



Alabama State Board of Podiatry
2777 Zelda Rd
Montgomery, AL 36106
Phone: 334/420-7205 Fax: 334/263-6115
www.podiatryboard.alabama.gov

CONSUMER COMPLAINT FORM

Name of Podiatrist

Your Name

Address

Your Address

City State Zip

City State Zip

Telephone

Telephone (Home) (Work)

Date of Rendered Services or Visit

How did you learn about the complainant?

Please explain the entire circumstances surrounding your complaint including your attempts to solve the problem (if more space is needed continue on the reverse side):

Signature

Date