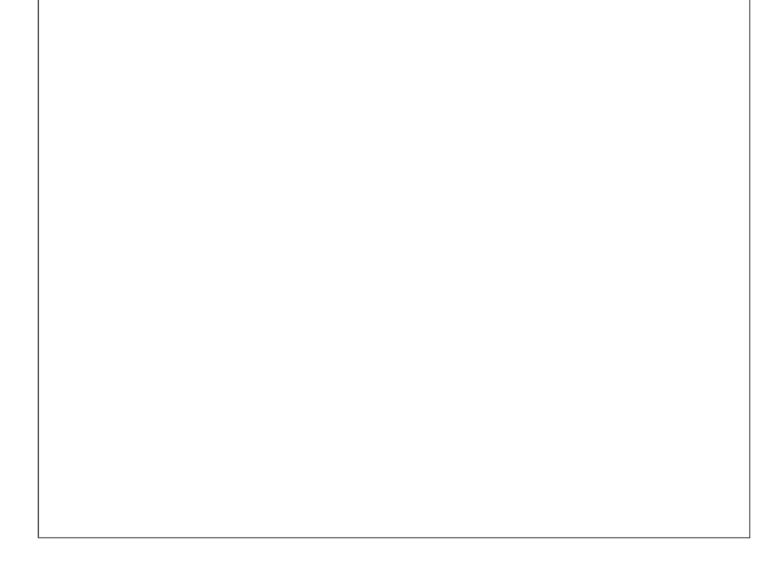
PLTS Complaint Abstract

Last Name	First Name
Telephone	E-mail

In the space provided below, please name the person or persons with whom you have a complaint.

Please describe the complaint in the space provided below. To the best of your ability, please use concrete descriptions, list all witnesses, and use exact quotations in describing the complaint. If additional space is needed, please attach additional pages to this form.



Please attach to this Abstract either a PLTS Mediation Request form or a PLTS Complaint Investigation form.