

HUSTISFORD POLICE DEPARTMENT

CITIZEN COMPLAINT

(Please Print)

Complainant Information:

DATE: _____

Name: _____

Date of birth: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____

Work: _____

Occurrence Information:

Date: _____

Time: _____

Location: _____

Witnesses: Separate Complaint for each. _____ **(Check if Witness)**

Officer(s) Involved:

Name: (If Known) _____

Badge Number: _____

Name: (If Known) _____

Badge Number: _____

Physical Description: _____

Physical Description: _____

On the attached pages please provide a detailed account of what occurred. (Please print or type your statement)

Page: of: Pages

**HUSTISFORD POLICE DEPARTMENT
CITIZEN COMPLAINT SIGNATURE PAGE**

I, the undersigned, am making a complaint against officer(s) of the Hustisford Police Department. I understand that this complaint will be investigated by the Hustisford Police Department, Chief of Police or an outside Law Enforcement Agency. I further understand that IF this complaint is determined to be malicious or completely false, the Hustisford Police Department can defer charges for: Filing a False Police Report/Complaint (SS 946.66(2)). I further understand that the officer(s) subject of this investigation then has/have the right to file a Civil Suit.

Signed: _____

Date: _____

Sworn before me, _____, Hustisford Village Clerk. My commission expires: _____

Signed: _____

Date: _____

Signed: _____

Date: _____

***Chief, Hustisford Police or
Village President***

