

CITIZEN COMPLAINT FORM



USE THIS FORM TO MAKE A COMPLAINT TO THE POLICE IF YOU BELIEVE THAT AN OFFENCE HAS BEEN, IS BEING OR MAY BE COMMITTED UNDER THE *NUNAVUT ELECTIONS ACT*.

YOUR CONTACT INFORMATION (Fields marked ♦ are mandatory)

YOUR COMMUNITY♦

YOUR FULL NAME♦

HOME ADDRESS♦

HOUSE/APT #

STREET

MAILING ADDRESS♦

PO BOX

POSTAL CODE

DAYTIME PHONE NUMBER♦ ()

EVENING PHONE NUMBER ()

EMAIL ADDRESS

COMPLAINT SUMMARY♦

Please give a summary of your complaint. Provide details about the events and when you became aware of these events. Attach any relevant documentation you may have. Further details may be requested from you later.

- Who are you complaining about? _____
 - When did it happen? _____
 - Where did it happen? _____
 - What happened? _____
- _____
- _____
- _____
- _____

SUBMITTING COMPLAINT

Your complaint must be submitted to the Royal Canadian Mounted Police (RCMP) within 90 days after you became aware of the offence. You can bring it to your community's local RCMP detachment or send it to:

'V' Division Criminal Operations
 PO Bag 500
 Iqaluit, NU X0A 0H0

fax: 867.975.4438

***Privacy Statement:** The information in this form is collected under the authority of the Nunavut Elections Act. The information will only be used for elections, by-elections and plebiscites. Questions can be directed to: Chief Privacy Officer, Elections Nunavut: privacy@elections.nu.ca or call 800.267.4394.*