

(Continued) _____

Complainant's Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
E-mail Address: _____
OC ACCESS ID (if applicable): _____

Person Preparing Complaint (if different from Complainant): _____
Street Address: _____
City: _____ State: _____ Zip: _____

I affirm that I have read the above charge and that it is true to the best of my knowledge, information, and belief.

Complainant's Signature: _____ Date: _____

Print or type name of Complainant: _____

INTERNAL USE ONLY

Date Received: _____

Received By: _____