

Area: C/S N S Blair	Fremont	Central NE	Shared Living	Other
Date:	or by calling 40		ne Agency website: wolaints should be mai	
Reason for Complaint:				
Has the complaint been reported previously?	?	Yes No		
Is this an anonymous complaint?		Yes No		
If so, to whom was the complaint reported and what was the outcome?				
Does the person want to be contacted regard	ding the outcom	e of the complaint	? Yes	□ No
For administrative use only:				
What was the outcome of the complaint:				
Signature of Administrative Staff			Date:	
Printed Name of Administrative Staff			Date:	