

Citizen Complaint Form

Stamp in Date

Method by which complaint made: in Person Call-in Letter Email

Name of Person making complaint: _____

Telephone Number: _____

Address: _____

Nature of Complaint: _____

Results of Investigation: _____

Action Taken: _____

Was this matter satisfactorily resolved? Yes or No

Was a letter of outcome sent to person making complaint? Yes or No

Initials of person investigating Complaint: _____

Town of **Lisman**

167 Municipal Drive
Post Office Box 157
Lisman, Alabama 36912
(205)398-3889 FAX (205)398-2934
www.lisमतownhall@tds.net

Person taking complaint: _____