Citizen’s Complaint Form

Post Office Box 2142, Woodland, CA  95695
grandjury@yolocounty.org
530.406.5088

PLEASE PROVIDE AS MUCH INFORMATION AS POSSIBLE

Your Name ____________________________

Home Address ____________________________________________________________

Work Address ______________________________________________________________

Home Phone ___________________ Alternate Phone _________________________

Official, Department or Agency the complaint is regarding ______________________

___________________________________________________________

Address ________________________________________________________________

Phone ___________________________ Director, if applicable ____________________

Please summarize your complaint, include date of events, names, departments, and agencies involved.
(Attach additional sheets if necessary)

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Officials, departments or agencies you have contacted regarding this problem.

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What kind of action would you like to see the Grand Jury take?

________________________________________________________________________

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Please attach any correspondence or documents you may have regarding this matter by clicking the paper clip icon on the left.

Name _______________________________ E-mail _______________________________
Date _______________________________