

**Santa Barbara Arts & Crafts Show
COMPLAINT**

Please print. Attach extra sheets if needed.

Day: _____ Date: _____ Time: _____

Exact Location: _____

Issued to: _____

Address: _____

Rule(s) allegedly violated: _____

Complainant's Signature: _____ Print name: _____

Address: _____ Phone #: _____

Description of Incident: (Please state facts only) _____

Witness Signature: _____ Print name: _____ Phone # _____

Witness Signature: _____ Print name: _____ Phone # _____

Return to:
Parks and Recreation
Arts and Crafts Show Office
100 East Carrillo St.
Santa Barbara, CA 93101

Office use only:

Monitor's Comments: _____

Monitor's Signature: _____ Date: _____

Recreation Supervisor's Signature: _____ Date: _____