



Transportation Complaint Form

Passenger Name: _____

Date: _____ Time: _____ Location: _____

Phone Number: _____ Email Address: _____

Street Address*: _____

City: _____ State: _____ Zip Code: _____

*Address is required for formal response/ notification in regards to the complaint.

Complaint description: _____

This form may be submitted via mail or phone using the contact information listed below. Please be assured that the information provided will remain confidential and will be used only for the purposes of enhancing the quality of our public transportation services. Thank you for helping us to improve our transportation services.

Mandy's Farm
Attn: Quality Assurance Coordinator
P.O. Box 9346
Albuquerque, NM 87119
(505) 503-1141

In cases where a complaint form is submitted, all feedback will be reviewed by the Fleet Administrator/ Quality Assurance Coordinator, as well as the Operations Coordinator and Executive Director. All complaints will receive a written response within 7 business days. In situations where a service recipient would like to appeal the agency's response, they may submit a formal letter of appeal/ complaint to the Mandy's Farm Board of Directors (Attn: Mandy's Farm Board of Directors, % Mandy's Farm P.O. Box 9346 Albuquerque, NM 87119).