Canine Cruelty Complaint Form

Missouri Attorney General
Josh Hawley

ago.mo.gov
800-392-8222

If you would like to file a canine cruelty complaint, please complete and mail this form to:
Missouri Attorney General's Office • Agriculture & Environmental Division • P.O. Box 899 • Jefferson City, MO 65102

Your Information

YOUR NAME _____ First _____ Last _____ Mi

ADDRESS _____ Street _____ City _____ State _____ Zip _____ County

E-MAIL _____

PRIMARY PHONE NO. ( ) -

SECONDARY PHONE NO. ( ) -

Information About Complaint

MY COMPLAINT IS AGAINST _____

ADDRESS _____ Street _____ City _____ State _____ Zip _____ County

BUSINESS PHONE NO. ( ) -

E-MAIL _____ WEBSITE _____

PERSON YOU DEALT WITH _____ Name _____ Title

BRIEFLY DESCRIBE YOUR COMPLAINT You may attach a separate sheet of paper if you need more space. _____

WHAT ACTION HAVE YOU TAKEN TO RESOLVE THIS COMPLAINT?

- ☐ No action taken
- ☐ Sent email to company
- ☐ Sent letter to company
- ☐ Filed a lawsuit
- ☐ Contacted a private attorney
- ☐ Filed a complaint with another agency
- ☐ Other (please explain) _____

Canine Cruelty Complaint Form

Missouri Attorney General
Josh Hawley

ago.mo.gov
800-392-8222

Information About Complaint

HOW DO YOU WANT THIS COMPLAINT RESOLVED? ☐ Refund ☐ Deliver pet ☐ Replace/Trade

☐ Other (please explain) _____

Information About Pet Purchase

DID YOU PURCHASE A PET FROM THIS PERSON? ○ Yes ○ No

DATE OF TRANSACTION/PURCHASE ☐☐/☐☐/2 0☐☐ (MM / DD/ YYYY) AMOUNT PAID $ _____

HOW & WHERE DID YOU LEARN ABOUT THIS PERSON? _____

_____

WHAT CONDITION WAS YOUR PET IN WHEN YOU RECEIVED IT? _____

_____

Information About Payment

PAYMENT METHOD ☐ Cash ☐ Credit Card ☐ Debit Card ☐ Loan ☐ Check ☐ Other

DID YOU SIGN A CONTRACT, WARRANT AGREEMENT, OR SIMILAR PAPERS? ○ Yes ○ No

DID YOU RECEIVE A HEALTH CERTIFICATE, VETERINARIAN RECORD, BIRTH RECORD, OR OTHER DOCUMENTATION WITH YOUR PET? ○ Yes ○ No

WERE YOU PROMISED ANY DOCUMENTATION? ○ Yes ○ No

DO YOU HAVE ANY PHOTOGRAPHS OF YOUR PET OR THE KENNEL WHERE YOU PURCHASED IT? PLEASE ATTACH. ○ Yes ○ No

Your Verification

BY FILING THIS COMPLAINT, I UNDERSTAND THAT:

In accordance with Missouri law, complaints are “public records,” subject to public disclosure upon request. My complaint, including my name, address and related documents, may be provided pursuant to a Sunshine Law request. The Attorney General’s Office will work cooperatively with the DNR to review and assess complaints filed with the state.

I ATTEST TO THE ACCURACY OF STATEMENTS MADE IN THIS COMPLAINT:

YOUR SIGNATURE _____ DATE ☐☐/☐☐/2 0☐☐ (MM / DD/ YYYY)