FINANCE AND ADMINISTRATION CABINET

COMPLAINT UNDER CIVIL RIGHTS ACT OF 1964

	Date:
TO: Finance and Administration Cab	pinet
Ι,	, hereby file an official complaint against
N	Name of Person or Agency
located at:	
Complainant's Name:	
Complainant's Address:	
	s or other evidence):
Basis of complaint (include withesses	s of other evidence).
Date of alleged discrimination:	
Complainant's Signature	Date Signed

Form SP7.300021

Use back of sheet if necessary.