

COMPLAINT/GREIVANCE FORM

Member being complained about: _____ or Unit #: _____

Has a co-operative rule been broken? **Yes** **No** **Don't know**

Please cite the rule if known: _____

Details of the incident/complaint: (Please describe your complaint. Include the date, time and place of the incident if applicable. Use a separate piece of paper if you need more space.)

Was there damage to property? **Yes** **No** **Don't know**

If yes, describe:

Witnesses (please include their unit #):

What result are you hoping for?

Sign here: _____ Date: _____

Print your name: _____ Unit #: _____ Telephone: _____

Submit completed form to the Board of Directors by placing in the secure mailbox on the west side of the community building. The grievance procedure may be used to help resolve your dispute.