



OFFICE OF THE DISTRICT ATTORNEY
SPECIAL PROSECUTIONS
County of Ventura, State of California
5720 Ralston Street, Suite 300
Ventura, CA 93003
(805) 662-1750

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REAL ESTATE FRAUD COMPLAINT FORM

- A. The District Attorney has limited resources to process complaints. All complaints will be reviewed by a Deputy District Attorney. **Not all complaints are investigated.**
- B. The legal staff of the Ventura County District Attorney's Office is not permitted to engage in the private practice of law or to furnish legal advice in private civil matters and does not have legal authority to assert your individual private rights.
- C. Special Prosecutions does not conduct personal intake interviews or make appointments to accept the written complaint form.

PLEASE PRINT LEGIBLY

I. COMPLAINANT (Person Filing Complaint) *(all information must be provided)*

LAST NAME	FIRST NAME	INITIAL	DATE OF BIRTH	OCCUPATION
STREET ADDRESS OR P.O. BOX		APT. NO.	DRIVERS LICENSE OR IDENTIFICATION NUMBER	
CITY		STATE	ZIP CODE	
FAX NO.		E-MAIL		
DAY TELEPHONE NUMBER ()		EVENING TELEPHONE NUMBER ()		

II. BUSINESS/SUSPECT COMPLAINT IS AGAINST

NAME OF BUSINESS					
STREET ADDRESS OR P.O. BOX			TELEPHONE NUMBER ()		
CITY		STATE	ZIP CODE		
INDIVIDUAL NAME	DOB (AGE)	RACE	MALE/FEMALE	HEIGHT	WEIGHT
STREET ADDRESS OR P.O. BOX		APT. NO.	TELEPHONE NUMBER ()		
CITY		STATE	ZIP CODE		

III. TRANSACTION INFORMATION

DATE OF OCCURRENCE		LOCATION OF OCCURRENCE	
IDENTIFY THE TYPE OF TRANSACTION PERTAINING TO YOUR COMPLAINT (refinance, mortgage, purchase or sale of property, etc)		WAS A CONTRACT SIGNED? (if yes, please attach a copy) <input type="checkbox"/> Yes <input type="checkbox"/> No	
NATURE OF COMPLAINT			
DATE OF PURCHASE	PURCHASE PRICE/AMOUNT OF LOSS	METHOD OF PAYMENT (check, cash, credit card, other - explain) [Include copies of payment – front and back]	
NAME ADDRESS AND PHONE NUMBER OF WITNESSES, IF ANY:			
NAME, ADDRESS AND PHONE NUMBER OF OTHER VICTIMS, IF KNOWN:			
HOW DID YOU HEAR ABOUT THE BUSINESS? (newspaper, TV, telephone, etc)			
DID YOU CONTACT THE BUSINESS ABOUT YOUR COMPLAINT? <input type="checkbox"/> Yes <input type="checkbox"/> No		NAME OF THE PERSON YOU CONTACTED	
RESULT OF CONTACT		DATE YOU WERE AWARE YOU MAY BE A VICTIM OF A CRIME (explain in narrative)	
LIST OTHER AGENCIES YOU HAVE CONTACTED			
HAVE YOU CONTACTED A PRIVATE ATTORNEY? IF YES, WHO? <input type="checkbox"/> Yes <input type="checkbox"/> No		ANY CIVIL LAWSUITS PENDING, INCLUDING SMALL CLAIMS? <input type="checkbox"/> Yes <input type="checkbox"/> No	ANY JUDGMENTS? <input type="checkbox"/> Yes <input type="checkbox"/> No
MAY WE PROVIDE A COPY OF YOUR COMPLAINT AND INFORMATION TO OTHER GOVERNMENTAL OR CONSUMER AGENCIES? <input type="checkbox"/> Yes <input type="checkbox"/> No			

IV. COMPLAINT

Briefly explain the facts upon which you are basing your complaint (how, when and why you believe you are a victim of a crime), including first contact with suspect, individual or business and anything said or represented which later proved to be untrue. **Additional pages may be attached for further remarks.**

V. DECLARATION

Date and sign below (anonymous complaints are not accepted)

I declare, by penalty of perjury under the laws of the State of California, that the forgoing is true and correct to the best of my knowledge and that this declaration was executed at _____
(city/state) on _____ (date).

(signature)

WARNING: Filing a false report is a crime pursuant to Penal Code 148.5(a)

VI. MAILING INSTRUCTIONS

To help explain the details of your complaint, **YOU MUST SUPPLY DOCUMENTS RELATED TO YOUR COMPLAINT.** (Include: real estate contracts, title documents, promissory notes, escrow documents, warranties, cancelled checks (front and back), repair orders, photographs, letters, etc.)

— PLEASE SEND ORIGINAL DOCUMENTS —

Mail or deliver the signed complaint and ORIGINAL supporting documents to:

**Ventura County District Attorney's Office
Special Prosecutions
5720 Ralston Street, Suite 300
Ventura, CA 93003**

**FAILURE TO SEND SUPPORTING DOCUMENTS
WILL DELAY RESPONSE TO YOUR COMPLAINT**