



Viewer Complaint Form

PERSONAL INFORMATION

Title: Mr/Mrs/Ms/Miss/Dr/other:

First Name:

Surname:

House/Unit/Villa Number:

Street:

Suburb/Town:

State:

Postcode:

Email address:

YOUR COMPLAINT

Location/Region:

Program title or advertiser/product:

Date & Time of broadcast:

Complaint issue:

Code provision (if known):

COMPLAINT SUMMARY

--

Please sign above

Date

Postal Address:
WIN Corporation Pty Limited
Attention: Shirley Brown
Manager, Regulatory & Network Affairs
Locked Bag 8800, Wollongong NSW 2500 AUSTRALIA

Email:
complaints@wincorp.com.au

Privacy Note: The information in your complaint, including your name and address, will be disclosed to relevant staff of the broadcaster concerned during the course of investigating your complaint.

IMPORTANT: If you do not include your name and address details the broadcaster will not be able to respond to your complaint.