



OFFICE OF THE ATTORNEY GENERAL
DEPARTMENT OF LEGAL AFFAIRS
AMERICAN SAMOA GOVERNMENT

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HON. PULAALI'I NIKOLAO PULA
GOVERNOR

GWEN TAUILILI-LANGKILDE
ATTORNEY GENERAL
CONSUMER PROTECTION BUREAU DIRECTOR

HON. PULUMATAALA AE AE JR.
LT. GOVERNOR

JANELLE F.B. ETELAGI
CONSUMER PROTECTION BUREAU MANAGER

CONSUMER COMPLAINT

NOTICE: ASG/OAG does not legally represent you.
(FA'AALIGA: E lē avea le Mālō po o le Ofisa o le Lōia Sili ma ou lōia.)

INSTRUCTIONS: The information that you provide will assist us in evaluating your complaint and give the company/business you are submitting your complaint against notice of the facts alleged. Please answer the questions in English as thoroughly as possible. If you are not comfortable answering in English, we will have someone from our office to assist you. Upon filling out this form, please attach copies of all agreements, contracts, letters/correspondence, and receipts relating to your complaint.

(FA'ATONUGA: O fa'amatalaga e te tu'uina mai e fesoasoani i le iloiloaina o lau matāupu ma o le a logoina fo'i le kamupanī/pisinisi o lo o fa'asaga i ai le matāupu e uiga i mea moni o lo o tu'u'aia. Fa'amolemole tali fesili uma i le Gagana Fa'aperetania. Afai e mana'omia le fesoasoani i le Gagana Samoa, o le a fa'atulagaina se tasi o le matou ofisa mo se fesoasoani. A mae'a ona fa'atumuina lenei pepa, fa'amolemole ia tu'uina mai ma kopi o ni maliliega tusitusia, konekarate, tusi/feutana'iga, ma lisiti e ono a'afia ai lou matāupu.)

Whether or not we agree to take your case, we will contact you. If we agree to take your case, we will investigate your complaint and contact the company/business. If we need additional information, we will contact you. If you resolve this matter, please contact us so that we can close our file.

(E logo atu e le matou ofisa pe talia pe lē talia lau matāupu. Afai e talia lau matāupu, e faia le matou su'esu'ga ma fa'afeso'ota'i le kamupanī/pisinisi. Afai e mana'omia nisi fa'amatalaga fa'aopoopo, matou te feso'ota'i atu lau susuga. Afai ua fō'ia lenei matāupu, fa'amolemole fa'afeso'ota'i mai matou ina ia mafai ai ona tapunia la matou faila.)

The Consumer Protection Bureau thanks you for the opportunity to serve you.

(E momoli atu le fa'afetai a le Ofisa o le Puipuiga o Tagata Fa'atau mo le avanoa e fesoasaoani atu ai i lenei matāupu.)

*Consumer Protection Bureau
Office of the Attorney General
Department of Legal Affairs*

Contact Information
(Fa'amatalaga mo Feso'ota'iga)

First & Last Name (*Suafa Atoa*): _____

Village & Mailing Address (*Nu'u & Tuātusi/Pusa Meli*): _____

Home Telephone (*Telefoni i le Fale*): _____

Cell Phone (*Telefoni feavea'i*): _____

Work Phone (*Telefoni Faigaluega*): _____

Complaint Information
(Fa'amatalaga mo le Matāupu)

Name of person or business that you are complaining against
(*Suafa o lē ona le Pisinisi / Igoa o le Pisinisi e fa'asaga i ai le Matāupu*): _____

Village & Mailing Address of Business (*Nu'u & Tuātusi/Pusa Meli o le Pisinisi*): _____

Main Telephone (*Telefoni*): _____

Cell Phone (*Telefoni feavea'i*): _____

Date of Transaction (*Aso o le Fefa'ataua'iga*): _____

I. General Description of Transaction (*Fa'amatalaga o Fefa'ataua'iga*):

Name & Position of the person with whom you dealt (*Suafa ma le Tulaga o lē sa e feagai ai*):

II. Please provide a detailed explanation of your complaint (*Fa'amolemole tu'uina mai se fa'amatalaga atoatoa ma auili'ili e fa'amatalaina ai lau matāupu*):

III. Did you sign a contract (*Na e sainia se konekarate po o se maliliega tusitusia*)?

YES (*Ioe*) or NO (*Leai*)

IV. Have you contacted the company/business about your complaint (*Ua e fa'afes'ota'iina le kamupani/pisinisi e uiga i lau matāupu*)? YES (*Ioe*) or NO (*Leai*)

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If so, what was the company/business's response (*Afai ioe, o le a le tali mai le kamupanī/pisinisi*)?

V. Itemize the approximate monetary value of the losses caused by the company/business (*Lisi mai le tau fa'atatau o tupe sa fa'aaogaina ona o le kamupanī/pisinisi*):

VI. If you have consulted with a private attorney regarding this matter, please provide his/her name (*Afai ua e fa'afeso'ota'iina se lōia tuma'oti e uiga i lau matāupu, fa'amolemole fa'ailoa mai lona suafa*):

OFFICE USE ONLY

Received By: _____

Date Received: _____

File No: _____