PUEBLO TRANSIT
COMPLIMENT – COMPLAINT

DATE: _____

INFORMATION ABOUT YOU:

Name: _____ Phone Number: _____

Address: _____City :_____Zip: _____

INFORMATION ABOUT THE COMPLAINT:

Date Incident Occurred: _____ Time of Day: _____a.m.☐p.m.☐

Route or Charter: _____

Location of Incident: _____

Driver(s) Involved: _____

Passenger Comments: _____

PLEASE E-MAIL THIS FORM TO: **bbroyles@pueblo.us**