

BAD POLICING? COMPLAIN!

YOU SHOULD HAVE BEEN TREATED

- With respect
- With dignity
- With care
- With honesty
- In private

THE STATE SHOULD BE
**ACCOUNTABLE FOR
FAILING TO PROTECT
YOU FROM HARM**

WHY COMPLAIN?

It is important to complain:

- So that you stand up against unprofessional and criminal acts by the police
- So that the police are held responsible for not upholding your right to be protected from harm
- Support the police service to help them do their job better

HOW TO COMPLAIN IF POLICE TREAT YOU BADLY/GIVE YOU BAD SERVICE



Your Provincial Commissioner and Provincial Complaints Secretariat will depend on your province.



See the page for your province for details.



Need help writing a complaint? See page 4.



HOW CAN I COMPLAIN?

1. Talk to the Shift Commander

The Shift Commander will be the person who was in charge at the relevant time of the complaint you are making



2. Talk to the Station Commander

This will be the person in charge of the station where the incident happened/ in charge of the police officer in question



3. Talk to Your Provincial Commissioner

See the page for your province to find out who your Commissioner is and how to contact them



4. Still no response? What is your complaint about?



If the police acted criminally

- Death in police custody/ caused by police action
- Rape incidents
- Torture by police
- Unlawful use of firearms
- Corruption



A. Contact Provincial IPID

See page for your province

B. National IPID or DPCI



If you received bad service

- Ineffective case handling
- Poor quality service delivery



A. Contact Provincial CSP

See page for your province



B. SAPS Centre for Service Excellence

National Procedures



NATIONAL COMPLAINTS

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



Fill out a Complaints Form (See page 15) Or available here:

<http://www.ipid.gov.za/documents/IPID%20Complaints%20Form-%20Form%202.pdf>



Email to: complaintsnodalpoint@saps.gov.za



Telephone: 0860 13 0860

IF YOU ARE COMPLAINING ABOUT SERIOUS CRIME: DPCI



Fill out a form (See page 18) or available here:

http://www.saps.gov.za/dpci/downloads/complaint_form_office_of_the_dpci_judge.pdf



Physical Address: 9th Floor, 120 Plein St, Cape Town, 8000



Postal Address: P/Bag x 9058, Cape Town, 8000



Phone: (012) 324 7435 or (012) 324 8417



Email: complaints@dpcijudge.gov.za

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: SAPS



National Commissioner: Khmotso KJ Phahlane, Lt Gen

Physical Address: Wachtuis, 229 Pretorius St, 7th Floor, PRETORIA

Postal Address: Private Bag X94, PRETORIA< 0001

Tel: 012 393 1000

Email: buekesheleen@saps.org.za



Or: SAPS CENTRE FOR SERVICE EXCELLENCE

Telephone: 0800 333177

E-mail: CentreForServiceExcellence@saps.gov.za.

COMPLAIN TO THE PUBLIC PROTECTOR



Write a letter (see page 4)

Postal Address: Public Protector, Private Bag X677, PRETORIA, 0001



Email: registration2@pprotect.org



Telephone: (012) 366 7000 or (012) 366 7112



WHAT TO WRITE IN AN EMAIL OR LETTER

Update Email Templates for Sean's Test Shop

From: Your Name <youremail@email.co.za>

Update

Cancel

[\[Macros\]](#) [\[Help\]](#)

Subject:

Police Complaint

Message:

To Whom it May Concern,

I am writing to lodge a formal complaint about the service I received from [a police officer/ police officers] at the [insert your station] station. The incident in question happened on [insert date and time]. I have attached a formal complaints form to this email.

[brief description of what happened and why you are complaining]

The handling of my case was far below the service expected of SAPS officers. The SAPS have a general constitutional duty, Under Chapter 11 of the Constitution to secure and protect the inhabitants of South Africa. Moreover under the SAPS code of conduct, police officers pledge to "act in a manner that is impartial, courteous, honest, respectful, transparent and accountable" and act with "integrity in rendering an effective service of a high standard which is accessible to everybody". The service I received fell significantly short of this duty.

The police service should be held accountable for the delivery of bad service and I hope that you will take this matter seriously. I look forward to hearing your response.

Yours Sincerely,

[Insert your Name
Address
Contact Phone Number]

IF YOU ARE FROM MPUMALANGA



CONTACT THE PROVINCIAL COMMISSIONER



Name: Thulani Raymond TR Ntobela, Lt Gen



Physical Address: 7 Ferreira Street, NELSPRUIT



Postal Address: Private Bag X11299, NELSPRUIT, 1200



Tel: 013 751 6363

Fax: 013 751 6361



E-mail: Mppc.so@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



Physical Address: Nedbank Centre, 1st Floor, 48 Brown Street, Nelspruit



Tel: 013 754 1000

Fax: 013 752 2602



E-mail: Complaints.Mpumalanga@ipid.gov.za

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP



Head of Department for Community Safety, Security and Liason: Mr Thokozani Ntuli



Physical Address: 7 Government Boulevard, Building 4, 2nd Floor, Riverside Park, Extension 2, Nelspruit, 1200



Tel: 013 766 4055/4516

Fax: 013 766 4600



E-mail: MTheka@mpg.gov.za

IF YOU ARE FROM NORTH WEST PROVINCE



CONTACT THE PROVINCIAL COMMISSIONER



Name: Mirriam Nosaziso Zukiswa M.N.Z Mbombo, Lt Gen



Physical Address: Cnr Potgi, Nelson Mandela and Peter Mokaba Streets, POTCHEFSTROOM



Postal Address: Private Bag X801, POTCHEFSTROOM, 2520



Tel: 018 299 7000
Fax: 018 299 7002 / 7003



E-mail: Nwprov.staff@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



Physical Address: No.1 Station Road, Molopo Shopping Centre, 1st Floor, Mafikeng, 2745



Tel: 018 397 2500
Fax: 018 381 1495



E-mail: Complaints.NorthWest@ipid.gov.za

IPID SATELLITE OFFICE



Physical Address: 165 Klopper Street, Rustenburg



Tel: 014 591 8560
Fax: 014 592 1349



E-mail: Complaints.NorthWest@ipid.gov.za

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP

Department of Community Safety & Transport Management



Physical Address: Safety House 31-34, Molopo Road, Mahikeng, 2735



Tel: 018 381 9187/9189
Department Call Center: 0800 20 49 92

IF YOU ARE FROM NORTHERN CAPE PROVINCE



CONTACT THE PROVINCIAL COMMISSIONER



Name: Janet Debora JD Basson, Lt Gen



Physical Address: 19 George Street, KIMBERLEY



Postal Address: Private Bag X5001, KIMBERLEY, 8300



Tel: 053 839 2841
Fax: 053 833 1275



E-mail: Ncprov.comm.sec@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



Street Address: 39 George Street, Kimberley



Tel Number: 053 807 5100
Fax Number: 053 832 5615



E-mail Address: Complaints.NorthernCape@ipid.gov.za

IPID SATELLITE OFFICE



Physical Address: 13 Kooperasie Straat, Upington



Tel: 054 338 5700
Fax: 054 331 0053



E-mail: Complaints.NorthernCape@ipid.gov.za

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP

Department of Transport, Safety and Liaison



Physical Address: Southey Chambers, 1st Floor, Southey Street, KIMBERLEY



Postal Address: Private Bag X1368, KIMBERLEY, 8300



Tel: (053) 839 1702
Fax: (053) 839 2781



E-mail: tmodiakgotla@ncpg.gov.za

IF YOU ARE FROM NORTHERN CAPE Continued



OFFICE OF THE PREMIER NORTHERN CAPE

The White Paper on Transformation of Public Service delivery (Batho Pele) lists 8 basic principles to enhance service delivery. We are reviewing our Service Delivery Charter to improve our service to you. Kindly forward all your inputs and comments on this Service delivery charter to Mr Jerry Kale@ 053 802 5133 or email JKale@ncpg.gov.za on or before Friday 25 July 2014.

COMPLAINTS PROCEDURE

If the promised standard of service is not delivered, we will offer you an apology, a full explanation and a speedy and effective remedy. When you make a complaint you will receive a sympathetic and positive response.

Informal complaint

You are advised to bring your complaint to the attention of the official concerned and ask him or her to resolve the problem immediately. If you do not receive any satisfaction from this, below is a formal procedure to be followed.

Formal Procedure

Level 1: Unit Head

- a Get the details of the Head/Supervisor of the unit to register your complaint.
- b You can either lodge your complaint verbally or in writing. Verbal complaints can be lodged one on one or telephonically by dialling (053) 8382600. Written complaints are more advisable and can be forwarded to otpcomplaints@ncpg.gov.za / via suggestion boxes found in strategic points per unit or departmental on the ground floor JW Sauer Building.
- c Please provide full details of the complaint.
- d Provide all details that would assist when we have to contact you. This is necessary for follow up investigations and reporting purposes.
- e The standard for resolving complaints in thirty days (30), we will acknowledge your query within 5 days, investigate and inform you of progress in ten days.

If you are not satisfied with the response on your complaints by the Unit Head you can resort to higher authorities for possible redress.

Level 2: Head of the Department

- a Address your complaint to the Head of department, requesting a review of the decision of the Unit Head.
- b Lodge your complaint in writing; and
- c Follow steps (c) to (e) above.

COMPLAINTS ADMINISTRATION

Complaints Administration

- a Head of department will ensure that the complaints procedure, more so the time-frames are strictly, adhered to.
- b Each Unit Head will be responsible for:
 - * Ensuring that all complaints are dealt with as per the complaints procedure;
 - * That staff are made aware of the complaints mechanism;
 - * complaints via suggestion boxes/emails are checked as a minimum on day 1 and day 3 of the working week.
 - * That the time-frames in response to the complaint(s) are dealt with timeously.
- c A complaints register is maintained by nominating a designated support official. The designated support official will:
 - * Will record the complaint that indicates the date, summary of complaint, responsible persons.
 - * Access the suggestion boxes/ complaint emails (if such delegations are in place)
 - * Maintain records of all lodged complaints.
- d Officials are responsible for:
 - * Comply with the set time-frames when addressing complaints
 - * Make clients aware of the complaints mechanisms available within the Office of the Premier
- e Any disputes arising from the above should be directed to the Head of Department

The Department undertakes the following:

- a To acknowledge your complaint within 5 working days from the date of receipt;
- b To attach the necessary level of confidentiality to your complaint;
- c Investigate the complaint thoroughly
- d Provide an approximation of how long it will take to resolve the complaint;
- e To extend the necessary apology;
- f Explain fully the actions of our officials, and
- g Initiate a speedy and effective remedy

The following might be useful in dealing with a complaint

- a Your name and contact details
- b The domain(s) concerned
- c Steps you would like to see taken

IF YOU ARE FROM WESTERN CAPE



CONTACT THE PROVINCIAL COMMISSIONER



Name: Arno Heinrich A.H Lamoer, Lt Gen



Physical Address: 25 Alfred Street, CAPE TOWN



Postal Address: Private Bag X9004, CAPE TOWN, 8000



Tel: 021 417 7148

Fax: 021 417 7389



E-mail: wcpstaffofficer@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



Physical Address: Fintrust Building, 1st Floor, Corner Petrusa & Mazzur Street, Bellville, 7530



Tel: 021 941 4800

Fax: 021 949 3196



E-mail: Complaints.WesternCape@ipid.gov.za

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP

Department of Community Safety



Physical Address: 35 Wale Street, 2nd Floor, Cape Town



Postal Address: Department of Community Safety, PO Box 5346, Cape Town, 5000



Tel: 021 483 4332

Fax: 021 483 6026



Email: Policing.complaints@westerncape.gov.za

Email: fatima.samuels@westerncape.gov.za

IF YOU ARE FROM GUATENG



CONTACT THE PROVINCIAL COMMISSIONER



Name: Lesetja Joel L.J Mothiba, Lt Gen



Physical Address: 16 Empire Road, Parktown, JOHANNESBURG



Postal Address: Private Bag X57, BRAAMFONTEIN, 2017



Tel: 011 274 7875



Email: gp.pc.secretary@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



20TH Floor, Marble Towers Building, NO. 208-212 Jeppe Street, Johannesburg



Tel: 011 220 1500
Fax: 011 333 2705



E-mail: Complaints.Gauteng@ipid.gov.za

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP

Department of Community Safety



78 Fox Street, Standard Bank Building, Johannesburg, 2001



Postal Address: P.O. Box 62440, Marshalltown, 2170



Tel: 011 689 3600
Fax: 011 689 3650

IF YOU ARE FROM EASTERN CAPE



CONTACT THE PROVINCIAL COMMISSIONER



Name: Cynthia Celiwe CC Binta, Lt Gen



Physical Address: Former Griffiths Mxenge, Zwelitsha Road,
ZWELITSHA



Postal Address: Private Bag X7471, KING WILLIAMSTOWN, 5600



Tel: 040 608 8413/8414
Fax: 040 608 8416



Email: ECPROVCOMM@saps.gov.za / QotoyiAM@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



Mezzanine Floor Permanent Building, 4244 Oxford Street,
CNR, Oxford & Terminus Streets, East London, 5200



Tel Number: 043 706 6500
Fax Number: 043 706 6526



E-mail: Complaints.EasternCape@ipid.gov.za

IPID SATELLITE OFFICE



10th Floor PRD Building, Office number 1056B, Suiderland
Street, Umthatha



Tel: 047 501 5900
Fax: 047 531 1570

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP



Head of Department of Safety & Liaison: Ngaka Mosehana



Old Commissioner Building, Independence Avenue, BISHO



Postal Address: Private Bag X0057, BISHO, 5605



Tel: 040 609 2425
Fax: 040 609 2908



E-mail: Ngaka.Mosehana@safetyec.gov.za

IF YOU ARE FROM FREE STATE

CONTACT THE PROVINCIAL COMMISSIONER



Name: Thabethe Simon T.S Mpembe, Lt Gen



Physical Address: 126 Charlotte Maxeke Street, BLOEMFONTEIN



Postal Address: Private Bag X20501, BLOEMFONTEIN, 9300



Tel: 051 507 6561 / 6562

Fax: 051 507 6500 / 086 519 1477



E-mail: [Fs.provcomm@saps.gov.za](mailto:F.s.provcomm@saps.gov.za)

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



15 CNR Andrew & Westburger Streets, Ground Floor, Standard Bank Building, Bloemfontein



Tel: 051 406 6800

Fax: 051 430 8852



E-mail: Complaints.FreeState@ipid.gov.za

IPID SATELLITE OFFICE



28 Louw Street, Maseroy Building, Bethlehem, 9700



Tel: 058 307 7620/21

Fax: 086 630 0927

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP



Perm Building, 45 Charlotte Maxeke Street, Bloemfontein



Postal Address: P.O. Box 119, Bloemfontein, 9330



Ms. A Nel: (051) 409 8836

Mr. S. Tsoai: (051) 409 8935



Email: tsoaids@safety.fs.gov.za

Email: nela@safety.fs.gov.za

IF YOU ARE FROM KWAZULU-NATAL

CONTACT THE PROVINCIAL COMMISSIONER



Name: Betty Mmamonye B.M Ngobeni, Lt Gen



Physical Address: 15 Ordinance Street, DURBAN



Postal Address: PO Box 1965, DURBAN, 4000



Tel: 031 325 4825
Fax: 031 325 4746



E-mail: Provincialcommissioner@saps.org.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



3RD Floor, The Marine Building, 22 Dorothy Street, Nyembe Street,
Gardiner Street, Durban



Tel: 031 310 1300
Fax: 031 305 8214



E-mail: Complaints.KwaZuluNatal@ipid.gov.za

IPID SATELLITE OFFICE



10 Union Street, Edwards Pharmacy Building, First Floor Room 1ICD



Tel: 035 772 3022
Fax: 035 772 3049

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP



179 Jabu Ndlovu, Pietermaritzburg, 3201



Postal Address: Private Bag X9143, Pietermaritzburg, 3200



Mr Jabulani Makhathini (Acting Manager Complaints):
Cell: 082 554 2463
Office: (033) 341 358



E-mail: Jabulani.Makhathini@comsafety.gov.za
E-mail: info@comsafety.gov.za



Submit a complain online:
<http://www.kzncomsafety.gov.za/Submitacomplaint.aspx>

IF YOU ARE FROM LIMPOPO



CONTACT THE PROVINCIAL COMMISSIONER



Name: Sehlahle Fannie S.F Masemola, Lt Gen



44 Schoeman Street, POLOKWANE



Postal Address: Private Bag X9428, POLOKWANE, 0700



Tel: 015 290 6227

Fax: 015 290 6162



E-mail: Limprov.comm.secr@saps.gov.za

IF YOU ARE COMPLAINING ABOUT CRIMINAL TREATMENT: IPID



2nd Floor Femnic Building Building, 66 A Market Street,
Polokwane



Tel: 015 291 9800

Fax: 015 295 3409



E-mail: Complaints.Limpopo@ipid.gov.za

IPID SATELLITE OFFICE



Thohoyandou, Limdev Building, Limpopo Development
Corporation, Ground floor office no: D1



Tel: 015 962 0405

Fax: 015 962 0345

IF YOU ARE COMPLAINING ABOUT BAD SERVICE: CSP



32 Schoeman Street, POLOKWANE



Postal Address: Private Bag X9492, POLOKWANE, 0700



Tel: (015) 290 2926

Fax: (015) 291 3155



Submit a complaint online:

<http://www.dssl.limpopo.gov.za/?q=publicspace>

Complainant Details (includes third party complaints)

Role in the case	<input type="checkbox"/> Complainant <input type="checkbox"/> Third Party		
ID Number		Passport Number	
Title		First Name	
Middle Name		Surname	
Landline		Mobile	
Fax		Email	
Nationality		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Disabled status			
Address			
Country		City	
Suburb		Postal Code	
Preferred contact Method (E.g. E-mail, SMS, Post)			

Victim Details

Passport Number			
First Name		Middle Name	
Surname			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		Race
Age			

Service Member's Details

Identified	<input type="checkbox"/> Yes <input type="checkbox"/> No		Rank	
Persal Number		ID Number		
Initials				
First Name		Middle Name		
Surname				
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		Race	
Duty Station		Duty Station Unit		

Identified	<input type="checkbox"/> Yes <input type="checkbox"/> No		Rank	
Persal Number		ID Number		
Initials				
First Name		Middle Name		
Surname				
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		Race	
Duty Station		Duty Station Unit		

Identified	<input type="checkbox"/> Yes <input type="checkbox"/> No		Rank	
Persal Number		ID Number		

Initials			
First Name		Middle Name	
Surname			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	
Duty Station		Duty Station Unit	
Contact Number			
On Duty	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Vehicle Registration Number			

Details of Witnesses to Incident

Title		First Name	
Middle Name		Surname	
Landline		Mobile	
Title		First Name	
Middle Name		Last Name	
Landline		Mobile	
Title		First Name	
Middle Name		Surname	
Landline		Mobile	
Title		First Name	
Middle Name		Surname	
Landline		Mobile	

COMPLAINANT'S FULL NAMES:

COMPLAINANT'S SIGNATURE:

DATE:



