



**When do you believe that the civil right discrimination occurred?**

\_\_\_\_\_  
List Date(s)  
\_\_\_\_\_

**Describe briefly the alleged discriminatory act. Please be as specific as possible. (Include dates, locations, name and contact information of witnesses – use one or more additional pages if necessary.)**

**Please sign and date this complaint. You do not need to sign if submitting this form by email, because submission by email represents your signature.**

\_\_\_\_\_  
Signature of complainant (*person filing this complaint*)

\_\_\_\_\_  
Date Signed (mm/dd/yyyy)

\*\*\*\*\*

Do Not write below this line.

The complaint is dismissed

The following resolution is offered and the matter is concluded: \_\_\_\_\_

\_\_\_\_\_  
The above resolution has been offered but the matter is not concluded.

The complainant has been told about the federal and state agencies that are available if he or she wants to pursue the matter further.

ADDITIONAL COMMENTS: \_\_\_\_\_

By: \_\_\_\_\_

Dated (mm/dd/yyyy) \_\_\_\_\_

Subrecipient's Name, Address and Telephone Number (*A subrecipient is a program or agency that receives funds from the Oregon Criminal Justice Commission.*)