

COMPLAINT FORM

Your Contact Information	
Date:	
Name:	
Phone Number:	Email:
Employer:	Title:
Complaint information	
Name of Court or functional area:	
Location:	
Name of Person(s):	
Title of Person(s):	
Please describe below the nature of the complaint:	
Have you reported your complaint to another entity or law enforcement agency who is currently conducting an investigation?	

Please attach supporting documentation as applicable.

PLEASE NOTE: If your complaint is related to the outcome of a court case and involves a judge, attorney, or other licensed or regulated individual, you will be referred to the appropriate oversight or regulatory body for determination of probable cause. Please refer below if your complaint relates to one of the following regulated positions:

- Judge – Judicial Qualifications Commission <https://floridajqc.com> 850-488-1851
- Lawyer – Florida Bar <https://www.floridabar.org/public/acap/> 1-866-352-0707