



**OFFICE OF THE DISTRICT ATTORNEY  
COUNTY OF SHASTA**

**BUREAU OF INVESTIGATION  
REAL ESTATE FRAUD UNIT**

**COMPLAINT FORM**

**I declare I have a complaint against:** \_\_\_\_\_

Your Full Name: \_\_\_\_\_

2. Your Date of Birth: \_\_\_\_\_

3. Residence Address: \_\_\_\_\_  
\_\_\_\_\_

4. Telephone Number: \_\_\_\_\_

5. Occupation: \_\_\_\_\_

6. Business Address: \_\_\_\_\_

7. Business Telephone Number: \_\_\_\_\_

8. Full Name of Suspect: \_\_\_\_\_

9. Suspect's Address: \_\_\_\_\_  
\_\_\_\_\_

10. Suspect's Telephone Number: \_\_\_\_\_

11. Business Name: \_\_\_\_\_

12. Business Address: \_\_\_\_\_  
\_\_\_\_\_

13. Business Telephone Number: \_\_\_\_\_

14. General nature of your complaint (check all that apply):

- Real Estate Transaction                       Identity Theft                       Forgery
- Mortgage/Loan Fraud                       Foreclosure Scam
- Theft of Money or Property
- Other (brief description): \_\_\_\_\_

\_\_\_\_\_

15. Date of transaction: \_\_\_\_\_

16. Describe the type of real property taken (i.e., single family home, condo. Commercial property, agricultural property, etc.): \_\_\_\_\_

\_\_\_\_\_

17. Place where transaction(s) occurred (Address, City, State): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. Value of the property(ies) taken: \_\_\_\_\_

19. Briefly state how those losses were determined: \_\_\_\_\_

\_\_\_\_\_

20. Location of property(ies) taken: \_\_\_\_\_

\_\_\_\_\_

21. Have you or any other victim filed a civil action (lawsuit) in any other court in this matter (if yes, provide copy of court documents and status of proceedings):

\_\_\_\_\_

\_\_\_\_\_

22. Have you consulted or spoken with any private attorney concerning the claim (if yes, name, address and telephone of attorney contacted): \_\_\_\_\_

\_\_\_\_\_

23. Have you filed this complaint with another law enforcement or consumer protection agency (if yes, provide name of agency, address, telephone and contact person):

\_\_\_\_\_

\_\_\_\_\_

24. Have you contacted the suspect(s) or business regarding your complaint and demanded restitution of your funds (if yes, name of person(s) contacted and date(s) of contact): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

25. Have you had a previous business or personal relationship with the suspect(s), firm or controlling person(s) (if yes, indicate nature of relationship, the duration, whom it was with and their contact addresses and telephone numbers):

\_\_\_\_\_

\_\_\_\_\_

26. List names, addresses, and telephone numbers of other individuals who may have further knowledge of this matter. Have you contacted them and when:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

27. If your complaint involves a real estate loan (mortgage), provide the name and address of the mortgage company, lender, broker, escrow company and title company:

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28. Have you given anyone a power of attorney or other authorization to act on your behalf, or handle your affairs (if yes, provide name of person and attach copy of power of attorney): \_\_\_\_\_

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29. Are you willing to appear in court as a witness to this complaint, and truthfully testify to the allegation made in this complaint (if no, provide reason): \_\_\_\_\_

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30. Attach your summary.

31. Attach support documentation (i.e., advertising material, contracts or agreements, cancelled checks (front and back), promissory notes, deeds, deeds of trust, cash receipts, escrow instructions, loan documents, amendments, closing statements, correspondences between you and suspects, all documents which relate to your complaint which are not listed above, copies of civil complaints filed in your behalf or others, etc.

Note: Section 148.5(a) of the California Penal Code states:

*“Every person who reports to any peace officer listed in section 830.1 or 830.2, district attorney, or deputy district attorney that a felony or misdemeanor has been committed, knowing the report to be false, is guilty of a misdemeanor.”*

**I declare under the penalty of perjury under the laws of the State of California that the foregoing statements and photocopies of attached documents are true and correct.**

Date: \_\_\_\_\_

\_\_\_\_\_

**Signature of Complainant**

Please print this completed form and drop off at the address below along with copies of supporting documentation:

SHASTA COUNTY DISTRICT ATTORNEY  
BUREAU OF INVESTIGATIONS-REAL ESTATE FRAUD UNIT  
1355 WEST STREET  
REDDING, CA 96001

Or email:

\* if this button does not work for you, please save the form, attach it and send to [consumerfraud@co.shasta.ca.us](mailto:consumerfraud@co.shasta.ca.us)