**FORMULIR PENGADUAN MASYARAKAT**

**NO.: / /**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nama | : |  |  |  |  |  |  |  |  |
| Nomor KTP | : |  |  |  |  |  |  |  |  |
| Alamat lengkap | : |  |  |  |  |  |  |  |  |
| Telepon/Fax. | : |  |  |  |  |  |  |  |  |
| E-mail | : |  |  |  |  |  |  |  |  |
| Subjek pengaduan  /OPD Tujuan | : |  |  |  |  |  |  |  |  |
| Uraian pengaduan | : | ………………………………………………….................................  ……………………………………………………………………….…  …………………………………………………………………………  ………………………………………………………………………… | | | | | | | |

|  |  |
| --- | --- |
|  | Magelang, |
| Yang menerima pengaduan  ……………………………….. | Yang mengadukan  ……………………. |

\*) Data yang kami isikan lengkap dan benar dan sesuai dengan ketentuan yang berlaku

\*\*) Lampirkan Foto jika diperlukan