



[Section 4]

Name of First Witness:	
Home Address of First Witness (Number, Street, City, State, ZIP Code):	
Phone (Home):	Phone (Alternate):
Email Address:	

[Section 5]

Name of Second Witness:	
Home Address of Second Witness (Number, Street, City, State, ZIP Code):	
Phone (Home):	Phone (Alternate):
Email Address:	

[Section 6]

Name of Third Witness:	
Home Address of Third Witness (Number, Street, City, State, ZIP Code):	
Phone (Home):	Phone (Alternate):
Email Address:	

[Section 7]

Name of Fourth Witness:	
Home Address of Fourth Witness (Number, Street, City, State, ZIP Code):	
Phone (Home):	Phone (Alternate):
Email Address:	

[Section 8]

Have you filed a complaint with another agency? <input type="checkbox"/> No <input type="checkbox"/> Yes (Complete the following)	
Name of Agency:	
Date of Complaint:	Case File Number:
Status/Results:	
Other Agencies Contacted:	

[Section 9]

Have you contacted an attorney? <input type="checkbox"/> No <input type="checkbox"/> Yes (Complete the following)	
Name of Attorney:	
Business Address (Number, Street, City, State, ZIP Code):	
Phone (Business):	Phone (Alternate):
Email Address:	
Status/Results:	

[Section 10]

**Note – California Penal Code Section 148.5(a) States:**

Every person who reports to any peace officer listed in Section 830.1 or 830.2, or subdivision (a) of Section 830.33, the Attorney General, or a deputy attorney general, or a district attorney, or a deputy district attorney that a felony or misdemeanor has been committed, knowing that report to be false, is guilty of a misdemeanor.

**I declare under the penalty of perjury under the laws of the State of California that the foregoing statements and attached documentary evidence is true and correct.**

Date: \_\_\_\_\_

Signature of Complainant: \_\_\_\_\_