



Public Health
Prevent. Promote. Protect.

Brown County Health Department

Complaint Concerning Brown County Health Department

P.O. Box 281
Nashville, IN 47448
812/988-2255 - 812/988-5603 FAX
bchealth@browncounty-in.gov
Norman Oestrike, M.D., Health Officer

The Brown County Health Department, Health Officer and Board of Health take complaints of discrimination, harassment and unethical or unfair conduct as serious matters.

So that we may properly investigate your concern, you are requested to fill out this form as completely as possible. Use additional sheets of paper if needed. After a prompt and thorough investigation into your complaint, you will be notified of our findings. Please be advised that we cannot respond to hearsay and undocumented complaints. Should you have any questions about the process, please write them down at the end of this form and we'll do our best to answer them.

Today's Date: _____

Your contact information:

Name: _____ Phone # _____

Address: _____

City: _____ State: _____ Zip _____

Email: _____

Date(s) the alleged incident(s) took place: _____

Location of alleged incident(s): _____

Describe in as much detail as possible the nature of your complaint.

(Use additional sheets of paper if needed)

Provide or identify all known persons, documents and witnesses to your concerns: _____

(Use additional sheets of paper if needed)

List any questions you have about the complaint process: _____

(Use additional sheets of paper if needed)

I declare that the facts set forth in this complaint are true and accurate to the best of my knowledge.

Signature

Date

Legal Disclaimer: The complaint process is intended for informational purposes only and does not constitute legal information or advice. If you are seeking legal advice, you are encouraged to consult an attorney.

After you have completed this form, mail it to Dr. Norman Oestrike, PO Box 281, Nashville, IN 47448, fax it to 812-988-5603 or email it to bchealth@browncounty-in.us.