

**Town of Friday Harbor**

PO Box 219 / Friday Harbor / WA / 98250

(360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

**Parking Ticket Complaint Form**

Ticket number:		Date of ticket:		Today's date:	
Name of complainant:				Phone number:	
Mailing address:					
Describe Issue:					
Request:	Reduce fine <input type="checkbox"/>	Time to pay <input type="checkbox"/>	Dismiss <input type="checkbox"/>	Other <input type="checkbox"/>	
					_____
					Complainant signature

<b>TOWN OF FRIDAY HARBOR USE ONLY</b>	
Town Marshal Response:	Date:
	_____
	Town Marshal signature

<b>DISTRICT COURT USE ONLY</b>			
Judge's decision:			Date:
Reduce fine <input type="checkbox"/>	Time to pay <input type="checkbox"/>	Dismiss <input type="checkbox"/>	Other <input type="checkbox"/>
			_____
			Judge signature