

## Hotline Complaint Form

Use this form to aid your complaint submission. Once completed, please submit it along with any additional supporting information via email to **report@sigpr.treasury.gov**. **In lieu of this form**, you may phone in your complaint to **202-927-7899**. Prior to submitting your complaint, please review the hotline information on the **SIGPR website**.

**NOTE:** While completing all information fields is not required, though those marked by a red asterisk (\*) are strongly recommended. If you wish to elect anonymity or confidentiality, please select the appropriate options within Part I and follow the related instructions.

### PART I - Your Information (\*=Required Field)

\*CHOOSE ONE OF THE FOLLOWING THREE OPTIONS

**Please keep in mind that your decision to elect anonymity or confidentiality may limit SIGPR's ability to conduct a complete investigation or take further action if warranted.**

- I wish to remain anonymous** (If you select this option, do not identify yourself below)
- Keep my identity confidential** (Provide contact information below in the event we need additional information)
- I waive confidentiality** (My name may be released to another entity or OIG if determined not to be within SIGPR jurisdiction or during the course of an investigation, audit or other official action.)

**LEAVE THE FOLLOWING FIELDS BLANK ONLY IF REQUESTING ANONYMITY. OTHERWISE, PLEASE COMPLETE AS MUCH CONTACT INFORMATION AS YOU ARE COMFORTABLE PROVIDING:**

Name (First and Last)

Mailing Address 1

Mailing Address 2

City

State

Zip Code

Telephone (include area code)

E-mail Address

I am willing to be interviewed.

Yes  No

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**PART II - Details of Your Allegation** (\*=Required Field)

\*Describe what the individual(s) did that was wrong. Provide specific and relevant details concerning the alleged misconduct or wrongdoing. When did the misconduct or wrongdoing occur? Please provide the specific dates and times, if possible.

\*Where did the misconduct or wrongdoing occur? Please provide the city and state. If the misconduct involved a bank or lending facility, please include its name and location.

\*Do you know of efforts made thus far to correct the problem and/or the current status of the problem?

\*Who else have you provided these allegations to? (e.g. Congress, another inspector general's office, supervisor)

\*Who committed the alleged misconduct/wrongdoing? Include the full name and title/position.

\*If providing information concerning contractor or grantee fraud, please provide the name of the primary contractor or subcontractor, type of contract, contract or grant numbers, the date of award, and name of agency official(s).

\*Where can we obtain additional information concerning this misconduct/wrongdoing? (e.g. supporting documentation, etc.) Additionally, who else might be aware of this misconduct/wrongdoing? Please provide names and contact information of any witnesses who may have more information. Explain how these individuals would possess more information and their relationship to the alleged problem.