



Mail Theft and Vandalism Complaint

1. Post Office (Including Station or Unit and ZIP + 6)

2. Name of Complainant

Street Address	Apt. No.	Home Telephone (Include Area Code)
City, State, and ZIP + 4		Work Telephone (Include Area Code)

3. Nature of Complaint

Theft of Mail
 Damage to Mailbox
 Mail Tampering
 Mail Rifling
 False Change of Address

Fire in Mailbox
 Other (Describe)

Occurrence Date and Hour

4. Contents of Mail Stolen

Correspondence
 Currency
 Check
 Bank Statement
 Credit Card
 ATP (Food stamps card)

Credit Card Statement
 Other (Describe)

5. Type of Delivery

Apt. House; No. of Families _____
 Private Home
 P.O. Box
 Rooming House
 Office Building
 Rural or HCR

Hotel/Hospital
 Other (Describe)

6. Type of Receptacle

Door Slot
 NDCBU
 Approved Apartment Panel
 Collection
 Residence
 Locked? Yes/No

Desk Service
 Rural Type
 Combination

7. Particulars of Stolen Check

01) Personal
 02) Commercial
 03) Local
 04) State
 05) Federal
 06) Money Order
 07) ATP

Sender's Name and Address

Payee (If different from complainant)

Amount \$	Check No.	Date	Symbol No. (If U.S. Treasury)
Maker of Check		Bank on Which Drawn	

8. Purpose for Which Check Issued

9. If Check or Money Order Was Cashed, Obtain Particulars (Date, place, person accepting it, etc.)

10. Suspects (Name, address, physical description, car description and license no.)

11. Were Police Notified?

Yes (If "Yes," give Police Report No.: _____)
 No (If "No," instruct complainant to do so.)

12. Remarks (Continue on reverse, if necessary)

13. Date of Complaint 14. Complaint Received By (Signature)