

SERVICE CASE NUMBER: _____
(For Office Use Only)

DA NUMBER: _____
(For Office Use Only)

RETURN TO:
PUBLIC INTEGRITY DIVISION
Frank Crowley Courts Building
133 North Riverfront Blvd., LB19
Dallas, Texas 75207-4399
214.653.3714

John Creuzot
CRIMINAL DISTRICT ATTORNEY
DALLAS COUNTY, TEXAS

COMPLAINT FORM

This complaint form is provided to you with the understanding that this office may conduct investigations to determine if a firm or person is in violation of Penal Laws of the State of Texas. We strongly recommend that you consult with your own private attorney to determine your legal rights and civil remedies in this matter.

(PLEASE TYPE OR PRINT)

I. INFORMATON ABOUT THE PERSON OR PARTY YOU ARE COMPLAINING OF:

Full Name _____

Address (Street, City, State, Zip) _____

Telephone _____

____ RACE: _____ SEX: _____ HT: _____ WT: _____ HAIR: _____ EYES

: _____ DATE OF BIRTH: _____ OR) APPROXIMATE AGE: _____

II. INFORMATION ABOUT YOU:

1. _____
Your Full Name (and Company Name if Applicable)

Address (Street, City, State, Zip) _____ Social Security Number _____

Telephone Numbers (Office & Home) _____

III. WITNESS INFORMATION:

1. WITNESS: _____
Name

Address and Telephone _____

2. WITNESS: _____
Name

Address and Telephone _____

IV. INFORMATION ABOUT OFFENSE:

1. Date of offense: _____ Where did offense occur: _____

2. What other agencies have you complained to: _____

3. Have you complained to the person: _____ Their reply: _____

4. Please include copies of any related documents.

PLEASE PRINT OR TYPE

V. FACT DESCRIPTION

Describe the exact nature of your complaint below and on additional sheets if necessary. Be brief, but complete. Include the name of the individual that you dealt with and dates. If possible, recite facts in the order in which they occurred.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

I certify that the information which I have furnished the District Attorney in this complaint is true and correct to the best of my knowledge and belief, and is furnished for the sole purpose of instituting a criminal prosecution where the investigation indicates criminal activity and not for the purpose of recovering personal property or any other thing of value. I authorize the District Attorney to use the information given in any manner which he deems necessary and proper.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO before me this the _____ day of _____

A.D., 20 .

(Seal)

Notary Public in and for
the State of Texas

MY Commission Expires: