



ANNEX I: COMPLAINT WITHDRAWAL DECLARATION FORM

Name of Complainant:	
Complainant ID reference:	
Location:	
Complaint Ref Number:	

I, the complainant named above, wish to withdraw my complaint referenced above. It is my own personal choice to do this and I am not acting under the duress of others.

I am withdrawing my complaint because

I understand that if I wish to resubmit this complaint, I must do so within the next three months.

Complainant's Signature:	
Date (DD/MM/YY):	
Supplier Investigator's Name:	
Investigator's Signature:	
Date (DD/MM/YY):	
Home Office IRC/STHF Compliance Manager Name (HEO) (2nd line assurance)	
Signature:	
Date (DD/MM/YY):	