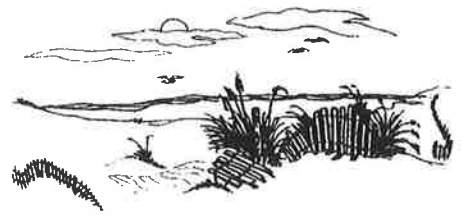


Town of Porter



On Beautiful Lake Michigan

COMPLAINT REPORT

Date: _____

Time: _____

Name: _____

Address: _____

Phone: _____

Location of Complaint:

Reason for Complaint:

Message Taken By: _____