

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
Office for Civil Rights
U.S. Department of Health & Human Services
200 Independence Avenue, S.W.
Room 509F, HHH Building
Washington, D.C. 20201
Subject: Complaint Regarding [Brief Description of the Issue]
Dear Sir/Madam,
I am writing to formally submit a complaint regarding [briefly describe the issue or violation, e.g., discrimination, privacy violation] that I experienced on [date] at [location or institution involved].
Details of the Complaint:
1. **Description of the Incident:**
- [Detail the incident, including what happened, who was involved, and any relevant dates.]
2. **Violation of Rights:**
- [Specify the rights you believe were violated and the applicable laws or regulations.]
3. **Impact:**
- [Explain how the incident has affected you or others.]
4. **Supporting Information:**
- [Include any evidence or documentation that supports your complaint, such as emails, photographs, witness statements.]
Resolution Sought:
I would like to request [state what you want as a resolution, e.g., an investigation, policy change, compensation].
Thank you for your attention to this matter. I look forward to your prompt response.
Sincerely,
[Your Name]
[Your Signature (if sending a hard copy)]