## Division of Funeral, Cemetery, and Consumer Services Complaint Form

## Complaint Concerning JGR Funeral Home (preneed contract)

To Complainant: If you have a complaint against JGR Funeral Home in regard to a preneed contract you purchased, and you desire to file for e refund from the Consumer Protection Trust Fund (CPTF), please fill out this complaint form, and the appropriate claim form, and send those documents to the Division of Funeral, Cemetery, and Consumer Services. It may not always be in your best economic interest to seek a refund from the CPTF. Information about CPTF claims regarding JGR Funeral Home preneed contract, can be obtained by reading the Division's document entitled "Information For Consumers Holding Preneed Contracts Issued By JGR Funeral Home. The Division's address and contact info, to get information or to send completed forms, is given at the end of this form.

## PLEASE PRINT LEGIBLY

I BEAGE FRINT EEGIBET
(1) Complainant Information (info about the person who signs this complaint form)
(a) Print your name:
(b) Your full mailing address:
(c) Your daytime phone number:
(d) Your email address:
(2) Status of person signing this complaint (check one)
I am the person who purchased and paid for the preneed contract.
I am the spouse of the person who purchased the preneed contract
I am an adult child of the person who purchased the preneed contract and I submit this on behalf of my elderly parent
Other as follows:
(3) Date of the preneed contract (this is usually the date shown on the preneed contract):
(4) Copy of preneed contract.
Do you have a legible copy of the preneed contract?YesNo
(5) Information about the Purchaser and Beneficiary
The Purchaser is the person who paid for the preneed contract. The Beneficiary is the person whose death and final arrangements are the subject of the preneed contract. The Purchaser and the Beneficiary are often the same person, but are sometimes different persons.
(a) Purchaser. Name of the person who paid for the preneed contract (for example, if the preneed contract was paid for by one or more checks, who signed the checks?)
Purchaser Name:
• Is the Purchaser still alive? YesNo
Complaint form, page 1 of 4
Complained, please print you name here on each page of this complaint:
. The second state of each page of this complaint:

	• If Yes, is the Purchaser's age, health, and mental clarity such that the Purchaser would be able to testify at a hearing concerning this complaint and a related claim?YesProbably notNo
	• If Yes, does the Purchaser understand and speak English? Yes No (the Division has Spanish language translators, if needed)
<u>(b)</u>	Beneficiary. Name of person whose death and final arrangements were the subject of the preneed contract?  Beneficiary name:
	<ul> <li>Is the Beneficiary still alive? Yes No</li> <li>If no, date of death:</li> </ul>
	Preneed contract price .
(a)	Total price of the preneed contract? \$
(b)	Total amount that has actually been paid for the preneed contract, as of the date of this complaint?  \$
(c)	If the entire price has not been paid, please explain why:
F	How was the preneed contract paid for? (check and fill-in applicable):  Payment in full at time of purchase  Down payment in of \$ at time of purchase followed by installment payments.  Number of installment payments made:  Amount of each installment payment was \$
	Form of payment for the preneed contract (check applicable) All payments were in cash
	All payments were by check
	All payments were by credit card
F	Payments were a mixture of the above
(9) 1	Proof of Payment
	can you prove how much you paid for the preneed contract? (check all that apply)
ν	We have copies of cancelled checks for all amounts paid
	We have copies of credit card receipts
	We have receipt(s) issued by JGR Funeral Home
	Ve have a document from JGR Funeral Home saying "Paid in full"  Other as follows:
10)	Where was the preneed contract purchased (check applicable)
	Complainent places printers
•	Complainant, please print you name here on each page of this complaint:

The Purchaser of the preneed contract went to the offices of JGR Funeral Home at 6718 N Armenia, Tampa, and met with representatives of the funeral home at that location, and purchased the preneed contract while at that location.
A representative of JGR Funeral Home came to the residence of the Purchaser, and the preneed contract was purchased at that location
Other. The preneed contract was purchased at the following location:
(11) Who did Purchaser deal with when purchasing the preneed contract?  When purchasing the preneed contract, the Purchaser dealt in person primarily with the following representative of JGR Funeral Home:
Lucia Gonzalez-Roel Julio Gonzalez-Roel Adolfo Gonzalez-Roel
Douglas Hernandez Vanessa Franco Randy Howard Other as follows:
<ul> <li>(12) Efforts to obtain fulfillment or refund of preneed contract</li> <li>(a) Has Purchaser or Purchaser's representative tried to obtain a refund from JGR Funeral Home?  YesNo</li> <li>If yes, explain what efforts you have made and what the results were:</li> </ul>
(b) Has anyone representing JGR Funeral Home contacted Purchaser or Purchaser's representative and discussed a full or partial refund, or proposed an alternative method of getting your preneed contract honored?  YesNo
• If yes, who contacted Purchaser or Purchaser's representative, when, and what was said:
(c) Has Purchaser or Purchaser's representative entered into any agreement or arrangement with any representative of JGR Funeral Home, for a refund or alternative method of honoring the preneed contract? Yes Yes No  • If Yes, explain the agreement or arrangement:
<ul> <li>(d) Has Purchaser or Purchaser's representative or family received any full or partial refund of amounts paid for the preneed contract?</li> <li>YesNo</li> <li>If Yes, state when and how much:</li> </ul>
Complaint form, page 3 of 4 Complainant, please print you name here on each page of this complaint:

(e) Has Purchaser or Purchaser's representative or family received any of the merchandise or services purchased under the preneed contract?YesNo
• If Yes, explain when and identify what merchandise or services have been received:
**************************************
provide the Division)
***********************
CERTIFICATION AND SIGNATURE
I, the person signing this Complaint below, certify that all answers and information provided herein are true and correct to the best of my knowledge and belief.
PRINT the name of the person signing below:
Trent the name of the person signing below.
Signature of Complainant Date signed
Signature of Complainant Date signed
************************
<b>Division Contact Info.</b> Division employee Diana Miller (ph. 850-413-4986), has been appointed special coordinator for complaints and claims against JGR Funeral Home. You can scan your completed complaint and
claim forms and email them to us at: diana.miller@MyFloridaCFO.com. Or you can mail your completed forms to us at: Funeral & Cemetery Division, ATTN: Diana Miller, 200 East Gaines Street, Tallahassee FL 32399-0361. All
forms and Information documents referred to herein are available on the Funeral & Cemetery Division website at
www.MyFloridaCFO.com/funeralCemetery/. Once on that website, click on the button entitled "Consumer Alerts."
Complaint form, page 4 of 4
Complainant, please print you name here on each page of this complaint: