



Inspector General Office Fraud Report Form

Provide as much information about the suspected fraud as possible below.
More information increases the chances to prove fraud.

Date: _____

Which of the following classifications best represents the alleged misuse, fraud or abuse?

- Embezzlement, misuse of funds, assets
- Cash kickbacks, bribes, extortion, forgery
- Mismanagement, waste, abuse
- False statement(s), certification, etc.
- Environmental violations
- Conflicts of interest, ethics violation
- Other: _____

Please state the name(s) of the individual(s) and the City of Milwaukee involved in the alleged activity:

Name: _____
Name: _____
Name: _____

Check the relationship of the alleged individual(s) to the City of Milwaukee:

Employee Vendor or Contractor Other: _____

Has the activity been reported to any other person or department? Yes No

If yes, to whom and when? _____

Provide details concerning the alleged activity. Attach additional pages if necessary.

How does the complainant wish to be identified? Anonymous Confidential No Restriction

Complainant's Information (optional): Name: _____
Department (If Applicable): _____
Address: _____
Email: _____

You may save your completed form and email to ig@milwaukee.gov

Mail this form to: Office of the City Clerk
Attn: Inspector General
City of Milwaukee
200 E. Wells Street, RM 205
Milwaukee, WI 53202

OR