

RECORD OF COMPLAINT

(AR 608-1)

PRIVACY ACT STATEMENT (5 USC 301). THIS FORM IS USED TO SUPPORT RECORDS OF CONSUMER COMPLAINTS AND MUST BE COMPLETED PRIOR TO ANY ACTION INITIATED. DISCLOSURE OF INFORMATION IS VOLUNTARY; HOWEVER, IF AN INDIVIDUAL CHOOSES NOT TO PROVIDE THE INFORMATION REQUESTED, COMPLAINT MAY NOT BE PROCESSED. ALL BLANKS MUST BE COMPLETED AND RESPONSES MUST BE PRINTED LEGIBLY. FOR FURTHER GUIDANCE ON RELEASABLE INFORMATION, SEE AR 340-21.

CONTROL NUMBER

CLASSIFICATION

CAUSE OF COMPLAINT

COMPLAINT MEDIUM

ANALYST

YOUR NAME		RANK	SSN
SPONSOR'S NAME		RANK	SSN
DUTY SECTION	ASSIGNED UNIT		DUTY PHONE
HOME ADDRESS			HOME PHONE
COMPLAINT FILED AGAINST (BUSINESS OR INDIVIDUAL NAME)			BUSINESS PHONE
ADDRESS			

STATE YOUR COMPLAINT IN BASIC TERMS. (I.E. FAILURE TO RECEIVE REFUND, POOR SERVICE, POOR PRODUCT, ETC.) GO INTO EXTENSIVE DETAILS ON THE REVERSE OF THIS FORM.

OWNER OR MANAGER OF BUSINESS		
HAVE YOU CONTACTED THE OWNER OF MANAGER OF THE BUSINESS? [] YES [] NO	IF YES, DATE	OWNER / MANAGER CONTACTED
WHAT WERE YOU TOLD BY THE PERSON AT THE BUSINESS?		
DID YOU RECEIVE A WRITTEN WARRANTY WITH YOUR PURCHASE OR TRANSACTION? [] YES [] NO	IF YES, PROVIDE A COPY.	EXPIRATION DATE
HAS ANY ADJUSTMENT BEEN OFFERED? [] YES [] NO	IF YES, PLEASE EXPLAIN.	

WHY DID YOU CHOOSE THE FIRM TO CONDUCT THE BUSINESS?		
HAVE YOU WRITTEN THE FIRM / INDIVIDUAL ABOUT YOUR COMPLAINT? [] YES [] NO		IF YES, ATTACH A COPY.

I UNDERSTAND THE CONSUMER AFFAIRS OFFICE IS NOT A JUDGE, NOT A JURY AND DOES NOT HAVE ANY JURISDICTION OVER THE FIRM OR BUSINESS AGAINST WHOM I HAVE FILED MY COMPLAINT.

SIGNATURE	DATE
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STATE YOUR COMPLAINT: (WHAT, WHERE, WHEN AND HOW)
(GIVE THE DETAILS OF YOUR COMPLAINT.)

WHAT ADJUSTMENT WOULD YOU CONSIDER FAIR?
(WHAT DO YOU WANT?)

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

ACTION TAKEN BY ANALYST

DATE / TIME

CONTACTS WITH BUSINESS REPRESENTATIVE AND RESPONSES RECEIVED.