



Complaint and Inquiry Form

Nature of Complaint: _____ Control Number: _____

Complainant's Name: _____

Address: _____ City: _____ ST: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

If applicable, list other complainants or witnesses: _____ Cell Phone: _____

Member Involved: (1) _____ Division: _____

Member Involved: (2) _____ Division: _____

Member Involved: (3) _____ Division: _____

Incident Location: _____ Incident Date: _____

Complaint Received By: _____ Date: _____ Time: _____

Brief Summary of Complaint: _____

Forwarded for Investigation to: _____ Date: _____

Date Completed: _____

Disposition: () Sustained () Unfounded () Exonerated
 () Non Sustained {complainant and accused} () Withdrawn

Internal Affairs Coordinator: _____ Date: _____

Chief of Police: _____ Date: _____

Date Filed: _____ Date Complainant Notified: _____

Complainant Notified By: _____