



ADVERTISING STANDARDS AUTHORITY MALAYSIA

COMPLAINT FORM

NAME OF COMPLAINANT ADVERTISER / AGENCY

ADDRESS _____

TEL _____, FAX _____, EMAIL _____

SUBJECT MATTER _____

COMPLAINT * [state briefly and concisely]

[Kindly attach substantiation]

SIGNATURE

NAME OF SIGNATORY

DESIGNATION

DATE

P.S.:- * PLEASE USE ADDITIONAL SHEETS IF SPACE IS INSUFFICIENT