LONE JACK POLICE DEPARTMENT

CITIZEN COMPLAINT FORM

DATE: _____

CITIZEN INFORMATION

Name (Please Print): _____ Home Phone: _____

Address: _____ Work Phone: _____

COMPLAINT INFORMATION

Employee(s) Involved: _____

Location of Occurrence: _____

Date of Occurrence: _____ Time of Occurrence: _____

DETAILED STATEMENT

(Include as many details as possible of what occurred)

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I wish to make a formal complaint and understand that an investigation will be conducted and I will fully cooperate in the investigation. I further understand that any false and malicious complaint may result in civil court action.

_____

Complainant's Signature