

INSTRUCTIONS FOR FILING A CONSUMER COMPLAINT

I want to thank you for contacting us concerning your consumer complaint. Enclosed is a consumer complaint form for your use. Before submitting the form; however, there are steps you may take to mediate a solution yourself.

Contact the manager or supervisor of the business. Express, in reasonable tones, your dissatisfaction with the transaction. Have a clear plan of how the business can resolve the conflict. For example, a partial or total refund or even exchange for new merchandise. If the manager or supervisor does not accept your proposal, ask him/her what can be done to resolve your complaint.

If these steps do not satisfactorily resolve your complaint, please feel free to submit the complaint form to our office. Please do the following:

1. Fill out the form completely using a **black ink pen or typewriter. Do not use blue ink as it does not photocopy well.**
2. When your complaint form is completely filled out, copy it and attached **two copies** of any documents necessary to explain or identify the transaction, such as sales receipts, invoices, contracts, newspaper advertising, etc. We need **two copies** of the form and attachments in order to process your complaint. Also note that all documents and other materials submitted to our office become property of the state. We suggest you send copies instead of the originals; please do not send items such as photographs or tapes.
3. Return the two copies of the complaint form and attachments to our office.

When we receive your completed complaint and attachments, we will review the information to determine whether we have jurisdiction to process the complaint. If we do not have jurisdiction, we will make every effort to refer your complaint to an agency that may be able to help you. For instance, the Consumer Protection Division cannot handle complaints against public entities or where the complainant is not a consumer as defined in the New Mexico Uniform Trade Practices, Act.

If it is determined that our office has jurisdiction, the complaint will be reviewed by our Division's Staff. Once we have an opportunity to review your complaint and determine the appropriate action, our Division will inform you that:: (1) We will take no action, keep the complaint on record and inform you the reasons for not taking any action on the matters in your complaint; (2) We will initiate mediation; (3) or/and Our Division's Staff will make a further review to determine what litigation action, if any, is appropriate.

If mediation is appropriate we will inform the business of your complaint and provide it with copies of the complaint and attachments. The business will be asked to respond to the complaint. We will keep you informed about the progress of our mediation efforts. If the mediation is successful we will help to facilitate the resolution of our complaint and arrange for any exchange, adjustment, refund or any further services as agreed upon.

We cannot act as a private attorney and cannot give you legal advice nor represent you individually and privately in court. Even in mediation, we do not act as the consumer's attorney. Consumer laws in New Mexico allow for the private and individual right of action and anyone can file a consumer claim in court. The Attorney General initiates legal action only when there is a pattern of

consumer fraud affecting a significant number of consumers. The Attorney General is authorized to intervene only on behalf of the public in general.

We appreciate your interest and concern in contacting the Office of the Attorney General and look forward to hearing from you.

Consumer Protection Division

AG CODE

KEY CODE

FOR OFFICIAL USE ONLY

ATTORNEY GENERAL PATRICIA MADRID
Procuradora General del Estado Patricia Madrid
 Consumer Protection Division/ *División de Protección al Consumidor*
 P.O. Drawer 1508, Santa Fe, NM 87504
 1-800-678-1508 / (505) 827-6060

Please indicate how you were referred to this office to file this complaint:

[*Por favor indique cómo y quien lo refirió a archivar esta queja en esta oficina:*]

I am filing this complaint to notify the Attorney General's Consumer Protection Division of a dispute with the company referenced below. I understand that the Division cannot serve as a private attorney for individuals and that any legal action taken by the Division would be on behalf of the public and not to represent only my interests.

Archivo esta queja para notificarle a la División de Protección al Consumidor de la Oficina de la Procuradora del Estado de la disputa con el negocio mencionado aquí abajo. Entiendo que la División no puede servir como abogado privado de individuos y que cualquier acción legal que tome sería de parte del público en general y no representando solo mis intereses.

