

**L**<sub>AKE</sub> **C**<sub>OUNTY</sub> **P**<sub>EG</sub> **T** **V**  
**CHANNEL 8**  
lcptv@hotmail.com  
**COMPLAINT FORM**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone #** \_\_\_\_\_

**Nature of Complaint** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Office Use Only**

**Recieved By** \_\_\_\_\_

**Date** \_\_\_\_\_

**Board Reviewed** \_\_\_\_\_

**Date** \_\_\_\_\_

**Action Taken** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_