

## United States Attorney's Office for the Northern District of Texas Civil Rights Complaint Form

The United States Attorney's Office (USAO), in coordination with the Civil Rights Division of the United States Department of Justice, is charged with enforcing the federal civil rights laws throughout the Northern District of Texas. We therefore welcome information from the public that brings to our attention possible violations of our Nation's civil rights laws. The USAO is primarily a litigating office and not an investigative office. The information you provide on this complaint form may be forwarded to the appropriate law enforcement and/or administrative agency at the discretion of this office.

Person filing complain	nt:	Person/Entity you	are filing complaint about:
Name		Name of Person or Entity	
Address		Address	
Address (Line 2)		Address (Line 2)	
City, State	Zip	City, State	Zip
County	Phone	County	Phone
email:		email:	
Nature of Alleged Civil R complaint):  [ ] Credit/Lending Opport [ ] Disability Rights or Ac [ ] Educational Opportuni [ ] Employment Discrimin [ ] Hate Crime [ ] Housing Discriminatio [ ] Human Trafficking [ ] Law Enforcement Mis [ ] Military/Veteran Status [ ] Prisoner or Institutiona [ ] Race/National Origin [ ] Religious Liberties [ ] Voting Rights [ ] Other:	tunities ccess ties nation* n conduct	se check specific area(s	) that apply to your

<sup>\*</sup>Note: "Employment Discrimination" includes Immigration Related Unfair Employment Practices

Please clearly describe the violation of the civil rights laws that you would like to bring to our attention. Include as much information as possible, including the date, place, nature of incident, and contact information for any witnesses (please include copies of supporting documentation, but do not send original documents):		
<a href="#">Attach additional page(s) if necessary&gt;</a>		
from, a policy, pattern, or practice on the	rights described in this complaint is part of, or results part of the person or entity named above? If so, please detail and identify others who you believe were subjected	
Are you represented by an attorney in thi If yes, please provide the name of the attorne Name		
Have you filed a lawsuit concerning this n		
	ter with any other federal, state, or government agency?  y, contact person, phone number, and status of the complaint.	
complaint we receive, be assured that we will carefully violation of the federal civil rights laws may have occu the United States Attorney's Office or another agency has	concerned members of the public prevents us from responding to every consider the information you have provided us to determine whether a arred and, if so, whether the United States Department of Justice through as enforcement authority with respect to such a violation. This Office has otential violation of federal civil rights laws that would be within the iferred to another agency for investigation.	
have. By submitting this complaint, you have not co	n any statute of limitations that might apply to any claim you may mmenced a lawsuit or other legal proceeding, and this office has not believe your civil rights have been violated and you intend to sue for attorney.	
Signature:	Date:	

Mail your completed complaint form along with any supporting documentation to:

U.S. Attorney's Office for the Northern District of Texas Attn: Civil Rights Coordinator 1100 Commerce Street, Suite 300 Dallas, Texas 75242