

INTERNAL AFFAIRS REPORT FORM

Person Making Report (Optional, But Helpful)

| | | |
|-------------------|-------------|--|
| Full Name _____ | Phone _____ | Preferred? <input type="checkbox"/> |
| Address _____ | Email _____ | <input type="checkbox"/> |
| City, State _____ | DOB _____ | |

Officer(s) Subject to Allegation (Provide Whatever Info Is Known)

| | |
|---------------------|-----------------|
| Officer(s) _____ | Badge No. _____ |
| Incident Site _____ | Date/Time _____ |

In the space below, describe the type of incident (traffic stop, street encounter) and any information about the alleged conduct. If you cannot fit your response below, feel free to use extra pages and attach them to this document. If you do not know the officer's name or badge number, provide any other identifying information.

Other Information

How was this reported? In Person Phone Letter Email Other _____

Any physical evidence submitted? Yes No If yes, describe: _____

Was incident previously reported? Yes No If yes, describe: _____

To Be Completed by Officers Receiving Report

| | | |
|---|--------------------|--------------------|
| _____ Officer Receiving Complaint | _____ Badge No. | _____ Date/Time |
| _____ Supervisor Reviewing Complaint | _____ Badge No. | _____ Date/Time |