

VILLAGE OF ELMWOOD

P.O. BOX 62, 113 WEST E STREET, ELMWOOD, NE 68349

PHONE/FAX 402-994-6705

villageofelmwood@msn.com

COMPLAINT FORM

Please list your name, address, telephone number, and the specific complaint. The item will be reviewed and possibly scheduled for a future Village of Elmwood board meeting or forwarded to Village staff for appropriate action.

Full Name: _____ Phone: _____

Address: _____
(Street) (City) (State) (Zip Code)

Date of Complaint: _____

Description of Complaint: _____

(Signature) (Date)

For Office Use Only

Action Taken: _____

Placed on Agenda for the ____/____/____ Village Board Meeting

Village Staff Action: _____

(Staff Signature) (Date)