



**Railroad Retirement Board - Office of Inspector General Hotline
SPECIAL COMPLAINT FORM**

To provide information concerning fraud, waste or abuse against the programs of the U.S. Railroad Retirement Board (RRB), or information concerning misconduct by a RRB employee or management official, please complete the information requested on this form and mail it to:

**Railroad Retirement Board
Office of Inspector General Hotline
844 North Rush Street, 4th Floor
Chicago, Illinois 60611**

ALLEGATION MADE CONCERNING (PLEASE CHECK APPROPRIATE BOX)

<input type="checkbox"/> RRB Benefit Fraud	<input type="checkbox"/> Railroad Medicare Fraud
<input type="checkbox"/> Unemployment	
<input type="checkbox"/> Sickness	<input type="checkbox"/> Railroad Employer Fraud
<input type="checkbox"/> Retirement	
<input type="checkbox"/> Disability	<input type="checkbox"/> RRB Employee Misconduct
	<input type="checkbox"/> RRB Management/SES Misconduct
<input type="checkbox"/> Other – Describe in Summary Section on Next Page	

ALLEGED VIOLATOR'S IDENTIFYING INFORMATION

Please provide as much information as possible to identify the alleged violator. If the violator is operating a business, make sure to include that information as well.

Person

Name	
Address	
Address2	
City, State, Zip	
Telephone No.	
Date of Birth	
Soc. Sec. No.	

Business, Entity or Additional Person if Necessary

Name: Business, Entity or Person	
Address	
Address2	
City, State, Zip	
Telephone No.	
Owner's Name	
Soc. Sec. No.	



Railroad Retirement Board - Office of Inspector General Hotline
SPECIAL COMPLAINT FORM

YOUR CONTACT INFORMATION

The Office of Inspector General (OIG) encourages individuals who are reporting fraud or misconduct to provide their contact information so that we may obtain additional information if necessary. In accordance with the Inspector General Act of 1978, as amended, OIG will keep identifying source information confidential unless such disclosure is unavoidable during the course of the investigation. However, you may choose to remain anonymous but the absence of your contact information may limit our ability to conduct a complete investigation. If you wish to provide information without disclosing your identity or want the OIG to keep your identity confidential, please indicate that below.

Anonymous

Request that Identity Be Kept Confidential

Your Name	
Address	
Address2	
City, State, Zip	
Telephone No.	
Email Address	

SUMMARY OF ALLEGATION