

# HELLAS HORSE RACES S.A.

## COMPLAINT FORM (Offering Horse Races betting to minors)

### COMPLAINANT INFORMATION

SURNAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ID / PASSPORT NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

MOBILE: \_\_\_\_\_

### Complaint details:

(Point of Sale offering horse races betting to minors, day and time of occurrence, event description, details and other supporting material)

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### Attachments

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_

Date ..../../....

The Complainant

(signature)