Health Claim Complaint Form

Please complete the following details. It is important to provide all information requested.

*Date	12 August 2006

Section 1: Complainant information

Please note that the complaint can be made anonymously, but if you can not be contacted for further information if necessary, the complaint may not be able to be investigated.

Name	Mr/~~Ms/Mrs/Miss~~	Last name Smith	First name John
Company name (if relevant)	N/A		
Address	44 Valley Way		
	Suburb Hillview	State VIC	Postcode u3212
Telephone	Home 08 8432 ----	Work 08 8102 ----	Mobile 0412 --- ---

Section 2: Complaint details

*Specific claim being made	"The Juicy Tangy Pops relieve allergy symptoms and aid weight loss."
*Provide some reasons why you think the claim does not comply	I don't know how consuming the Juicy Tangy Pops would help me lose weight, as they seem to
	Be high in sugar and there is no information on the package of how the pops would help my
	Allergies. The claims are misleading to me and I don't think that they should be allowed on this product.

Section 3: Product information

*Product name Juicy Tangy Pop

*Type of product Ice confection

*Location of health claim: ☒ Product label (go to section 4) ❒ Advertisement (go to section 5)

Section 4: Product labelling

Brand/company name Cando Foods		
Company address 100 Mountain Drive	*State VIC	Postcode 3212
Place of purchase (including state) Market Garden Shops	Date of purchase 10/08/06	

Section 5: Advertisement

Where did the advertisement appear?

❒ Magazine ❒ Newspaper ❒ Television ❒ Radio ❒ Website ❒ Billboard ❒ Other _____

Date advertisement sighted or heard

Additional information# (if possible)

For example: TV channel, radio station, name of TV/radio program, estimate of time, website address, name of newspaper/magazine, publication date, location of billboard.

This information is not compulsory but any additional information will assist in the timely resolution of your complaint.

Please attach a copy of the label or the advertisement if possible.

* Indicates compulsory fields. The compulsory fields require the minimum information required to investigate the claim and the form may be returned for further information or not investigated if the compulsory fields are not completed.

To lodge this form, please refer to the contact details for your State or Territory food regulation enforcement agency.

If you are unsure of where to send your complaint, you can send it to the Health Claims Watchdog mailbox where it will be forwarded to the relevant State or Territory food regulation enforcement agency.