Annex "A"

MERALCO	**DATA PRIVACY OFFICE**	Reference Number:
	COMPLAINT FORM	Page **1** of **1**
Complaint:		

1. Contact Details	
Full Name of Complainant:	
Full Name of Complainant's Representative, if applicable:	
Address:	
Contact number:	
Email Address:	
2. Complaint Details	
Date and Time of Incident:	
Date and Time the Incident was Detected and Reported:	
Physical Location of the Incident:	
List the Personal Information / Sensitive Personal Information involved:	
Name of Meralco office or personnel involved in the collection, handling or processing of the information, if applicable:	
Have you attempted to contact the concerned office or individual?	
Provide a brief description of the Incident:	
In what way did the collection, handling or processing of your personal information by the office/personnel affected your privacy?	
Please indicate what your preferred resolution for the complaint would be.	