

# KENTUCKY COURT REPORTERS ASSOCIATION

P.O. BOX 11966  
LEXINGTON, KENTUCKY 40579

This complaint form is to be used for the purpose of filing a complaint against a court reporter who is a member of the Kentucky Court Reporters Association.

Please print or type the requested information and be as specific as possible. If you need more space for any section of this complaint, use additional sheets and indicate which section you are referring to. Please be aware that a copy of your complaint form and documentation may be forwarded to the alleged violating member.

Mail your completed notarized form and all supporting documentation to:

RE: CONFIDENTIAL COMPLAINT  
Kentucky Court Reporters Association  
Post Office Box 11966  
Lexington, Kentucky 40579

Upon receipt of this complaint, the Board will review the complaint and any supporting documentation, on its face. The Board will then, either at a special meeting or at its next scheduled meeting, determine whether to (1) require the alleged violating member to answer the complaint, or (2) dismiss the complaint without further action.

After receiving the alleged violating member's answer to the complaint, the Board may decide to hold an administrative hearing on the complaint. If an administrative hearing is scheduled, your attendance and your witness's attendance, testimony, and active participation may be required.

# COMPLAINT FORM

Date Filed \_\_\_\_\_ Date of alleged violation \_\_\_\_\_

## COMPLAINING PARTY INFORMATION

\_\_\_\_\_  
Your Name

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

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

Check the box which most accurately describes you:

Attorney     Court Reporter     Public     Other

## ALLEGED VIOLATING MEMBER INFORMATION

\_\_\_\_\_  
Name

\_\_\_\_\_  
Certification No. (if known)

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

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

State exactly what the alleged violating member has done or has not done which causes you to make this report, and specify pertinent dates. Use additional paper if necessary. Please attach any documents which will help describe the problem.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you discussed this problem with the court reporter? If so, when did you talk with him/her last?

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How would you like this complaint resolved? What do you want the Board to do?

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Please list the names and addresses of any witnesses and state the nature of the testimony you would expect each to offer. Use additional sheets if necessary.

Witness 1:

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Name

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Mailing Address

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City State Zip Code

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Telephone

Email

Nature of Testimony: \_\_\_\_\_

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Witness 2:

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Name

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Mailing Address

---

City State Zip Code

---

Telephone

Email

Nature of Testimony: \_\_\_\_\_

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Witness 3:

\_\_\_\_\_  
Name

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

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

Nature of Testimony: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please be aware that a copy of this complaint may be forwarded to the alleged violating court reporter for his/her response.

STATE OF KENTUCKY

COUNTY OF \_\_\_\_\_

I do solemnly swear or affirm that the facts set forth in the above Complaint are true.

\_\_\_\_\_  
Complainant

Sworn to and subscribed before me on this date: \_\_\_\_\_

I have hereto attached my signature and seal.

\_\_\_\_\_  
NAME  
NOTARY PUBLIC  
STATE OF KENTUCKY

Mail to: RE: CONFIDENTIAL COMPLAINT  
Kentucky Court Reporters Association  
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Lexington, Ky 40579