Illinois Department of Agriculture

Submit by email

Bureau of Weights and Measures P.O. Box 19281 Springfield, IL 62794-9281 AGR.WMComplaints@illinois.gov

COMPLAINT INFORMATION

Name of Business:

_____

Complete Address: (Street ,City & Zip Code)

_____

Pump #:_____

Octane/Grade of Gas:

_____

Complaint Problem:

_____

_____

_____

_____

_____

_____

The following information is Optional:

Name: _____

Address:

_____

Daytime Phone: _____

Email: _____

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