

Butler County Health Department

1619 North Main
Poplar Bluff, MO 63901-3499
Fax: (573) 785-2825

In-Home Services

573-785-0131

Advanced Personal Care
Homemaker/Chore
Nursing
Personal Care
Private Pay
Respite Care

Public Health Services

573-785-8478

Communicable/Chronic Diseases
Environmental Sanitation
Family Planning
Health Education
Healthy Child & Youth
Immunizations
Nursing
STD/HIV Testing
WIC



Public Health
Prevent. Promote. Protect.

CITIZEN'S COMPLAINT FORM

(Check One) **Food Complaint** **Sewage Complaint** **Other Complaint**

Complainant (Your Name)

Name _____
Address _____
City _____
Phone (____) ____ - _____

Complaint is Against

Name _____
Address _____
City _____
Phone (____) ____ - _____

Nature of Complaint: (Date, Time, Item Complaint is Against, Manager Spoken With, etc.)

Be assured that your complaint will be investigated within 15 days, if at all possible. If sufficient evidence is **not** detected to determine that a law, rule or regulation has been violated, this complaint will be marked '**Insufficient Evidence**' with no further actions being taken at that time.

This complaint may result in civil and or criminal court action being taken against the person or persons named in this complaint. As the Complainant, you must agree to cooperate with the County Prosecuting Attorney, the County Health Department and the Missouri Department of Health and Senior Services in cases where prosecution or other court actions take place. Your signature is required on this complaint form.

This complaint will become a matter of public record. This complaint can and will be shown to concerned citizens who request, in person the contained information by signing a request form to view the file. This information will not be given out by telephone or outside the office the files are kept.

I have read the above terms and understand and ACCEPT my obligation as the complainant and do hereby submit this complaint.

Signed _____ **Date** _____

This form may be mailed or dropped off at the Butler County Health Department. If you are unable to print, copies of this form are available at the Butler County Health Department.