Town of Yorktown Title VI Complaint Form

	COMPLAINANT INFORMATION	
Name (first, middle, and last)		
Address (number and street, city, state and ZIP co	ode)	Transport Same
Home telephone number	Work telephone number	Cellular telephone number
() -	() -	Centinal telephone number
Name of complainant		Date (month, day, year)
PERSON / A	GENCY YOU BELIEVE DISCRIMINATED AG	SAINST YOU
Name (first, middle, and last)	Title	,
Name of company		
Address (number and street, city, state and ZIP co	de)	E
Horne telephone number () -	Work telephone number	Cellular telephone number
When was the last alleged discriminatory	act? (month, day, year)	
Complaints of discrimination must be file discrimination occurred more than 180 da	d within 180 days of the date of the alleged lys ago, please explain your delay in filing t	discriminatory act. If the alleged act of his complaint.
		*
		*
The alleged discrimination was based on: Race Color	Gender	ility
Describe the alleged act(s) of discriminati	on. (Use additional pages, if necessary.)	17.000/3/3157

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Name of complainant			Dale (Moriul, day, year)
Provide the names of any individ	duals with additional information	on regarding yo	our complaint:
Name of witness 1 (first, middle, and la	st)	Title	
Name of company			
Address (number and street, city, state	and ZIP code)		i.
	Work telephone number		Cellular telephone number
Home telephone number () -	() -		() -
Include a brief description of the re	levant information the witness ma	ay provide to su	pport your complaint of discrimination.
Name of witness 2 (first, middle, and le	ist)	Title	
Name of company	- A- 41		
Address (number and street, city, state	and ZIP code)		A 45/10 - 60-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41 - 10-41
			Cellular telephone number
Home telephone number () -	Work telephone number	г	() -
Name of witness 3 (first, middle, and le	ast)	Title	
Name of company	All All Control of the Control of th		
Address (number and street, city, state	e and ZIP code)		
Home telephone number	Transaction of the second		
	Work telephone numbe	;r	Cellular telephone number
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