

Merchant Complaint Handling Form

For Complaints Pertaining to the Code of Conduct.

Directions

Automated electronic transmission is not available for this form. Please print the completed form and email with supporting documentation, where available, to CodeofConductInquiry@discover.com or send to the physical address listed below. Please save a completed form for your records.

Name of Person Submitting the Complaint

Merchant Business Name

Merchant Street Address

City

Province/Territory

Postal Code

Phone Number

E-mail Address

Name of Acquirer

Date Merchant Contacted Acquirer

Name of Payment Processor

Merchant Number

Name of Acquirer Representative

Please Select

The Policy Element of the Code that the Complaint Pertains to

Please provide a summary of your complaint

E-mail or mail supporting documents, if applicable:

Print

Email:

CodeofConductInquiry@discover.com

Mailing Address:

Discover Global Network
610 Chartwell Rd, Suite 101
Oakville, ON L6J 4A5

