



**United States Attorney's Office**  
*Northern District of California*

## 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 California. 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 federal, state, or local law enforcement and/or administrative agency at the discretion of this office.**

<u>Person filing complaint</u>	<u>Person/Entity you are filing complaint about</u>
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 Rights Violation (please check specific area(s) that apply to your complaint):**

- |                              |                               |                      |
|------------------------------|-------------------------------|----------------------|
| Abortion Clinic Access       | Housing Discrimination        | Race/National Origin |
| Credit/Lending Opportunities | Human Trafficking             | Religious Liberties  |
| Disability Rights or Access  | Law Enforcement Misconduct    | Voting Rights        |
| Educational Opportunities    | Military/Veteran Status       | Other:               |
| Employment Discrimination**  | Prisoner or Institutionalized |                      |
| Hate Crime                   | Person Rights                 |                      |

\*\*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):**

<Attach additional page(s) if necessary>

**Do you believe that the violation of civil rights described in this complaint is part of, or results from, a policy, pattern, or practice on the part of the person or entity named above? If so, please describe the policy, pattern, or practice in detail and identify others who you believe were subjected to the same or similar treatment:**

**Are you represented by an attorney in this matter?**    Yes    No

If yes, please provide name of attorney, address and phone number.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**Have you filed a lawsuit concerning this matter?**    Yes    No

If yes, please provide the case name, court in which the case was brought, and the status of the case.

**Have you filed a complaint about this matter with any other federal, state, or government agency?**

Yes    No    If yes, please list the agency, contact person, phone, and status of the complaint.

**As noted above, we may share the information you provide on this form with other government offices. Do you consent to also having your information released outside the government?**

Yes    No

Although the volume of information we receive from concerned members of the public prevents us from responding to every complaint submitted, be assured that we will carefully consider the information provided to determine whether a potential violation of the federal civil rights laws has occurred. If a potential violation has been identified, the appropriate enforcement authority will be assigned. This Office has the discretion to determine jurisdiction and/or provide a referral to another agency for investigation.

**\*\*\*SUBMITTING A COMPLAINT TO THIS OFFICE HAS NO EFFECT ON ANY STATUTE OF LIMITATIONS THAT MIGHT APPLY TO ANY CLAIM YOU MAY HAVE. BY SUBMITTING THIS COMPLAINT YOU HAVE NOT COMMENCED A LAWSUIT OR OTHER LEGAL PROCEEDING, AND THIS OFFICE HAS NOT INITIATED A SUIT OR PROCEEDING ON YOUR BEHALF. IF YOU BELIEVE YOUR CIVIL RIGHTS HAVE BEEN VIOLATED AND YOU INTEND TO SUE FOR MONEY OR OTHER RELIEF, YOU SHOULD CONTACT A PRIVATE ATTORNEY.**

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

Mail or e-mail your completed complaint form, along with any supporting documentation to:

**Civil Rights Coordinator, Civil Division**  
**United States Attorney's Office, Northern District of California**  
**450 Golden Gate Avenue, 11th Floor**  
**San Francisco, California**  
[USACAN.CivilRights@usdoj.gov](mailto:USACAN.CivilRights@usdoj.gov)