



**VENDOR CONCERN
FORM**

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*PFM Vendors who have concerns about market operations, vendor policies, or other vendors' compliance with market rules should submit this Concern Form. PFM will not reveal the inquiring vendor's name to anyone. **Please submit this form directly to Market Management on the market day or within a week of the market during which the alleged violation occurred.***

Date _____

Vendor Business Name _____

Your Name _____

Contact Information (phone number, email or mailing address)

Your Concern. Please use your Vendor Handbook to reference the rule number or policy with which you have a concern. If this is a complaint regarding a Vendor, specify Vendor's name.

Market date and approximate time at which the violation occurred (if any):

Please state the specifics of the violation of the rule. Provide any evidence that supports your concern.

Signed

Date

For Market Use Only:	Notes:
Date Rec'd _____	
By _____	