

## OCA COMPLAINT FORM - OBSERVATORY

DATE and TIME:	ESTABLISHMENT:	
COMPLAINT: (please indicate factually what you witnessed)		
ACTION TAKEN:	Spoke to establishment manager	Outcome:
	Called Woodstock SAPS	Ref No Obtained: Name of Officer taking complaint:
	Called Sector Manager	Outcome:
	Called 107 Law Enforcement	Ref No Obtained:
	Sent reference numbers to carolyn@neville.za.net for recording	Yes / No
PHOTOS OR EVIDENCE: (All photos must be date, time and location stamped)		
NAME OF COMPLAINANT:		CONTACT DETAILS:
Do you wish your details to remain confidential?		Yes                      No