



COMPLAINT FORM

Use this form to submit a complaint about a particular company or organization to the Division of Finance & Corporate Securities (DFCS). Please provide enough information to allow us to refer, respond to, or investigate your complaint. To learn how we use the information you provide, please read our privacy policy at <http://www.cbs.state.or.us/privacypolicy.htm>. DFCS does not resolve individual consumer problems; however, your complaint helps us investigate fraud and can lead to law enforcement action.

If you have questions, please call (503) 378-4140.

How do we reach you?

Name: _____

Street address: _____

City: _____ State: _____ ZIP: _____

Mailing address, if different: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

Best time for us to call you: _____ E-mail: _____

Your complaint ...

Subject of your complaint:

- Bank Check cashing business Consumer finance company Credit service organization
 Credit union
- Debt consolidating agency Endowment care cemetery Money transmitter
- Mortgage lender Pawnbroker Payday or title lender
- Prearranged funeral plan Securities, broker dealer Franchise
- Securities, investment adviser Securities, registration
- Other: _____

Name of company about which you have a complaint: _____

Street address: _____

City: _____ State: _____ ZIP: _____

Mailing address, if different: _____

City: _____ State: _____ ZIP: _____

Company's Web address: _____ Phone: _____

Representative or salesperson's name: _____

Date on which company contacted you (month/day/year): _____

Describe your complaint briefly: _____

The Division of Finance and Corporate Securities has no authority to resolve disputes in litigation. Have you consulted an attorney regarding this complaint? If so, please briefly provide details:

What would be a satisfactory resolution of your complaint? _____

