



TEANA Ethics Claims Form

*Please remember: Only TEANA Members can file claims against other members.
This is a membership benefit.*

Date: _____

Claim Made By:

Company Name: _____

Contact Name: _____

Address: _____

Phone: _____

Email: _____

Claim made Against:

Company Name: _____

Contact Name: _____

Address: _____

Phone: _____

Email: _____

Nature of Claim Made: Has there been initial conversation to resolve this issue? (Yes or No)

If Yes, please explain participants and date and any pertinent conversation:

Description of Claim: (include date of activity and attach any supportive paperwork)

Please Return Form to:

TEANA Headquarters - 1315 Walnut Street, Suite 302, Philadelphia, PA 19107
P: 313.749.8681 | E: info@teana.org