

**Glendale Lakes Townhome Association Phase I  
WITNESS COMPLAINT**

INFORMATION CONCERNING WITNESSES:

\_\_\_\_\_  
Witness Name

\_\_\_\_\_  
Witness Address

INFORMATION CONCERNING VIOLATORS:

\_\_\_\_\_  
Violator's Name

\_\_\_\_\_  
Violator's Address

INFORMATION CONCERNING VIOLATION:

\_\_\_\_\_  
Date and Time of Violation

\_\_\_\_\_  
Location

Witnesses observations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I make the above statements based on my personal knowledge and not upon what has been told to me. I will cooperate with the Association and its attorneys to provide additional statements or affidavits, and in the event of a hearing or trial, I will appear to testify as a witness.

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date Signed