

PUBLIC COMPLAINTS LODGING FORM

COMPLAINANT'S DETAILS (information given is voluntaryyou have an option of ANONYMITY)							
Name:							
ID Number:	ID Number:			ysical Address:	:		
Mobile Number:				Email Address:	:		
1. What service(s) are you complaining about?				2. Have you reported this matter to any other public institution/public official?			
				YES	Tick here	NO	Tick here
			If YES, which one(s) – Name the office?				
3. Has/is this matter (been) a subject of court?							
	YES	Tick her	e			NO	Tick here
4. Give a summary of your complaint, and attach supporting documents, if any (particulars of what happened, where it happened, when it happened and by whom)							
5. What action(s) would you want to be taken?							

SIGN: Sign here... DATE: Write here...

NOTE: Information provided here will **ONLY be used to process your complaint**, and ODPC shall NOT share/disclose this information with a third party. We shall review and get back to you within 21 days. Kindly fold and drop in the complaints box at the reception. For further assistance, email us via **customer.feedback@odpc.go.ke.**

www.odpc.go.ke