

### Office of Arizona Attorney General

# Mark Brnovich



#### Victim Rights Complaint

Please complete the form as completely as possible. For questions regarding the form or victims' rights, contact the Office of Victim Services or the Sate Victims' Rights Administrator for Compliance at (602)542-4911. Para asistencia en español, por favor llame al 602-542-4911.

Date received:		Case	Case Number:	
Your Information			Agency(s) of Complaint	
Name:		Name	Name:	
Address:		INdille		
City:		Staff	Staff Involved:	
State:			111VOIVCOI	
Zip:		Dlaga	Phone(s):	
Phone:		Phon		
			·	
Complaint Information:				
County:		City:	:	
Have you	addressed this matter with the ager	ncy or staff	f involved? (Yes or No)	
	n ongoing criminal case or investiga nat are you case numbers, if known?		restigation? (Yes or No)	
Police Report Number(s):				
Court Report Number(s):				
What is the defendant's name?				
What is the date of the crime(s)?				
How would	I you like the Office of Victim Service	es to help	you?	



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#### Victim Rights Complaint Continued

How did you learn about the Office of Victim Services?			
Please list specific victims' rights you feel were violated: (Title 13, Chapter 40)			
Summary or additional information:			

Please note: filing a complaint does not guarantee a full investigation. Please allow two weeks to receive a response.

To send in complaint and additional information, mail to:

Office of Victim Services 2005 N Central Avenue Phoenix, AZ 85004