Measurement Standards Division 635 Capitol Street NE Salem OR 97301-2532 http://oregon.gov/ODA/MSD

## Oregon Department of Agriculture CONSUMER COMPLAINT FORM

Telephone: (503) 986-4670 Fax: (503) 986-4784 msd-info@oda.state.or.us

COMPLAINANT INFORMATION		
Name		Daytime phone
Representing		Other phone
Mailing address		Email
City, State, Zip		_
COMPLAINT AGAINST		
Name		Firm number
Location address		License number
City, State, Zip		Phone number
(If necessary, continue on reverse or attack		
Please be advised that this complair subject to Oregon's Public Records L its contents. As such, it may be relea complaining, members of the public,  Your signature	aw and may be disclosed sed to the business or pe	erson about whom you are ested.
OFFICE USE ONLY		Rev 7/07
Date sent to inspector:	Inspector code:	Date complaint form mailed: