**Inyo County Grand Jury**
**Post Office Box 401**
**Independence, CA 93526**

**All information on this form is strictly confidential.**
**Please write legibly. Please be specific and concise.**

Your Name*:_____ Date:_____

Your Address*:_____

Phone Number*:_____

## Complaint

Which Agency, City, District, or County Department does this complaint involve?

Agency, etc. :_____

Address/ Location:_____

Which specific official/ employee of the Agency, etc. you cited above?

Official/ Employee Name:_____

Which specific event?

Time:_____ Date:_____

Location:_____

Complaint details: Please state your specific complaint, including additional names, locations, witnesses, and other supportive facts.

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_____
Signature Optional*

*Please note that you are not required to sign or provide us with your name and address. However, without address the Inyo County Grand Jury will be unable to respond to your request.