



Kansas Racing and Gaming Commission
700 SW Harrison, Suite 500, Topeka, Kansas 66603
(785) 296-5800, Fax (785) 296-0900

**REPORT OF AN ALLEGED VIOLATION
OFFICIAL COMPLAINT FORM**

Facility: Boot Hill Casino and Resort Kansas Star Casino
Hollywood Casino at Kansas Speedway Kansas Crossing Casino

Complainant: _____
First Name Middle Initial Last Name

Street Address City State Zip

Email Address Phone Number

Complaint/Report:

Be as specific as possible regarding dates, times, locations, names of persons involved in incident, and witnesses. Attach additional pages, photographs or other evidence to this report.

Signature of Complainant **Date**

<p><u>KRGC Staff Only</u> Date Complaint Received: _____ Staff Member: _____</p>

Official complaints/reports must be submitted in writing, signed by the person making the complaint/report, and presented to the Kansas Racing and Gaming Commission. The person making the complaint/report should retain a copy for personal reference.