



**PRINT OR TYPE
 STEP 1**

COMPLAINT FORM

COMPLAINANT INFORMATION

1. NAME:

2. ADDRESS:

ADDRESS (CONTINUED):

3. CITY/STATE/ZIP:

4. HOME PHONE NUMBER:

5. WORK PHONE NUMBER:

6. EMAIL ADDRESS:

STEP 2

PARTY AGAINST WHOM COMPLAINT IS ALLEGED

7. NAME:

8. ADDRESS:

ADDRESS (CONTINUED):

9. CITY/STATE/ZIP:

10. TELEPHONE NUMBER:

STEP 3

11. CONCISE STATEMENT CONCERNING THE ALLEGED VIOLATION INCLUDING CITATION OF APPLICABLE SECTION OF RSA 77-G AND/OR REV 3200:

12. STATEMENT OF FACTS: Please explain the basis for your complaint. (Use additional sheets if necessary) Attach any and all documentation to support the complaint.

13. NAMES AND PHONE NUMBERS OF WITNESSES:

STEP 4

Under penalties of perjury, I declare that I have examined this document and to the best of my belief the information herein is true, correct and complete.

 COMPLAINANT'S SIGNATURE (IN INK)

 DATE

 PRINT SIGNATORY NAME & TITLE

MAIL TO: NH DRA
 EDUCATION TAX CREDIT
 PO BOX 637
 CONCORD NH 03302-0637



COMPLAINT FORM INSTRUCTIONS

WHO MUST FILE?

Anyone who alleges a violation of RSA 77-G and Rev 3200 should file an Education Tax Credit Complaint Form (Form ED-06).

WHEN TO FILE?

Form ED-06 should be sent as soon as a violation of RSA 77-G has occurred or is known to have occurred.

WHERE TO FILE?

Form ED-06 may be mailed to:

NH DRA
 Education Tax Credit
 PO Box 637
 Concord, NH 03302-0637

Or may be hand-delivered to the Department of Revenue Administration during business hours (Monday through Friday, 8:00 a.m. to 4:30 p.m.) at:

Governor Hugh J. Gallen Office Park South
 109 Pleasant Street
 Medical and Surgical Building
 Concord, NH 03301

NEED HELP?

Call the Department at (603) 230-5920, Monday through Friday, 8:00am to 4:30pm. For more information visit us on the web at: www.revenue.nh.gov. Hearing or speech impaired individuals may call TDD Access: Relay NH 1-800-735-2964.

LINE-BY-LINE INSTRUCTIONS

STEP 1

LINE 1

Enter the complainant's name.

LINE 2

Enter the complainant's street address.

LINE 3

Enter the complainant's city, state and zip code.

LINE 4

Enter the complainant's home telephone number.

LINE 5

Enter the complainant's work telephone number.

LINE 6

Enter the complainant's email address.

LINE-BY-LINE INSTRUCTIONS CONTINUED

STEP 2

LINE 7

Enter the name of the party against whom the complaint is alleged.

LINE 8

Enter the street address of the party against whom the complaint is alleged.

LINE 9

Enter the city, state, and zip code of the party against whom the complaint is alleged.

LINE 10

Enter the telephone number of the party against whom the complaint is alleged.

STEP 3

LINE 11

Provide a summary statement about the alleged violation including citation of applicable section of RSA 77-G and/or Rev 3200.

LINE 12

Provide all the details about the alleged violation and why you believe the action or inaction violated RSA 77-G and/or Rev 3200.

LINE 13

If you know of anyone who also witnessed the alleged violation, provide their names and phone numbers.

STEP 4

The complaint must be dated and signed in ink by the complainant per RSA 77-G:6. In addition, print the name and title of the complainant signing the application.