CITY OF DEPOE BAY
P.O. BOX 8
DEPOE BAY, OR 97341
541-765-2361

COMPLAINT FORM

Complaint (Include brief summary of details, attach additional information if needed):

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_____

Location of Complaint _____
_____

INFORMATION OF PERSON FILING COMPLAINT
Name (required)_____
Street Address _____
Mailing Address _____
Home Phone _____ Work Phone _____

Signature _____ Date _____

For Office Use Only
Routed To _____ Date_____
Date Report Filed with City Council _____

"This institution is an equal opportunity provider"