

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LASSEN

2610 Riverside Drive, Susanville, CA 96130

Phone: (530) 251-8205 • Fax: (530) 251-4922

## FEEDBACK FORM

Lassen Superior Court appreciates you taking the time to submit your feedback about the services you received through our office. Court staff is committed to responding to any concerns in a prompt and thorough manner. We are interested in helping you and the courts make the best decisions possible to meet the needs and interests of the community at large.

Below is some general information that may be helpful for you to consider regarding your feedback to the court:

- 1. Submitting feedback or a complaint through the use of this form is **not** an appeal for review or reversal of court orders that have been made in your case. Use of this form is, however, the proper way to express how you were treated by court staff or about procedures used at Lassen Superior Court.
- 2. With respect to any incident that if substantiated would warrant discipline against a Superior Court Judge, the concerned individual may file a formal complaint with the Commission on Judicial Performance <a href="https://cjp.ca.gov/file\_a\_complaint/">https://cjp.ca.gov/file\_a\_complaint/</a>
- 3. To process your complaint, the Court Executive Officer will:
  - Review your complaint.
  - Determine whether your complaint is (1) timely, (2) a matter that the Court Executive Officer can address, and/or (3) a legal matter only the courts can address.
  - Conduct an investigation, if appropriate.
  - Respond to your concerns in writing.

Please answer the following questions to assist us in better understanding the nature of your feedback about court staff and/or procedures. Please retain a copy of this completed form and submit or mail the original to the Lassen Superior Court, Attn: Court Executive Officer. This form is also available in electronic format on the court's website <u>www.Lassen.Courts.CA.gov</u> under General Information / Complaints & Feedback.

CONTACT INFORMATION				
		Date of Incident	Today'	s Date
Name		Case Number (if applicable)		
Address		City	State	Zip Code
Telephone Number			Email Address	
TYPE OF FEEDBACK				
□ Regarding court staff □ Regardin		rt procedure	$\Box$ Suggestion for improvement	
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## DETAILS

Please provide a brief summary outlining the basis of your concern or suggestions (include dates, case number, indicate service area, or other relevant information). If additional space is required, attach and number additional pages.

☐ Appeals	Civil	Criminal	□ Family Court Services
Family Law	☐ Jury Services	☐ Juvenile Delinquency	□ Juvenile Dependency
□ Landlord Tenant	Mental Health	Probate	□ Self-Help Services
□ Small Claims	□ Traffic	Other:	

## SIGNATURE

Signature		Date	_
COURT USE ONLY			
		🗆 Counter 🗆 Mail 🗆 Email 🗆 Fax	
		□ Other:	
Date Received	Initials	Received Via	
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