

Walgreens Privacy Office, 200 Wilmot Road, MS 9000, Deerfield, Illinois 60015 Phone: (847) 236-6518 Fax: (847) 236-0862

## **COMPLAINT FORM**

## Procedure

To file a privacy complaint with Walgreens or one of its subsidiaries, please complete and submit this form electronically or mail a copy of this form to the Privacy Office at the address listed below.

## **Information Required**

We take privacy and the resolution of your complaints seriously. As part of our privacy practices, there will be no retaliation for filing a complaint. In order to fully investigate this matter, please complete the following areas by providing specific details as they pertain to your complaint:

Date:				Time:
Location:		Store:	Store Address: City, State, Zip:	
		Mail Order	(select one):	Orlando, Florida / Tempe, Arizona / Portland, Oregon
		Internet	(select one):	www.walgreens.com / www.walgreenshealth.com
		Other:	(please specify)	
Name of Emplo	yee I	nvolved (if ki	nown):	
Information:				
<ul> <li>I request additional communications from Walgreens regarding the resolution of this issue.</li> <li>I do not request additional communications from Walgreens regarding the resolution of this issue.</li> </ul>				
Your Name:				
Street Address:				
City, State, Zip:				
Day Telephone:		()		E-mail Address:
Evening Teleph	one:	()		
Your Signature	e			
Signature:				Date: