

"Linking People, Communities and Services"

Complaint Form AD005

Today's Date:	
Complainant's Name:	
Phone Number and/or Email:	
Date of Incident:	
Summary of Complaint Incident:	
Explain actions taken to resolve complaint:	
Signature of Complainant	Date



NATION We would like to acknowledge that we are on Ktunaxa ?amak?is, the territory of the Ktunaxa people