



THE MALAYSIAN INSTITUTE OF CHARTERED SECRETARIES AND ADMINISTRATORS

COMPLAINT FORM

A. PARTICULARS OF COMPLAINANT

Full Name (As per : _____
NRIC/ Passport/
Registration document) _____

New NRIC No. / :

						-							

Passport No.

Nationality : _____

Company Name : _____

Company Number : _____

Relationship to the : _____
company

Correspondence : (Home) _____
Address
City: _____ Postcode: _____ State: _____

(Office) _____
City: _____ Postcode: _____ State: _____

Telephone No. (Home) : _____

Telephone No. (Office) : _____

Handphone No. : _____

Fax No. : _____

E-mail : _____

FOR OFFICE USE ONLY

Received by:

Date:

Time:

B. COMPLAINT AGAINST MAICSA MEMBER

Name of Member : _____

MAICSA Number : _____

If this Member is an External Company Secretary, please circle where appropriate: Yes or No

If yes, please provide Name of firm and current address:

Name of firm : _____

Current address : _____

Telephone No. : _____

Date of Appointment as Company Secretary in your Company : _____

If this Member is an In House Company Secretary, please circle where appropriate: Yes or No

Date of Appointment as Company Secretary in your Company : _____

C. ACTION TAKEN (Tick where applicable)

Have you lodged a report or complaint to the police, other government agency/agencies, statutory or regulatory authority/authorities?

NO

YES, I have lodged a complaint/report with the following (please furnish a copy of the complaint/report together with this Complaint Form) :

Police Date: _____ Report ref. no.: _____

Companies Commission of Malaysia Date: _____ Report ref. no.: _____

Others: (please indicate) _____ Date: _____ Report ref. no.: _____

In the event a complaint is lodged against a member of the Institute, it is the policy of the Institute to require the complainant to submit a duly completed, signed and affirmed complaint form, together with a processing fee of RM106.00 (inclusive of 6% GST). Upon receiving the complaint form and payment, it is our practice to write to the member/s concerned and ask for their response to the allegations received against them. The complaint and response from the member will then be forwarded to the disciplinary body of the Institute, the National Investigation Group (NIG), to investigate the matter. In order to facilitate the resolution of such complaint or for a case requiring referral, NIG will thereafter, refer such case to the National Disciplinary Tribunal (NDT). All the findings and decisions made by the National Investigation Group of the Institute will be final.

D. DETAILS OF COMPLAINT

Please set out each allegation(s) against the member and the details of the complaint. You may use an attachment and title it as "Particulars of Complaint" if insufficient space. Please support each allegations with substantial evidence/document:

1. _____
 2. _____
 3. _____
 4. _____
 5. _____
- _____
- _____
- _____
- _____
- _____

E. DOCUMENTS TO SUPPORT THE COMPLAINT

(eg. Copy of the complaint/report lodged with the police, other government agency, statutory authority or regulatory authority as disclosed in item C above, Statutory documents, letters, minutes of meetings, proof of transaction, etc.)

The following documents are attached with this Complaint Form to support the complaint:

<u>No.</u>	<u>Document</u>	<u>Tick where appropriate</u>
1)	Company's Memorandum and Articles of Association	<input type="checkbox"/>
2)	Company's Notification of Change in the Register of Director, Managers and Secretaries Form under Section 58 of the Companies Act 2016 and/or Form 49 of Companies Act 1965	<input type="checkbox"/>
3)	Company's Annual Return (Latest)	<input type="checkbox"/>
4)	Company Search from SSM (Latest)	<input type="checkbox"/>
5)	Others: (please indicate)_____	

Please forward any additional information to:
Members Department, The Malaysian Institute of Chartered Secretaries and Administrators
No 57, Bangunan MAICSA, Mid Valley City, Lingkaran Syed Putra, 59200 Kuala Lumpur
Tel: 03-22829276 or Fax: 03-22829281 or E-mail: members@maicsa.org.my

F. DECLARATION BY COMPLAINANT

STATUTORY DECLARATION

I, (name) _____, (NRIC no.) _____, hereby do solemnly and sincerely declare the following:

1. I am a director/shareholder/manager/liquidator of (name of company) or I am the _____ (state relationship with company) of the Company.
2. All information given herein on the Complaint (including the relevant supporting documents) are to the best of my knowledge and belief to be accurate in all respects.
3. The Malaysian Institute of Chartered Secretaries and Administrators be authorised to inform _____ (Insert name of Company Secretary) (the "Respondent") that a complaint has been made against him/her, and to furnish the Respondent with a copy of this Complaint Form together with the enclosures.
4. I confirm and agree to render full assistance and cooperation in respect of the Complaint including providing clarifications by way of telephone calls, letters and emails and attending meetings, when invited, with representatives of the disciplinary committees of The Malaysian Institute of Chartered Secretaries and Administrators investigating the matter, as and when required.
5. I will accept all the findings and decisions made by the National Investigation Group of the Institute as final.
6. In the event that I do decide to withdraw the Complaint, I have no objections to The Malaysian Institute of Chartered Secretaries and Administrators reserving the right to proceed with the investigation of the Complaint, as it deems fit.

And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Statutory Declarations Act, 1960.

Subscribed and solemnly)
 declared by the abovenamed)
 at _____)
 in the state of _____)
 on this _____ day of _____ 20____)

.....
 Signature of complainant
 (Director/ Shareholder/ Manager)

Before me,

.....
 COMMISSIONER FOR OATHS

G. PARTICULARS OF PAYMENT FOR PROCESSING FEE OF RM106.00 (inclusive of 6% GST)

Payment Method:

1. Cheque/ Bank Draft No.: _____ (made payable to "MAICSA")

2. Online Banking (Please attach the proof of payment or receipt from the bank)
MAICSA MAYBANK A/C No. 5144 8630 1427
Name of Bank of Transfer: _____ Ref No: _____ Date: _____

3. Credit Card: Please tick (✓) and fill up the following section
 Charge to VISA Charge to MASTERCARD
Bank : _____
Card No : _____
Name on the Card : _____
Expiry Date : _____

*The processing fee is payable for every fresh complaint lodged. Please note that the processing fee is non-refundable.

<p>FOR OFFICE USE ONLY</p> <p>Name of the complainant: _____</p> <p>Name of the member in complaint: _____</p> <p>MAICSA No.: _____</p> <p>Receipt No.: _____</p>
--

This space below is intentionally left blank.