



Office of the Attorney General

Please return completed consumer contact form to:
Office of Attorney General Pam Bondi
State of Florida
PL-01, The Capitol
Tallahassee, Florida 32399-1050

The contact information **MUST** be provided as we correspond via U.S. mail. Incomplete forms cannot be processed. **PLEASE WRITE LEGIBLY.** Only one business per complaint form.

<u>Person Making Complaint:</u> Miss/Ms. Mrs./Mr. _____ Last Name, First Name, Middle Initial _____ Mailing Address _____ City, County _____ State, Zip Code _____ Home & Business Phone, including Area Code _____ Email Address	<u>Complaint is Against:</u> _____ Name/Firm/Company _____ Mailing Address _____ City, County _____ State, Zip Code _____ Business Phone, including Area Code _____ Business Email or Web Address
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Product or Service involved: _____ Amount Paid: \$ _____

Date of Transaction: _____ I was contacted by: _____ Telephone _____ Mail _____ Other _____

Have you retained an attorney? ☐ Yes ☐ No

Did you sign a contract or other papers, i.e. estimates, invoices, or other supporting documents? ☐ Yes ☐ No

If you filed complaints with any other governmental and/or consumer agencies about this matter, please list those agencies: _____

(ATTACH COPIES. DO NOT SEND ORIGINALS.)

Note:

1. All documents and attachments submitted with this complaint are subject to public inspection pursuant to Chapter 119, Florida Statutes.
2. Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082, s.775.083, or s.837.06 Florida Statutes.

Please indicate if you are over the age of 60. Penalties can be enhanced for victimizing senior citizens. Over 60 ☐ Yes ☐ No

(PLEASE USE OTHER SIDE OF THIS FORM TO DESCRIBE YOUR COMPLAINT & ATTACH YOUR SIGNATURE)

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal grey lines across its entire width, providing a guide for handwriting or typing. The background is a clean, solid white color.

Signature: _____ Date: _____