



SHASTA COUNTY

DEPARTMENT OF AGRICULTURE/WEIGHTS & MEASURES

PAUL KJOS

Agricultural Commissioner
Sealer of Weights & Measures

3179 Bechelli Lane, Suite 210, Redding, CA 96002

California Relay Service: 711 or 800-735-2922

Voice: 530-224-4949 • Fax: 530-224-4951

STORE SCANNER COMPLAINTS

Please complete the following form.

**You may use the "Submit by E-mail" button,
or click the "Print" button and deliver the form to our
office by mail, by fax, or in person.**

Note: If you plan on submitting this form using the submit by e-mail button, and you will be submitting this using a web based e-mail provider such as Gmail, Yahoo, or any other provider, this form will first save as a pdf to your desktop where you will then attach it to your e-mail. If you have a desktop e-mail provider such as Outlook, then this file should automatically attach to a new e-mail. Depending on what type of adobe reader is installed on your computer will determine whether or not you will be able to save the text fields that you have filled out. The submit by e-mail feature will only work with Internet Explorer. Internet browsers such as Google Chrome and Firefox no longer support Adobe Plugins, therefore the pdf functions will not operate. If it will not attach to an e-mail, you can either print and mail, print and fax, or print and take a picture and then attach the picture to an e-mail or simply call the office at 224-4949 and give us the information above. If you have any questions or you continue to have issues with this form, e-mail jingram@co.shasta.ca.us.



SHASTA COUNTY

DEPARTMENT OF AGRICULTURE/WEIGHTS & MEASURES

PAUL KJOS

Agricultural Commissioner
Sealer of Weights & Measures

3179 Bechelli Lane, Suite 210, Redding, CA 96002

California Relay Service: 711 or 800-735-2922

Voice: 530-224-4949 • Fax: 530-224-4951

STORE SCANNER COMPLAINT FORM

Your Name:

Your Mailing Address:

Your E-Mail Address:

Your Daytime Phone:

Alternate Phone:

Date and Time of Occurrence:

(The date you shopped at the store.)

Name of Store / Dealer:

Store / Dealer Address:

On What Item Were You Overcharged?:

Do You Have A Printed Receipt? Yes No

(The product, brand, & package size.)

What Was The Shelf Price?:

What Was The Price At The Register?:

Was This A Sale Item? Yes No

How Was It Advertised? Store Flyer Newspaper Radio Other

Was The Incident Reported To The Business? Yes No

Name of Person Reported To:

Brief Description of Person:

Summary of Complaint:

Would You Like Us To Contact You With The Results?

Mail

E-Mail

Phone