



Upper Arkansas Area Council of Governments

3224-A Independence Rd. Canon City, CO. 81212

(719) 275-8350 Fax: (719) 275-2907

www.uaacog.com

Chaffee Custer Fremont Lake

**Upper Arkansas Area Council of Governments
Fremont County Transit/Golden Shuttle
Wet Mountain Valley Community Services
Title II of the American Disabilities Act
Discrimination Complaint Form**

Complaint Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Organization which you believe has committed a discrimination act:

When did this discrimination occur?

Date: _____ Time: _____

Where did the discrimination occur?

Location: _____

Describe the acts of discrimination providing names (where possible) of individuals along with details of the incident including the bus and route numbers (if applicable)

Has the complaint been filed with the Department of Justice or any other Federal, State, or local civil rights agency or court or do you plan to file with another agency? Yes: _____ No: _____

If yes please provide the following information:

Agency or Court: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Additional Space for answers:

Signature: _____ Date: _____

Return Form to:

Upper Arkansas Area Council of Governments
Attn: Samantha Hughes, Transportation Coordinator
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Canon City, CO. 81212
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samantha.hughes@uaacog.com