



**ALL THE INFORMATION IN THIS FORM IS CONFIDENTIAL  
AND WILL NOT BE SHARED WITH FACTORY MANAGEMENT**

**FAIR LABOR ASSOCIATION (FLA) THIRD PARTY COMPLAINT FORM**

**This form is to register a complaint with the FLA, whether it be a labor problem or a Code of Conduct violation in a factory.** For all questions, please provide as much information and details as possible. It is not necessary to complete every section. Feel free to attach any supporting information about the issue in the factory.

**1. Today's Date** \_\_\_\_\_

**2. Factory Information:**

Factory Name \_\_\_\_\_

Factory Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Factory Telephone Number \_\_\_\_\_

**3. Factory Location:**

City/Town \_\_\_\_\_

State/Province \_\_\_\_\_

Country \_\_\_\_\_

**4. Personal Information:**

Name \_\_\_\_\_

Organization Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address (if available)

\_\_\_\_\_

Check this box if you would like this complaint to remain confidential.

**5. Explain the labor problem or Code of Conduct violation that happened in the mentioned factory, with as much detail as possible.** Feel free to attach any additional information.

**6. When did this problem occur?** Please provide dates or periods of time, if possible.

**7. Have you reported this issue to the factory, a buyer, the local labor authority, a union, an NGO, or another organization? If so, what was the result?**

**8. [Optional]**

**Witness Information:**

**Is there another person who was present for, experienced, or knows of the labor problem outlined in this form that the FLA could contact? If so, please provide their name, phone number, and any other available contact information.**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address (if available) \_\_\_\_\_

**9. Additional comments or recommendations:**

10. Signature \_\_\_\_\_

11. Name (in print) \_\_\_\_\_

12. Date \_\_\_\_\_

**Where should I send this form?**

You can send claims to the FLA via mail, phone, fax, email, or through our website. Please send to the attention of:

Eric Biel  
Senior Advisor  
[TPC@fairlabor.org](mailto:TPC@fairlabor.org)

Fair Labor Association  
2033 K Street NW, Suite 400  
Washington, DC 20006  
Tel. +1-202-898-1000  
Fax. +1-202-898-9050  
[www.fairlabor.org](http://www.fairlabor.org)

**FOR FLA USE ONLY:**

Complaint received by:

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Comments:

F