



4LIFE AFFILIATE GRIEVANCE AND COMPLAINT FORM

The complaining affiliate should complete the entire form. Areas marked with an asterisk (*) are required to submit the grievance or complaint to 4Life. It is important for the complaining affiliate to include any information that can be used by 4Life as direct, firsthand, evidence to support the complaining affiliate’s allegations against another 4Life Affiliate. Supporting information may include detailed notarized or witnessed statements as to the time, place and participants, any handouts that were given at meetings, email messages received from another 4Life affiliate soliciting the complaining affiliate to join another network marketing organization or to move to another line of sponsorship, or any other evidence that directly links a 4Life affiliate’s practice or conduct to breaches of 4Life’s Policies and Procedures.

Any information the complaining affiliate shares with 4Life will be kept confidential by 4Life and will not be shared with any other 4Life affiliate, unless 4Life is compelled to disclose the information in arbitration, mediation, through discovery in litigation, or by a judge. 4Life will not accept complaints that are made anonymously.

COMPLAINT TYPE*:

CROSS-SPONSORING	SELLING BELOW WHOLESALE	PRODUCT/INCOME CLAIMS
SOLICITING	UNLICENSED PRODUCTS	OTHER

1. YOUR INFORMATION*:

Nombre	Identificador de Afiliado	Teléfono fijo	Teléfono laboral	Móvil
Your Name	Affiliate ID	Home Phone	Work Phone	Cell Phone

Dirección postal	Ciudad	Provincia	País	Código postal
Mailing Address	City	State	Country	Postal Code



2. COMPLAINT*

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Complaint Against (Name) Affiliate ID

Home Phone

Work Phone

Cell Phone

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Mailing Address

City

State

Country

Postal Code

DESCRIBE THE COMPLAINT* (WHAT HAPPENED, WHO WAS INVOLVED, WHEN THE EVENTS OCCURRED – ATTACH ANY RELATED MATERIALS BELOW)

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I hereby certify that the information provided herein is correct to the best of my knowledge, and I recognize that this information will become part of 4Life’s records in conjunction with any investigation instigated by the claims stated above.

Signature

Date and place