

Product: TV

Approved by OMB 3060-0874 (Estimated average burden per person is 15 minutes.)

Email address

Subject

TV issue

Availability

Billing

Equipment

Set top boxes

Cable cards

Other (use description field)

Indecency

Interference

From CB

From amateur radio

Other (use description field)

Loud commercials

OI/Net Neutrality

Blocking

Data caps

Speed

Throttling

Inaccurate disclosures/Transparency

Other (use description field)

Programming

TV method

Cable

Satellite

Fiber

Over the air

Time of your issue/problem

Date of your issue/problem

TV channel

Name of the commercial's advertiser/sponsor and/or product involved

Network

Name of TV program

Did you watch the commercial on a local broadcast television station?

City where program was viewed/heard

State where the program was viewed/heard

Company name

Account number

First name

Last name

Address

City

State

Zip code

Phone (where you can be contacted)

Filing on behalf of someone

If yes, your relationship (on behalf of)

First name (on behalf of)

Last name (on behalf of)

Company name (on behalf of)

Address (on behalf of)

City (on behalf of)

State (on behalf of)

Zip code (on behalf of)

Description of complaint

Can the FCC share your description of your complaint with the public on our website? y/n

Attachments