



Please list any and all witnesses' names, phone numbers and email addresses:

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What type of remedy would you suggest?

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Have you ever filed a complaint with any other federal, state or local agency; or with any federal or state court? \_\_\_ Yes \_\_\_ No

If yes, which court or agency? \_\_\_\_\_

Please attach any documents or other information that you believe is relevant to your complaint. Please sign, date and send your complaint to:

**Teresa Kanneberg, County Administrator / Title VI & ADA Coordinator**  
**Perry County Courthouse**  
**2219 Payne Street**  
**Tell City, IN 47586**

Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_