PLEASE TELL US ABOUT YOURSELF

[*Información del consumidor*]

Name _____

[*Nombre del Consumidor*]

Address/Dirección _____

[*Dirección del Consumidor*]

City _____

[*Ciudad, Estado y Zona Postal*]

State _____ Zip _____

COMPLAINT IS AGAINST:

[*Queja en contra de que negocio*]

Business Name _____

[*Nombre del Negocio*]

Address/Dirección _____

[*Dirección del Negocio*]

City _____

[*Ciudad, Estado y Zona Postal*]

State _____ Zip _____

Contact Person _____

[*Dueño o representante del negocio*]

Phones/Teléfonos

Work/ *Trabajo* _____ Home/ *Casa* _____Cell/ *Celular* _____

Telephones _____

[*Teléfonos del negocio*]

1. First contact between you and the business:

[*Primer contacto entre usted y el negocio*]

- Person came to my home
[*Representante vino a mi casa*]
- I went to company's place of business
[*Fui al lugar del negocio*]
- I received a telephone call from business

2. Where did the transaction take place?

[*¿Dónde se llevó a cabo la transacción?*]

- At home/*en casa*
- At business/*en el negocio*
- By mail/*por correo*

[Recibí una llamada por teléfono del negocio]

- I telephoned the business [Llamé por teléfono al negocio] Over the phone/*por teléfono*
- I received information in the mail [Recibí información en el correo] Other/*otro* _____
- I responded to radio/television ad [Respondí a un anuncio de radio o TV]
- I responded to printed advertisement [Respondí a un anuncio por escrito]
- Other/*otro* _____

3. Date(s) of Transaction(s) _____
[Fecha (s) de transacción]

4. Did you sign a contract?
[¿Firmó usted un contrato?]

- Yes - enclose a copy [Si-incluya una copia]
 No

5. Amount of payment [Cantidad y forma de pago]: \$ _____ Cash/*efectivo* Credit Card/*tarjeta de crédito* Loan/*préstamo* Lay-a-way/*apartado*, Check/*cheque*

Date check was cashed (from bank statement): _____
[Fecha en que cambió su cheque: (del estado de cuenta del banco)]

Have you contacted the credit card company to request credit to your account? Yes No
[¿Se ha comunicado con la compañía de la tarjeta de crédito para pedir que le acrediten su cuenta?]

6. Have you complained to the business? Yes No If yes, when _____
[¿Se ha quejado usted con el negocio? Si contestó que sí, cuando?]

What was the business' response? _____
[¿Cual fue la respuesta del negocio?]

7. Have you filed a complaint with another agency? _____ If so, which agency? _____
[¿Ha puesto una queja con otra agencia? Si así es, ¿con cual agencia?]

What action was taken? _____
[¿Se tomó alguna acción?]

Please describe your complaint in detail. (Attach additional sheets if necessary)
[Por favor describa su queja en detalle. (Adjunte hojas adicionales si es necesario)]

What would you consider a fair resolution of this complaint? [*¿Que consideraría una resolución justa?*]

Have you retained an attorney to represent you in this matter? Yes/Sí No
[¿Ha ocupado a un abogado para representarlo en este asunto?]

Has a lawsuit been filed? Yes/Si No
[¿Se ha archivado alguna demanda legal y formal?]

I have read the preceding information and it is true to the best to my knowledge and belief. I understand that a copy of this complaint may be sent to the person or company against whom I am filing this complaint. I understand that if I have knowingly filed false or misleading information, this complaint may be closed by the Attorney General's Office. I further understand that my complaint is a public record and is subject to inspection by members of the public.

[*Yo he leído la información en esta forma y toda la información es cierta según mi conocimiento y creencia. Entiendo que esta copia de esta queja podrá ser enviada a la persona o negocio de la cual me quejo. Entiendo que si archivo información falsa, esta queja será retirada y cerrada por la oficina de la Procuradora General. Entiendo que mi queja es un documento público y que está sujeta a la inspección de cualquier miembro del público.*]

Signature _____
[Firma]

Date _____
[Fecha]

Preferred Language/ Idioma de preferencia English Español Other/Otro

If you are an individual with a disability who needs a reader, amplifier, sign language interpreter, or any other form of auxiliary aid or service to complete this form, please contact the Consumer Protection Division at 1-800-678-1508 or (505) 827-6060 and/or 1-800-597-4327 TTY. This complaint form can be provided in various accessible formats.

[*Si usted es un individuo con alguna incapacidad que requiere alguna forma auxiliar o servicio para completar esta forma, incluyendo lector, amplificador, intérprete de lenguaje de señas, por favor comuníquese con la División de Protección al Consumidor al número gratis de 1-800-678-1508 o al (505) 827-6060 o al 1-800-597-4327 TTY. Esta forma puede ser reproducida y disponible en varios formatos mayores accesibles.*]