Complaint Form

The Office of Inspector General accepts anonymous complaints; however, the investigative process is significantly improved when investigators and complainants are in communication. Please provide as much information as you can. Additional instructions are available on page 2.

Contact Infor	mation		
Name	::		
Affilia	tion:		
	☐ Florida Lottery Employee	☐ State of Florida Employee	
	☐ Florida Lottery Retailer	$\hfill \square$ Employee of a Florida Lottery Retailer	
	☐ State of Florida Contractor	$\hfill\Box$ Employee of a State of Florida Contractor	
	☐ Concerned Citizen		
Addre	ess:		
Phone	2:		
	:		
	orted this issue to another individu		
	hich office and date:		
, ,			
Complaint			

Complaint Form Instructions

Please provide the following types of information in the complaint area of the form:

- Information known about the subject of the complaint (e.g. name, address, position or title);
- Specific act of wrongdoing; what specifically did the person do or not do?
- Specific dates or times and locations of when the event(s) occurred;
- Names and contact information of any witnesses;
- Documents we should seek out and their location;
- Amount of money in question or at stake; and
- Any other information which may assist investigators.

The Complain Form and any additional documentation that supports your complaint can be submitted to the Florida Lottery Office of Inspector General by mail, fax, phone or e-mail.

Office of Inspector General Florida Lottery 250 Marriott Drive Tallahassee, FL 32399-6573

E-mail: <u>ig@flalotttery.com</u> Phone #: 850-487-7726 Fax #: 850-487-7746