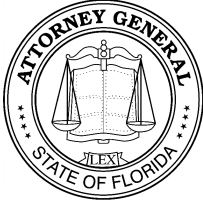


OFFICE OF THE ATTORNEY GENERAL



**PAM BONDI
ATTORNEY GENERAL
STATE OF FLORIDA**

**DEPARTMENT OF LEGAL AFFAIRS
THE CAPITOL
TALLAHASSEE, FLORIDA 32399-1050**

**Reply Address:
Office of the Attorney General
Office of Civil Rights
110 S.E. 6th Street, 10th floor
Ft. Lauderdale, Florida 33301
(954) 712-4600; FAX (954) 527-3704**

COMPLAINT QUESTIONNAIRE

Office of Civil Rights

PLEASE PRINT IN INK OR TYPE

NAME: _____ **PHONE NO.:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PERSON (S), COMPANY OR ORGANIZATION YOU ARE COMPLAINING AGAINST:

AREA CODE/PHONE NUMBER: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Please provide a brief statement of your complaint. Attach copies of any documents that support your statement. Do not send original documents. All documents and attachments submitted are subject to public inspection pursuant to Chapter 119, Florida Statutes.

