DO NOT WRITE IN THIS SPACE	IN THIS SPACE
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CONSUMER PROTECTION / WEIGHTS & MEASURES

50 Sanatorium Road, Building A, 8th Floor Pomona, New York 10970 Phone: (845) 364-3901 Fax: (845) 364-3902

Email: CPLCAL@co.rockland.ny.us

James J. Elcik

Director and Public Advocate

COMPLAINT FORM

PLEASE PRINT OR TYPE ALL ENTRIES ON BOTH SIDES OF THIS FORM MAIL THIS COMPLAINT WITH ALL NECESSARY ATTACHMENT TO ADDRESS ABOVE

Name of Complainant				Name of Vendor/Company			
Address – Number and Street				Address – Number and Street			
City	State	Zip Code		City	State	Zip Code	
Telephone Number				Telephone Number (including Area Code)			
Home	Business			Email Addre	ess		
1.		ct the vendor about y	your comp	laint?	YE:	S □NO	
2.	If yes, date co		1 N1		T '0.		
3. 1		of person contacted			I Itle		
4. 5.	Total amount of contract and/or transaction. \$						
5. 6.	Total amount paid \$ Method of payment Did you receive a written contract? Method of payment YES NO If yes, please attach copy.						
0.	Dia you room	o a willion contract.	ш.			oo anaon copy.	
		YOUR STAT	EMENT O	F COMP	LAINT:		
						_	
						_	
		(Continu	ed on reve	erse side)		
		((Continued	<i>I)</i>			

WHAT ACTION WOULD YOU LIKE THE VENDOR/O	COMPANY TO TAKE TO RESOLVE
YOUR COMPLAINT? Explain:	
Use Additional Sheets it	f Nooccory
Use Additional Sheets it	
Would you be available to appear and testify at a h	earing if one were neid to investigate
this complaint? TYES NO	and to the facility from deal above on the
Please enclose a COPY of any supporting	sent to the facility(vendor) shown on the
documents such as:	front of this form.
1. Proof of payment, i.e. cancelled	Calco atatamanta mada karaba ara
checks, paid receipts	False statements made herein are
2. Contract, estimate or invoice	punishable as a Class "A" Misdemeanor
3. Authorization to perform work	pursuant to section 210.45 of the penal
4. Advertisement / Circular	law.
5. Any correspondence relative to this	
complaint	-
6. Warranty / Guarantee	Signature Date
Check if additional sheets have been attached	

I understand that a copy of this form and any or all enclosed information may be