

Nebraska Department of Justice Office of the Attorney General Constituent Complaint Form

Mike Hilgers

Attorney General

Return Completed Form to:

Nebraska Attorney General's Office Attention: Director of Constituent Services 2115 State Capitol Lincoln, NE 68509 (402) 471-2683 - Phone (402) 471-3297 - FAX ago.info.help@nebraska.gov - Email www.ago.nebraska.gov

Complaint Reported By:							
Name:				Date of	Birth:	/	/
Address:							
City:	State:		ZIP:		County:		
Email:			Phone:				
Complaint Reported Against:							
Name:							
Organization:		Title:	Title:				
Address:							
City:		State:					
ZIP:		County:					
Any action taken against you regard	☐ Arrest ☐ Conviction ☐ Citation						
Any action taken against the subject in this matter:			☐ Convi	ction [Citation		
Have you filed reports with any other agency regarding this matter? ☐ Yes ☐ No							
If yes, agency name(s) and date(s) contacted:							

Describe the facts which have led to the filing of this complaint and locations of pertinent events. Please attempt to put it in chibe photocopied. PLEASE PRINT or TYPE ALL INFORMATION. Use	ronological order. This complaint will
The information given above is true to the best of my knowledge and b General's Office, or its designate, to use this information given in any m	
Signature	Date