Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Trade and Consumer Protection

UNFAIR SALES ACT COMPLAINT QUESTIONNAIRE FOR MOTOR VEHICLE FUEL

Mail To: Kevin LeRoy

DATCP

Trade Practices Section Phone (608) 224-4925 PO Box 8911 FAX (608) 224-4937

Madison, WI 53708-8911



THIS COMPLAINT MUST INCLUDE AN ADVERTISEMENT, RECEIPTED PURCHASE, A COPY OF A COUPON OR COPIES OF PRICE SURVEYS.

YOUR NAME	YOUR BUSINES	YOUR BUSINESS NAME				
ADDDECC	CITY		CTATE	710	DUONE	
ADDRESS	CITY		STATE	ZIP	PHONE	
BUSINESS NAME OF ALLEGED VIOLATOR				COUNTY		
ADDDECC	CITY		CTATE	710	DUONE	
ADDRESS	CITY		STATE	ZIP	PHONE	
NEAREST TERMINAL			FREIGHT F	TROM THE NEA	AREST TERMINAL	
			DATE (O) OFFEDER			
PRODUCT	ADVERTISED PRICE			DATE(S) OFFERED		
IF POSSIBLE - NAME(S) AND ADDRESS(ES) OF OTHER BUSINESSES AT THE PRICE IN QUESTION AND APPROXIMATE TIME PRICE BEGAN PLEASE ATTACH A SURVEY						
ANY ADDITIONAL INFORMATION:						
The information you provide may be used be shared with the party complained a collected during the investigation of this. The information I have given is true, accurate, and complete the	gainst, upon request s complaint may be r agency action i	. Under Wi eviewed up s completed	sconsin's (on reques	Open Record	s Law, documentation	
SIGNATURE	ompiete to the best of my	knowieage		DATE		