

COMPLAINT FORM

Office Use Only							
Date Recd.	Recd. By	Log No.					

Texas Racing Commission

Post Office Box 12080, Austin, TX 78701-2080 Customer Service: 512-833-6699 Email: Customer.Service@txrc.texas.gov

- This document constitutes a formal complaint against a Texas Racing Commission licensee for a violation of the Texas Racing Act or a Commission rule.
- It may result in disciplinary action being taken against the licensee.
- The information provided should be accurate and subject to verification by the Commission.
- A licensee who files a false complaint is subject to disciplinary action by the Commission.
- Please print legibly or type the information below.

Subject of Complaint

First Name			Last Name			TxRC License #			
Address - If known (Street, City, State, Z	Zip)			Tel	ephone Number)		Fax Numbe	91
Rules Violated:	§	§		§		\$	§		§
Please describe the facts and circumstances of the violation. Be as specific as possible, giving names, addresses and dates if possible. Attach an additional page if necessary.									

Complainant Information (Omit if you wish to remain anonymous)

First Name	Last Name		TxRC License #
Address (Street, City, State, Zip)		Telephone Number ()	Fax Number ()
Signature			Date