

(Please print or type)

Salesperson or Representative's Name:

SHASTA COUNTY DISTRICT ATTORNEY'S OFFICE CONSUMER PROTECTION UNIT

1355 West Street Redding, CA 96001 Consumer Complaint (530)245-6300 Fax (530)245-6345

I wish to file a complaint against the company or individual below. I understand that the District Attorney's Office is unable to represent private citizens seeking the return of their money or other personal remedies. I am, however, filing the complaint to notify your office of the activities of this company or individual.

Your name:

Address/City/State/Zip:

(Complaint Filed Against)

Name of Company, Firm, or Individual:

Address/City/State/Zip:

Phone Number:

Name of Product or Service:
Was Product or Service Advertised? (Please attach a copy of advertisement)
Where/When:
Was a Contract Signed? (If yes, please attach a copy of the contract)
Would you object to a copy of this complaint being sent to the company or individual involved?
Yes No
Have you filed a complaint with another public agency (i.e. Police Department, Department of Consumer Affairs)?
Yes No Agency
Have you contacted a private attorney? (If yes, whom?)
Yes No Attorney
Are any lawsuits pending in this matter? (If yes, where and when filed?)
Yes No Case Number and Court
Names, addresses and phone numbers of witnesses:
1
2

Please use this page to explain the nature of your complaint. Describe events (who, what, when, where, how and why) in the order in which they occurred, if possible. Use additional sheets if necessary. If you wish to provide any documents (receipts, bills, letters), please provide us a copy and keep your original for your records.	
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How were you referred to the Consumer Protection Unit?
Once this office receives your completed complaint form, it will be logged and reviewed to
determine if action can be taken by this office. Complaints are processed in the order they are
received.
The information contained in this complaint form is true, correct and complete to the best of my knowledge.
Dated:
Signature:
Please attach a copy of any documentation you may have supporting your complaint and mail to:
SHASTA COUNTY DISTRICT ATTORNEY
CONSUMER PROTECTION UNIT
1355 WEST STREET

 $\hbox{$\star$ if this button does not work for you, please save the form, attach $$it$ and send to consumer fraud@co.shasta.ca.us}$

REDDING, CA 96001