

Office of the District Attorney 18th Judicial District 525 N. Main, Ste 235, Wichita, Kansas 67203

(316)660-3653 or consumer@sedgwick.gov

CONSUMER COMPLAINT FORM

MUST BE FILLED OUT IN FULL WITH SUPPORTING DOCUMENTATION ATTACHED							
INFORMATION ABOUT (YOU) CONSUMER			COMPANY YOUR COMPLAINT IS AGAINST				
Full name:			Company name:				
Street address:			Street address:				
City, State, Zip:			City, State, Zip:				
Phone:			Phone:				
Email:			Contact Person(s):				
Choose all that apply: I am a(n):		TYPE OF COMPANY: CHOOSE ALL THAT APPLY Automobile: Sales Advertising Repair					
INFORMATION ABOUT THE TRANSACTION				☐ New	Used	Lease	
Location:			Construction:	☐ Roofing ☐ Plumbing	☐ Concrete ☐ Landscape	☐ Electric ☐ HVAC	
Amount Paid: \$ Cash			☐ Collections/Credit Reporting ☐ Goods ☐ Door to Door Sales ☐ Services ☐ Billing ☐ Utilities				
Goods/Service Bought:			Other:				
Did you sign a contract? Yes No							
Have you contacted the company: Yes No							
What outcome are you seeking: Refund \$ Delivery Service Other							
HAVE YOU?							
Contact another agency? Which agency?		Retained an attorney? Provide name/address.		Is there per legal acc regarding matter, (i.e. claims, ci crimin	tion g this small vil, or		

DESCRIBE THE TRANSACTION SUCCINCTLY IN CHRONOLOGICAL ORDER (IF YOU HAVE NOT CONTACTED THE COMPANY, EXPLAIN WHY)
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ARE YOU AWARE OF ANYONE ELSE WHO HAS HAD A SIMILAR EXPERIENCE WITH THIS
COMPANY?
DOCUMENTATION OF THE TRANSACTION
Please provide copies of all documents relevant to this complaint, including advertising material, contracts, warranty
information, receipts, letters, checks (front and back), photographs, etc. Failure to provide all relevant documents will
cause unnecessary delay in the handling of your complaint.
VERIFICATION
In filing the complaint, I understand and agree that the employees of the District Attorney's Office are not my private
attorneys, but instead represent Sedgwick County in enforcing laws designed to protect the public from deceptive and
unconscionable business acts and practices. I understand that Kansas law limits the period of time during which I may
file any private legal action(s). I have been advised to contact a private attorney if I have any questions concerning
those time limitations and my legal rights with regards to any private action(s). I further understand and agree that the
contents of this complaint may be forwarded to the business or person the complaint is design directed against or to
other appropriate agencies. I declare and verify that all the foregoing is true and accurate to the best of my knowledge.
Vana Cianatana (Daminal)
Your Signature (Required) Date: