PROVIDER COMPLAINT FORM

Current Date:

Complaint # (Mike S assigned):

Two options for providing this information:

1) Download form, fill it out, save it and attach it to email and send to **sljurkovic@co.trumbull.oh.us**
2) Print, complete the form, and return mail to:

Trumbull County Senior Levy
Services 2959 Youngstown Rd SE
Warren, Ohio 44484

Or call

(330) 675-2873 or (330) 675-7846, leaving a message if the call is not answered. Return call will be made during normal business hours.

Complainant's name:

Address:

Date of Complaint:

Phone number where you can be reached:

Best time to call:

Service Provider of which this complaint is regarding
(Direct Name of Service Provider if known):

Please fully describe your complaint or issue with the provider/personnel:

Signature Date