

Consumer Protection Office 614-466-1305

30 E. Broad Street, 14th Floor Columbus, Ohio 43215 www.OhioAttorneyGeneral.gov

Office Use Only:

Complaint #:

Consumer Complaint Form

The Ohio Attorney General's Consumer Protection Section provides a complaint resolution process to resolve disputes between consumers and businesses. If you have a complaint regarding a consumer transaction, you may file a complaint with our office.

Email your complaint form to: Erin Hall – erin.hall@ohioattorneygeneral.gov

You may also mail your complaint form to the address listed above.

Information about You (the Consumer):

Parent's Name:		
Address:		
City:	State:	_ Zip Code:
Preferred Phone Number: ()		
Preferred Email Address: ()		
School:		

Subject of the Complaint (Business Information):

Discovery Tours, Inc. 6501 Wilson Mills Road, Suite B1 Mayfield Village, Ohio 44143

Phone: (800) 590-2669 / (216) 531-8884

Fax: (800) 531-8885

Email: info@tourwithdiscovery.com

About the Transaction:

Product/Service Involved: Tr	ravel compai	ny for school trip (hotel/transportation/tours/food bills)
Date of purchase:/	_/(mm/dd/yyyy)
Did you sign a contract?	Yes N	0
Have you paid in full?	Yes N	lo
Are you making payments?	Yes N	lo
Amount paid: \$	Me	thod of payment:
receipt). Any information y	ou submit is Remove So	nd proof of payment (i.e., cancelled check, credit card considered public record and may be released as part cial Security numbers, credit card numbers, debit card pers.
Describe the transaction and	d your comp	aint:
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Acknowledgem	nent of	Terms and Conditions:
of my knowledge and belief. General's Office is considere request. I understand a copy	. I understaned public info of this form	dge that the information given above is true to the best d that any information I submit to the Ohio Attorney ormation and may be released in a public records a and all documents relating to my complaint will be and that the Ohio Attorney General cannot serve as my
Date submitted:/	<i></i> (mm/dd/yyyy)