



## **TITLE VI COMPLAINT FORM**

Title VI of the 1964 Civil Rights Act requires that “No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.” If you feel you have been discriminated against in transit services, please provide the following information in order to assist us in processing your complaint and send it to:

Pacific Transit System  
Attention: Title VI Coordinator  
216 2<sup>nd</sup> Street Raymond, WA 98577  
Phone: (360) 875-9418 Fax: (360) 942-3193

**Please print clearly:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (message)

Person discriminated against: \_\_\_\_\_  
(If different from above)

Mailing Address of person discriminated against: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Please indicate why you believe the discrimination occurred:

- \_\_\_\_\_ race or color
- \_\_\_\_\_ national origin
- \_\_\_\_\_ income
- \_\_\_\_\_ other

What was the date and time of the alleged discrimination? \_\_\_\_\_

