

Southwestern Institute of Forensic Sciences

ANONYMOUS COMPLAINT SUBMISSION FORM

1. COMPLAINT FROM AN ANONYMOUS PERSON

If you are submitting a complaint without disclosing your identity, but are willing to provide us with a way to contact you (e.g., e-mail), please provide details below:

2. SUBJECT OF COMPLAINT

Individual/Laboratory:	
Address:	
Date of examination, analysis, or report:	
Type of analysis:	
Laboratory Case Number (if known):	

3. NATURE OF COMPLAINT

Please describe briefly the events, facts, and/or circumstances that are the basis for this complaint. Attach additional pages if needed.

4. EXHIBITS AND ATTACHMENTS

Please list and attach to this form copies of any documents related to the complaint, such as reports, transcripts of testimony, affidavits, etc. Because these documents will not be returned, please do not attach original documents.

5. CERTIFICATION (REQUIRED)

By checking the box below, I certify that the statements made by me in this complaint are true. I also certify that any documents or exhibits attached are true and correct copies, to the best of my knowledge.

I so certify.

Date: _____

Mail or Fax this form to:
Quality Manager, Southwestern Institute of Forensic Sciences, 2355 N. Stemmons Fwy., Dallas, TX 75207.
Fax: (214)920-5811