

Miriam E. Rocah
 District Attorney
 Westchester County



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

COMPLAINT FORM

To submit a complaint, please complete and return this form. Clearly and legibly type or hand write your complaint. Enclose COPIES of any supporting materials, including any documents or photographs relevant to your complaint. DO NOT INCLUDE ORIGINAL DOCUMENTS. The COPIES you provide will not be returned. **Items and information submitted with your complaint may be disclosed in court proceedings.** This form and all supporting materials must be submitted to this Office by hand-delivery, postal mail, or electronic mail sent to complaints@westchesterda.net

NOTICE: PURSUANT TO THE PENAL LAW, SECTION 210.45, IT IS A CRIME PUNISHABLE AS A CLASS “A” MISDEMEANOR TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN.

YOUR INFORMATION:

YOUR NAME: _____ DOB: _____
 ADDRESS: _____ TOWN/CITY: _____ ZIP: _____
 HOME #: _____ MOBILE #: _____ EMAIL: _____

SUBJECT INFORMATION: (Person(s) or business(es) whom you are making a complaint about)

(1) SUBJECT NAME: _____ DOB: _____
 ADDRESS: _____ TOWN/CITY: _____ ZIP: _____
 HOME #: _____ MOBILE #: _____ EMAIL: _____

(2) SUBJECT NAME: _____ DOB: _____
 ADDRESS: _____ TOWN/CITY: _____ ZIP: _____
 HOME #: _____ MOBILE #: _____ EMAIL: _____

LAW ENFORCEMENT AGENCY INFORMATION:

Have you reported this complaint to any other law enforcement agencies? YES NO

If yes, please indicate which agencies: _____

DO NOT WRITE BELOW THIS LINE

Date Opened:	Complaint Number:
Date Closed:	Investigation Number:

