



List any evidence you can provide to support your complaint		
Name, Address and Phone Numbers of Witnesses	Brief summary of evidence to be provided by the witness	
1.		
2.		
3.		
List any documents available to you or to any witnesses	Copies are attached	
1.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please attach additional pages if needed.

Have you filed a complaint with any other agency or organization? Yes  No

If yes, identify the organization. \_\_\_\_\_

What action was taken? \_\_\_\_\_

I understand that the false reporting of a crime is a criminal offense pursuant to Title 21 O.S. § 589. I swear or affirm the above statement is true and accurate to the best of my knowledge?

Your signature is required: \_\_\_\_\_ Date: \_\_\_\_\_

*The Attorney General does not guarantee an investigation or inquiry. Furthermore you must understand that the Attorney General is not your private attorney. Oklahoma law prohibits us from giving legal advice or opinions or acting as your personal attorney; therefore, if you desire legal advice, we suggest you consider contacting a private attorney to discuss you complaint.*

RETURN TO: OFFICE OF ATTORNEY GENERAL  
313 N.E. 21<sup>st</sup> Street  
Oklahoma City, OK 73105

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FOR OFFICE USE ONLY

OAG Unit: \_\_\_\_\_ Referred to: \_\_\_\_\_

**Disposition of Complaint:**

- Investigation       Inquiry       Referred to another agency       No action taken