

Anthony A. Scarpino, Jr.
 District Attorney
 Westchester County



Westchester County District Attorney
 Complaints – Fourth Floor
 111 Dr. Martin Luther King Jr. Blvd.
 White Plains, NY 10601

COMPLAINT FORM

www.westchesterda.net/community-outreach/complaint-form

To submit a complaint, please complete and return this form. Clearly and legibly type or hand write your complaint using printed text and dark ink. Also enclose COPIES of all supporting materials, including documents and photographs, relevant to your complaint. DO NOT INCLUDE ANY ORIGINAL DOCUMENTS. The COPIES you provide will not be returned. This form and all supporting materials must be hand-delivered or mailed to this Office at the above address (No fax or e-mail submissions).

YOUR INFORMATION:

YOUR NAME: _____

STREET ADDRESS: _____

CITY/TOWN/VILLAGE: _____ ZIP: _____

DAY PHONE: _____ CELL PHONE: _____ HOME PHONE: _____

SUBJECT INFORMATION: (Person or business you are complaining about)

NAME/BUSINESS NAME: _____

STREET ADDRESS: _____

CITY/TOWN/VILLAGE: _____ ZIP: _____

DAY PHONE: _____ CELL PHONE: _____ HOME PHONE: _____

DO NOT WRITE BELOW THIS LINE

Complaint Number:	Complaint Category:
Date Opened:	Opened by:
Date Closed:	Closed by:
Restitution: Yes _____ \$ _____ No _____	Investigation Case Number:

Please state your complaint clearly and concisely. Provide a factual summary of events. Where appropriate include relevant dates, times and locations as well as the name, address and phone number of any witnesses who may have additional information related to your complaint. (Please use additional paper if necessary.)

Signature: _____ Date: _____