Hardy Myers
Attorney General

Portland Area (503) 229-5576
Salem Area (503) 378-4320
Toll Free Area (877) 877-9392
www.doj.state.or.us

OREGON DEPARTMENT OF JUSTICE
CONSUMER COMPLAINT FORM

Please Note the Following:

Under Oregon Law, the Attorney General cannot act as your private attorney or give you legal advice. Deadlines may prevent you from starting a lawsuit if you wait too long. Filing this complaint does not change those deadlines or guarantee the results you want. You may wish to contact a private attorney.

1. Please use dark ink. Type or print clearly.
2. Return this form with copies of important papers.
3. Keep your original papers.
4. Attach any additional explanation.

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ cell phone number _____ e-mail address _____

Name of Business or person about which you are complaining _____

Mailing/Street Address _____

City _____ State _____ Zip _____

Phone _____

Date of Transaction(s): _____ How much money, if any, do you believe you lost? _____

Whom have you contacted concerning your complaint?

☐ Attorney_____ ☐ Business_____ ☐ Other_____

☐ **No Action requested. I just wanted you to know of a questionable practice.**

What type of sale was this transaction? Door-to-Door_____ Telephone_____ Fair/Tent Sale_____

Mail Order_____ Seminar_____ Mailer_____ Retail_____ Internet_____ Other_____

DETAILS OF COMPLAINT

(attach additional pages if necessary)

If your complaint is about a cell phone account, please list the cell phone number here._____

Please be advised that this complaint will become part of our permanent records. Consumer complaints may be released to the business or person about whom you are complaining, members of the public or other agencies attempting to establish ongoing patterns or practices which violate Oregon's Unlawful Trade Practices Act. This form is also subject to Oregon's Public Records Law and may be disclosed to persons who request to review its contents.

Your Signature Date

MAIL YOUR COMPLAINT TO:

04/2005 4 M

Oregon Department of Justice
Financial Fraud/Consumer Protection Section
1162 Court St., N.E.
Salem, OR 97301-4096