

Maryland RecoveryNet
Access To Recovery Complaint Form (10/2013)
(Please print or write legibly)

Complaints may be filed with the Care Coordinator, Regional Area Coordinator or the Project Director for Maryland RecoveryNet by calling 410 402-8620 or by email at deirdre.davis@maryland.gov. You may also complete this form and send it to the Alcohol and Drug Abuse Administration Attention: Deirdre Davis 55 Wade Ave Catonsville, MD 21228.

Section is Optional if you wish to remain anonymous

Name of Complainant: _____

Address: _____

Phone Number: () _____ - _____

Email: _____

Name of agency/person(s) complaint is against: _____

Located at _____

Relationship to agency/person? _____

Please provide a detailed explanation of concerns:

Signature of complainant (Optional) _____

Contact information for person(s) who completed form on behalf of complainant:

Name: _____ Phone Number () _____ - _____

Signature of Individual completing form on behalf of complainant _____

OFFICIAL USE ONLY

Submitted By: _____ In-person via phone Other:

To: _____ Date/Time: _____

Phone: _____