

KEYBOX COMPLAINT FORM
Name of REALTOR® being complained of:
Company:
Company address:
Phone:
Email:
Date: /
Nature of complaint:
Explanation (please explain in detail the nature of the complaint):
Complaint submitted by:
Company (if applicable):
Phone:
Email:
Signature:

SUBMIT MATERIALS TO:

Columbus REALTORS*
Attn: Keybox Compliance Committee
2700 Airport Drive, Columbus, Ohio 43219
bethanie@columbusrealtors.com