Title VI Complaint Form: Vintage House

Section I:					
Name:					
Address:					
Telephone (Home):			one (Work):		
Electronic Mail Address:					
Accessible Format	Large Print		Audio Tape		
Requirements?	TDD		Other		
Section II:					
Are you filing this complaint on your own behalf?			Yes*	No	
*If you answered "yes" to this q	uestion, go to Section II	l.			
If not, please supply the name a	and relationship of the p	erson for			
whom you are filing on behalf o	f:				
Please explain why you have fil	ed for a third party:		1		
Please confirm that you have o	btained the permission	of the	Yes	No	
aggrieved party if you are filing	on behalf of a third part	y.			
Section III:					
I believe the discrimination I experienced was based on (check all that apply):					
[] Race [] Color	[]	[] National Origin			
Date of Alleged Discrimination (Month, Day, Year):					
	(Month, Day, Year):		_		
Explain as clearly as possible wagainst. Describe all persons wagerson(s) who discriminated agany witnesses. If more space is	hat happened and why ho were involved. Inclu- ainst you (if known) as	de the na well as na	me and contact infor ames and contact inf	mation of the	
against. Describe all persons w person(s) who discriminated ag	hat happened and why ho were involved. Inclu- ainst you (if known) as	de the na well as na	me and contact infor ames and contact inf	mation of the	
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Section IV					
Have you previously filed a Title VI complaint with the	is agency?	Yes	No		
Section V					
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?					
[] Yes [] No					
If yes, check all that apply:					
[] Federal Agency:					
[] Federal Court	[] State Age	ncy			
[] State Court	ourt [] Local Agency				
Please provide information about a contact person at the agency/court where the complaint was filed.					
Name:					
Title:					
Agency:					
Address:					
Telephone:					
Section VI					
Name of agency complaint is against:					
Contact person:					
Title:					
Telephone number:					
You may attach any written materials or other inform	nation that you	, think are releva	at to vour		
complaint.	iation that you	i lillik ale leleva	ii to youi		
Signature and date are required below to complete f	orm:				
Signature		Date			
Please submit this form in person or mail to the addr	ress below:				
VINTAGE HOUSE 264 1st Street Fast					

Sonoma, CA 95476