COMPLAINT REPORT
Concerning Relocator Practices

TO: Illinois Commerce Commission Police
9511 W. Harrison Street
Des Plaines, Illinois 60016
(847) 294-4326

File No. _____
For office use only

YOU MUST SUBMIT A CLEAR COPY OF THE RELOCATOR INVOICE

Name of Complainant:_____

Address of Complainant:_____

City:_____ State:_____ Zip Code:_____

Telephone:_____ Work Telephone: _____

Email Address: _____

Name of Relocation Towing Company:_____

I, _____, the undersigned complainant, do hereby report and complain of illegal practices against the above Relocator on the basis of the following facts:

1. Date of Tow:_____
2. Address of alleged violation:_____
3. Provide a brief summary of the alleged illegal practices:

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Signature:_____ Date:_____