State of Rhode Island and Providence Plantations
DEPARTMENT OF ATTORNEY GENERAL
Peter F. Neronha

Consumer Protection Unit
4 Howard Avenue Cranston, RI 02920
Phone: 401-274-4400 TDD 401-453-0410
Fax: 401-732-3895
www.riag.ri.gov

Complaints are addressed in the order they are received. Once your complaint is assigned, the Investigator will contact you. If the complaint falls within the jurisdiction of another local state or federal agency, you will be provided with appropriate referral information.

Mail completed form and any supporting documents to the address above.

Section 1:	Your Information

Name: _____

Address:_____

City:_____ State:_____   Zip:_____

Daytime Phone:_____   Email Address:_____

Over age 60:   Y/N   Military/Veteran: Y/N

Section 2:	Complaint Against

Business Name:_____

Business
Address:_____

City:_____ State:_____   Zip:_____

Business Phone:_____   Business mail/Website:_____

Name and Title of Contact Person: _____

Section 3:	About the Transaction

Product/service involved:_____

Date of transaction: _____   Amount Paid: $_____Payment Type:_____

Did you sign a contract? _____   Warranty:_____

Section 4:	Actions Taken by the Consumer

Have you contacted the business about your complaint? If yes, what was their response?_____

_____

Have you filed a complaint with any other agency? If yes, list other agency and outcome if known:_____

_____

Have you hired a private attorney?   Y/N

Section 5:	Complaint Details - *attach additional pages if necessary*

Please remember to attach a copy of all documentation involved (contract or written agreement, receipt, statement, invoice, warranty, correspondence etc). Please print clearly or type. DO NOT include your Social Security Number.

_____

_____

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_____

_____

May we send a copy of this to the business you are complaining against?   Y/N
(If your response is no, we may be prevented from taking any action on your complaint.)

The undersigned swears to, or affirms the truth and accuracy of all statements, answers, representation and allegations contained herein, including all statements hereto attached.

Signature_____Date_____