Money Transmitter, Currency Exchanger, or Virtual Currency Complaint

You can often resolve an issue by contacting the company directly. If you haven’t contacted the company about your concerns, please do so before filing a complaint. If you’re still not satisfied with the result, please fill out this form to file a complaint.

We will confirm receipt of your complaint. We will also notify you when the complaint is resolved.

Public records disclosure

Your complaint is a public record under the Washington State Public Records Act (RCW 42.56). Your complaint may be released if someone requests it. **If you provide identifying information in your complaint, your complaint is not anonymous.**

We may release your identifying information (including your name and contact information). You can choose to have your identifying information removed. Please note that this does not stop the release of your information as part of a court case or subpoena.

☐ Do not release my identifying information in response to a request for public records
☐ It’s OK to release my identifying information in response to a request for public records

Your information

Full name(s): __________________________________________________________________

Mailing address: __________________________________________________________________

City: ___________________________ State: _____________ Zip: ____________________

Residence address *(please tell us where you live if it’s different than where you get your mail)*: __________________________________________________________________

City: ___________________________ State: _____________ Zip: ____________________

Telephone: ________________________ Email address: ____________________________
How should we send you updates about your complaint?
☐ Email
☐ US Mail

Are you on active duty in the armed forces, or a dependent of someone who is?
☐ Yes
☐ No

Are you submitting this complaint for someone else?
☐ Yes
☐ No

If you are submitting this complaint for someone else, do you have that person’s permission to communicate with us about their complaint? We’ll need that person’s written, signed permission to communicate with you about the complaint.
☐ Yes
☐ No

If you are not a party to the transaction described in the complaint, what is your involvement?
__________________________________________________________

Do you have an attorney?
☐ Yes
☐ No

Would you like us to send correspondence about your complaint to your attorney? If you choose yes, we will communicate with you through your attorney, rather than with you directly.
☐ Yes
☐ No

Attorney’s name:__________________________________________________________

Name of law firm:__________________________________________________________

Address:_________________________________________________________________

City: __________________________ State: ___________ Zip: ___________________

Telephone: ______________________ Email address: ___________________________
If you want us to contact your attorney, how should we contact them?
☐ Email
☐ US Mail

What happened?

Against whom are you filing a complaint?

Name(s): _________________________________________________________________

Address: __________________________________________________________________

City: ___________________ State: _____________ Zip: _______________________

Telephone: (______)________-__________  Email: ____________________________

Whom did you contact? ___________________________________________________

What did the transaction involve? If applicable, are you a:
☐ Wire, money order, or money transfer  ☐ Buyer
☐ Virtual currency  ☐ Seller
☐ Currency exchange

When did the transaction occur? _____________________________________________

Amount of transaction: _____________________________________________________

What happened? Please describe what happened. Be as specific as you can.
Can you give us copies of documents and correspondence relevant to your complaint?
If yes, please enclose copies with your complaint.
☐ Yes
☐ No

Have you tried to resolve the issue?
☐ Yes
☐ No

How did you hear about DFI?

__________________________________________________________

Declaration:

By signing my name below, I declare, under penalty of perjury under the laws of the State of Washington that the information contained in this complaint is true and accurate and the information may be used to further investigate the complaint.

________________________________                ______________________________________
Date           Signature