



File #:

**Personal Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Last*

*First*

*M.I.*

Address: \_\_\_\_\_

*Mailing Address*

*Postal Code*

Mobile Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Complaint Information**

Government Entity Involved: \_\_\_\_\_

Name of Person committing improper conduct: \_\_\_\_\_

Date and Time of improper conduct: \_\_\_\_\_

Location incident  
occurred:

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Summary of incident:

*I certify that my answers are true and complete to the best of my knowledge.*

Signature:

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Date:

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