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| OMBUDSMAN_LOGO | **COMPLAINTS (MALADMINISTRATION) LAW (2018 REVISION)**

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| File #Click or tap here to enter text. |

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## Personal Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full Name: |   |   | Date: |   |
|  | Last | First | M.I. |  |  |

|  |  |
| --- | --- |
| Address: |   |
|  | Mailing Address | Postal Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Mobile Phone: |   | Alternate Phone: |   |

|  |  |
| --- | --- |
| Email:  |   |

|  |  |
| --- | --- |
| Occupation: |   |

## Complaint Information

|  |  |
| --- | --- |
| Government Entity Involved: |   |

|  |  |  |
| --- | --- | --- |
| Name of Person committing improper conduct: |   |  |

|  |  |
| --- | --- |
| Date and Time of improper conduct: |   |

|  |  |
| --- | --- |
| Location incident occurred: |   |

Summary of incident:

|  |
| --- |
| Click or tap here to enter text. |

I certify that my answers are true and complete to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |   |

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