

Arkansas Motor Vehicle Commission
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Little Rock, AR 72201
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Website: www.amvc.arkansas.gov E-Mail: amvc@arkansas.gov



ARKANSAS MOTOR VEHICLE COMMISSION ADVERTISING COMPLAINT FORM

FORM NEEDS TO BE COMPLETED ONLINE AND SUBMIT A COPY OF ANY SUPPORTING DOCUMENTATION.

If you wish to file this complaint anonymously, leave this section blank.

Your Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Home Phone: _____ Work Phone: _____

Company your complaint is against: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone No: _____

Name and title of person with whom you dealt: _____

Where did you see/hear the ad? Please choose and specify.

TV Radio Billboard Cinema Newspaper Magazine other: _____

Please specify date, time, program, edition, etc.

Name of advertiser: _____

which product or service was being advertised?

Below, briefly state the facts of your complaint (if necessary, use additional paper). Please attach copies of any documents involved (order blanks, warranties, credit card receipts or statements, contracts, advertisements, canceled checks, etc.). The information you provide will be used in our effort to resolve your problem and may be shared with the party against who you have complained. It may also be used to enforce applicable state laws. Under the Arkansas Freedom of Information Act, this Complaint will be available for public view upon request. Certain personal information such as account numbers are not subject to the Freedom of Information Act.