Tobacco and Electronic Smoking Device Complaint Form

Office of the Attorney General
Tobacco Enforcement
One Ashburton Place
Boston, MA 02108 -1518

Your Contact Information:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Ext: _____

Email: _____

Are you filing the complaint as a a business or an individual? ☐ Business ☐ Individual

Complaint Against

Type of Complaint:

☐ Advertisement ☐ Billboard ☐ Gifts to Minors ☐ Sampling ☐ Self-Service ☐ Selling to Minors ☐ Sponsorship

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Information on your complaint:

On the next page, please include the date(s) and explanation(s) for your complaint. Please attach photographs, if any. You may attach additional pages if needed.

This form should be used to report suspected violations of the Massachusetts tobacco control laws, the Attorney General's Regulations regarding Sales and Distribution of Cigarettes, Smokeless Tobacco, and Electronic Smoking Devices in Massachusetts, the Attorney General's Regulations regarding the Sales and Distribution of Cigars in Massachusetts, and the Master Settlement Agreement (e.g., billboard advertising, self-service displays).

Your complaint may be forwarded to another agency, if appropriate. This Office does not comment upon investigations that may be pending.

Instructions:

DO NOT SEND ORIGINALS. Your documents will NOT be returned to you. Please retain a copy for your records and send us photocopies or an electronic scan of any documentation you think may be helpful in resolving the complaint.

Please do NOT include financial account numbers, credit or debit card numbers, your social security number, etc., or other sensitive personal information. We will contact you if we need any of this information.

Read the Following Before Signing Below:

I. **Disclosure of Your Complaint.**
Public Record. Under most circumstances, your complaint and any related information will be considered a public record and available to any member of the public upon request.

Disclosure to Other Entities.
Your complaint and any related information may be disclosed to other law enforcement and regulatory agencies, including one of the Local Consumer Programs in your area.

II. **Consulting With a Private Attorney.**
The AGO cannot give you legal advice and is not able to be your private attorney, but represents the public interest. If you have any questions concerning your individual legal rights or responsibilities you should contact a private attorney.

Signed: _____ **Date:** _____