

Charitable Gaming Division 101 E. Hillsdale, Box 30023 Lansing, Michigan 48909 (517) 335-5786 www.michigan.gov/cg

COMPLAINT RECORD

PLEASE FILL IN COMPLETELY

| License Number/Licensee Name | | Complainant Name | |
|------------------------------|--------|------------------------|----------------------------|
| Playing Address | | Telephone Number (Day) | Telephone Number (Evening) |
| City and ZIP Code | County | Address | |
| Date of Incident | | City and ZIP Code | County |

Details of Complaint: (Please include names of any workers or chairpersons involved. Attach additional sheets if necessary.)

I CERTIY that I am at least 18 years of age, I have examined this statement and there is no misrepresentation or falsification in the information stated or attached. I FURTHER CERTIFY that I am aware that false or misleading statements will be cause for rejection or revocation of this investigation. I acknowledge that anything I submit, including my name, may be disclosed to a requester under Michigan's Freedom of Information Act, MCL 15.231 *et.seq.* Signature Date MAIL TO: CHARITABLE GAMING DIVISION, P.O. BOX 30023, LANSING, MI 48909

EMAIL:CG-Additional-Info@michigan.govFAX:(517) 267-2285

