



Office of Inspector General

Complaint Form

Information about you:

I wish to:

- Remain anonymous.
- Provide information confidentially to Office of Inspector General (OIG) personnel.
- Waive confidentiality and agree to be contacted by OIG personnel and others outside OIG.

If you agree to waive confidentiality and to be contacted by OIG personnel and others, please provide your contact information as listed below:

Name: _____

E-mail Address: _____

Mailing Address 1: _____

Mailing Address 2: _____

City/State/Zip: _____

Country: _____

Telephone: _____

Fax: _____

If your concerns involve USAID funding requests, human resources/employment issues, or education requests, please forward them to pinquiries@usaid.gov

The alleged violator (enter all available information):

Name: _____

Business Title: _____

Business/Agency
Name: _____

Address 1: _____

Address 2: _____

City/State/Zip: _____

Country: _____

Telephone: _____

Fax: _____

What would you like to report? The selection of one or more allegation types is required.

- | | |
|---|--|
| <input type="checkbox"/> False Claims | <input type="checkbox"/> Bribery/Conflict of Interest |
| <input type="checkbox"/> Theft/Embezzlement | <input type="checkbox"/> Employee Misconduct |
| <input type="checkbox"/> Mismanagement | <input type="checkbox"/> Contract, Grant, or Procurement Fraud |
| <input type="checkbox"/> Computer Crime | <input type="checkbox"/> Travel/Time and Attendance Fraud |
| <input type="checkbox"/> Credit Card Fraud | <input type="checkbox"/> False Statements |
| | <input type="checkbox"/> Other |