**OFFICE OF THE DPCI JUDGE
REPUBLIC OF SOUTH AFRICA**

Private Bag X 102, Pretoria 0001, 246 Paul Kruger Street, 1st Floor, Protea Towers Building, Pretoria.
Tel: (012) 324 7435/ 8417, Fax (012) 393 2536/8, Website: www.dpcijudge.gov.za,
Email address: Complaints@dpcijudge.gov.za

COMPLAINT REPORTING FORM

<p>NOTE: If additional space is required to provide information, use a Continuation Sheet and refer item number which is supplemented.</p> <p>Please complete all items to the extent possible to enable the Office of the DPCI Judge to locate persons who are important to the investigation of this complaint</p>	<p>1. Date/Time of complaint:</p>	<p>2. Complaint Ref No:</p>
	<p>3. Method of Receipt</p> <p><input type="checkbox"/> In person</p> <p><input type="checkbox"/> Written</p> <p><input type="checkbox"/> Email</p> <p><input type="checkbox"/> Fax</p>	<p>4. SAPS CAS/CR No:</p>

5. Complainant's Name and Surname	
6. Complainant's ID No:	
7. Complainant's date of birth	
8. Complainant's Address	
9. City/Town/Province	
10. Complainant's Telephone Number	
11. Complainant's Work address	
12. Complainant's Work Telephone Number	
13. Name of Closest Relative/Neighbour	
14. Relative/Neighbour street address	
15. Relative/Neighbour Telephone Number	
16. City/Town/Province	
17. Nature of investigation of the Directorate for Priority Crime Investigation	
18. Category 1 Complaint of the public:	

Give full details of serious and unlawful infringement of your rights caused by the Investigation of the Directorate for Priority Crime Investigation.
 Category 2 Complaint by a member of the Directorate for Priority Crime Investigation:
 Give full details of improper influence or interference whether of a political or any other nature, exerted upon him or her regarding the conducting of an investigation.

NOTE: In respect of both categories of complaints the nature and availability of evidence to support the complaint are required.

19. Name and details of possible witnesses to support complaint

- 1.
- 2.
- 3.

20. Witness 1
Street Address

21. Witness 1
Other Name

22. City/Town/Province

23. Witness 1 Telephone Number

24. Witness 2
Street Address

25. Witness 2
Other Name

26. City/Town/Province

27. Witness 2 Telephone Number

28. Witness 3
Street Address

29. Witness 3
Other name

30. City/Town/Province

31. Witness 3 Telephone Number

32. Name(s) and details of Respondent(s)

33. Respondent 1

34. Respondent 2

35. Respondent 3

COMPLAINT CERTIFICATION

I have been advised that the filing of a false report may constitute defeating the ends of justice, or in appropriate cases perjury, which are criminal offence, and I hereby certify that all of the information contained in this Complaint Reporting Form as well as any supporting Continuation Sheets is true and correct to the best of my knowledge and belief

Date: _____ Signature/Mark of Complainant

Date: _____ Signature of Witness

36. Printed Name of Report Taker	37. Signature of Report Taker	38. Number of Continuation Completed and Attached
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FOR USE OF PERSONNEL OF DPCI JUDGES'S OFFICE ONLY

39. Preliminary Classification: <input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2	40. Other observations	
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TEAR OR CUT ALONG THIS LINE

IMPORTANT- DO NOT LOSE THIS RECEIPT

This is a receipt for the complaint you have just filled. It bears a Complaint Number in the lower right hand box which identifies the complaint. Please make sure that the numbers are the same as in box no.2 on the form, before you accept this Receipt. Any future communication concerning this matter should refer to the Complaint Number. If you have additional Information or questions, you may call the Office of the DPCI Judge at Tel: during the hours 08h00 to 16h00. You will be contacted during the processing of this matter and at the time a decision is reached concerning a final disposition. Thank you for your assistance.

The Office of the DPCI Judge

Street address:

Postal address:

Email:

Printed Name of Reporter	Signature of Report Taker	Number of Continuation Sheets Completed and Attached	Complaint Number
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