



Complaints Forwarding Format

Details of the Complainant	Details of the Location of Complaint
Name of the Complainant : Address : Contact Number :	District : Divisional Secretariat : GramaNildhari Division : Local Authority : Police Division :
Details of the Complaint :	
Complaint number of previous complaints(If any): (Attach relevant documents)	
Road map to reach the relevant place :	
Complainant's Signature: Date:	

For office Use Only:

Complaint Number: