



U.S. Food & Drug Administration

Tobacco Products



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Potential Tobacco Product Violations Reporting - Form FDA 3779

Form Approved: OMB No. XXXX-XXXX, Expires X month day, 20XX
See OMB statement at bottom.

Use this form to report potential tobacco related violations of the Federal Food Drug and Cosmetic Act and associated regulations. These submissions are reviewed by FDA's Center for Tobacco Products, Office of Compliance and Enforcement.

WHO can report? – Any member of the public.

Tell us:

WHEN did you see the potential violation?

WHERE did the potential violation occur?

WHAT is the potential violation?

WHY report? – Information we receive from the public is often very helpful in identifying problems with marketed products and possible violations of the laws that we enforce.

To submit your report, use the form below or choose one of the following options (the alternative submission options below will include links in the final version of this form):

- | [To submit your report by mail](#) |
- | [To submit your report by phone](#) |
- | [To submit your report by email](#) |
- | [To submit report using web form](#) |

(*Required field)

Date potential violation occurred 1 - / 1 - / 2011 -
MM DD YYYY

I do not recall the date this potential violation occurred

State in which potential violation occurred * Alabama

Description of Product Type * Cigarette

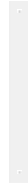
Tobacco brand (character limit 250)

- Potential violation type (choose all that apply)**
- Sales to minors
 - Flavored cigarette sales
 - Advertising/promotion/marketing
 - Free samples
 - Vending machine/self-service display/direct access to cigarette or smokeless tobacco
 - Sale of cigarettes in packs less than 20
 - Unsure

- Type of potentially violative promotional materials (choose all that apply)**
- | | |
|--|--|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Magazine |
| <input type="checkbox"/> Periodicals | <input type="checkbox"/> Billboard |
| <input type="checkbox"/> Direct Mail | <input type="checkbox"/> In-store advertisements |
| <input type="checkbox"/> Price signage | <input type="checkbox"/> Posters |
| <input type="checkbox"/> Coupons | <input type="checkbox"/> Internet advertising |
| <input type="checkbox"/> Unsure | |

- Who potentially violated? (choose all that apply)**
- Retailer
 - Manufacturer
 - Importer
 - Distributor

Description of potential violation (character limit 1000)



Please provide name and physical address of the potentially violative party/location below by potential violator types, if known.

Retailer, Manufacturer, Importer, or Distributor name (character limit 250)

Address

Street Address

Address Line 2

City State / Province / Region

Postal / Zip Code

If report is about a website, please provide website address here:

Upload relevant files here (maximum size is 8MB):

Browse...

All reports will remain confidential to the extent allowed by law. For more information about FDA's internet policies, please visit: <http://www.fda.gov/AboutFDA/AboutThisWebsite/WebsitePolicies/default.htm>¹.

May we contact you if we need additional information? Yes, CTP may contact me. (Please fill in contact information below.) No, I want my report to be anonymous.

Name (character limit 250)

Affiliation (such as company, school or group) (character limit 250)

Address

Street Address

Address Line 2

City State / Province / Region

Postal / Zip Code

Phone number

- ### -

Email

I would like to receive an email to let me know CTP got my complaint Yes No

In order to receive a response, please configure your email spam/junk filter to allow messages from ctpcompliance@fda.hhs.gov. In most cases, this is solved by adding our email address to your address book.

If you would rather submit your report to us in writing along with any attachments, please do so at the following address:

Tobacco Product Violation Report, Office of Compliance and Enforcement
FDA Center for Tobacco Products
c/o Document Control Center
9200 Corporate Boulevard
Rockville, MD 20850-3229

To reach us by telephone, please call 1-877-CTP-1373, and select option 3. You may also email us at ctpcompliance@fda.hhs.gov.

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OMB Paperwork Reduction Act Statement

Public reporting burden for this collection of information is estimated to average 0.25 hours (15 minutes) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

Department of Health and Human Services
Food and Drug Administration
Office of the Chief Information Officer
1350 Piccard Drive, 420A
Rockville, MD 20850

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

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