

## **Citizens Settlement Program Complaint**

You will need to file 3 copies of the complaint form with the court when filing, with a self-addressed stamped envelope.

Fill in the blanks on the form. You are the Complainant and they are the Respondent. Fill in a brief description as to why you wish to have a mediation hearing. Be sure to sign your complaint.

**CITIZENS SETTLEMENT PROGRAM  
IN THE FINDLAY MUNICIPAL COURT  
FINDLAY, OHIO**

**CITIZENS SETTLEMENT  
PROGRAM COMPLAINT**

Case Number \_\_\_\_\_

\_\_\_\_\_  
Complainant's Name

\_\_\_\_\_  
Respondent's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State Zip Code

\_\_\_\_\_  
City, State Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Phone Number

SETTLEMENT DESIRED: \_\_\_\_\_

NATURE OF CLAIM:

\_\_\_\_\_  
Complainant's Signature