SUPERIOR COURT OF CALIFORNIA
COUNTY OF BUTTE
JUVENILE COURT-APPOINTED ATTORNEY
COMPLAINT FORM

The Superior Court of California, County of Butte appreciates you taking the time to advise us of your complaint. We encourage you to notify us of your complaint as soon as possible. Our staff is committed to responding to your concerns in a prompt and thorough manner.

Attached is a set of questions that will help us better understand the nature of your complaint. Please complete the attached form and return to:

Superior Court of California, County of Butte
One Court Street
Oroville, CA 95965

Your complaint will be reviewed in accordance with our complaint processing policy.

Below is some additional information that may help you understand the complaint process:

1. Submitting a complaint through the use of the attached form is not an appeal for a review or reversal of court orders or judgments that have been made in your case. The Presiding Judge (or his or her designee) cannot comment on another judicial officer's exercise of judicial discretion. If you are dissatisfied with the outcome of your case, you may wish to consult with an attorney who can give you advice regarding the appeals process.

2. Upon receipt of your complaint, the court will:

    - Review your complaint
    - Determine whether your complaint is a matter that can be addressed by this complaint process
    - Provide you with a written response to your complaint

COMPLAINT FORM

Please complete the following items to help us better understand your complaint. This form will not be placed in your court case file.

Today's Date: _____

Name (please print clearly): _____

Address: _____

Telephone Number: _____

Attorney's Name: _____

Attorney's Telephone Number: _____

This complaint is about (check one):

☐ Court-Appointed Attorney (please provide name) _____

☐ Other (please specify) _____

Name of Case and Case Number: _____

Is the case still pending? ☐ Yes ☐ No

When did the action about which you are concerned happen?

☐ Within the last month
☐ Within the last three months
☐ Within the last year
☐ More than one year ago

What is your complaint? Please be specific and provide relevant dates and names of others present (use additional pages if necessary).

What other information do you think is important for us to know (use additional pages if necessary)?

_____ _____

Signature Date

_____

Print name

(Unsigned or anonymous complaints will not be investigated)