplaint/s:

Your Complaint

On the following page, please describe the issue that you have experienced with Gemini Accounting. It will assist us if you can explain:

- What happened
- When it happened (including dates)
- Who did it (include names of individuals involved if known)
- How and when you found out about it.

The clearer your explanation is the more easily we will be able to assist you. Please feel free to attach additional information.



Decelution			
Resolution			
What action would you like us to take to resolve your	complain	t?	
Supporting information			
You may attach relevant information that supports the	e complai	nt.	
Diamental and detection			
Please sign and date this form			
Signature	_	Date	_