

**COUNTY OF SAN DIEGO  
REAL ESTATE FRAUD SECTION  
COMPLAINT FORM**

*\*An electronic version of this form that can be filled in is available upon request by e-mailing a request to: REForm@sdcca.org*

Your Full Name: <input style="width: 95%; height: 25px;" type="text"/>	Residence Address: <input style="width: 95%; height: 25px;" type="text"/>	Residence and Mobile Phone Numbers: <input style="width: 95%; height: 25px;" type="text"/>
Occupation: <input style="width: 95%; height: 25px;" type="text"/>	Business Address: <input style="width: 95%; height: 25px;" type="text"/>	Business Phone: <input style="width: 95%; height: 25px;" type="text"/>

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

Full Name of Suspect: <input style="width: 95%; height: 25px;" type="text"/>	Suspect's Address: <input style="width: 95%; height: 25px;" type="text"/>	Suspect's Phone: <input style="width: 95%; height: 25px;" type="text"/>
Business Name: <input style="width: 95%; height: 25px;" type="text"/>	Business Address: <input style="width: 95%; height: 25px;" type="text"/>	Business/Cell Phone: <input style="width: 95%; height: 25px;" type="text"/>

The following documentation supports my allegation and is incorporated and made a part of this complaint:

- Advertising materials
- Contract or Agreement
- Cancelled check(s) (Front and Back)
- Promissory Note, Deeds, and Deeds of Trust
- Cash receipt(s)
- Escrow instructions, loan documents, amendments and closing statements
- Correspondences between you and the suspect(s) (Letters, E-mails, Faxes)
- Copies of all documents which relate to your complaint which are not listed above.
- Copies of any civil complaints filed on behalf of you or others.

Other: Please list and describe:

Date(s) of Transaction: <input type="text"/>	Places Where Transaction(s) Occurred (Address, City, State): <input type="text"/>
Value of real property (ies) taken: <input type="text"/>	Location of property (ies) taken: <input type="text"/>
<p>Have you or any other victim filed a civil action (lawsuit) in any court in this matter?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes If yes, please provide copy of court documents and the date of filing (include case number).</p> <input type="text"/>	
<p>Have you filed this complaint with another law enforcement or consumer protection agency?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes If yes, provide the name, address and phone number of agency, and the person handling the case. Please also list the status of that case/investigation.</p> <input type="text"/>	
<p>Have you contacted the suspect(s) or business regarding your complaint and demanded restitution of your funds?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes If yes, name of person you contacted, the date(s) contact(s) made, and result.</p> <input type="text"/>	
<p>Have you had a previous business or personal relationship with the suspect(s), firm or controlling person?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes If yes, indicate the nature of the relationship, the duration and whom it was with.</p> <input type="text"/>	

List names, addresses and phone numbers of other individuals who may have further knowledge of this matter. Have you contacted them? When?

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.

Are you willing to appear in court as a witness to this complaint, and truthfully testify to the allegations made in this complaint? Yes  No  If no, give reason.

**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 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 attach your summary statement of facts to this complaint form. If additional room is needed to answer any of the above questions, feel free to attach additional sheets.***