Complete and return this form to:

COUNTY OF LOS ANGELES
INTERNAL SERVICES DEPARTMENT
PURCHASING DIVISION
1100 N. Eastern Avenue, Room G115
Los Angeles, California 90063
Attn: Robert Ortiz
(323) 267-2276 (323) 415-8663 fax

COMPLAINT FORM

Vehicle Purchasing Services Program

Instructions: Fill out both sides. Type or use black/blue ink. Attach copies, not original documents, that support your case, such as contracts, receipts, canceled checks, letters, and legal documents.

MY CONTACT INFORMATION	DEALERSHIP I'M COMPLAINING ABOUT
Name	Name of Dealership
Address	Saleperson or Representative:
City State Zip Code	Address
Daytime Phone Fax Number	City State Zip Code
E-mail	Telephone

Type of Program Participant:

☐ County Employee ☐ County Retiree ☐ Family Member ☐ County contractor/sub-contractor

PURCHASE / LEASE INFORMATION

1. Purchase/Lease Date:	2. Product Purchased/Leased ☐ Vehicle *Year:* _____ *Make:* _____ *Model:* _____ ☐ Purchase ☐ Lease ☐ Service Agreement ☐ After-Market accessory ☐ Other: _____
3. Price Paid:	

4. Did you sign a contract or other papers? *If yes, please attach a copy.* ☐ Yes ☐ No

5. Have you contacted the dealership regarding this complaint? ☐ Yes ☐ No

6. Who do you make payments to?

7.Other agencies you have filed complaint with:

8. Have you hired an attorney? ☐ Yes ☐ No

9. Does this complaint involve a lawsuit or a Small Claims Court action? ☐ Yes ☐ No

DESCRIPTION OF YOUR COMPLAINT
Print or Type

Please describe the facts of your complaint. Include names and dates. Use additional pages if necessary.

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What is a fair and reasonable settlement?

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READ THE FOLLOWING BEFORE SIGNING BELOW:

I certify that the above information is true.

I understand that a copy of this form will be sent to the dealership against which I have filed this complaint.

I understand that this page of the complaint is a public document and is available for inspection by the public and media.

My initials here (_____) indicate my expressed permission for the business to disclose personal information relevant to this case to representatives of the County of Los Angeles.

_____ _____
Signature Date

Attach copies (not originals) of any documents.
Include a copy of this completed form.