



# ROCKWOOD POLICE DEPT. REPORT OF COMPLAINT AGAINST POLICE PERSONNEL

Complaint against: \_\_\_\_\_

## **COMPLAINANT:**

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

RESIDENCE PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ EXTENSION: \_\_\_\_\_

## **VICTIM:**

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

RESIDENCE PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ EXTENSION: \_\_\_\_\_

## **WITNESS:**

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

RESIDENCE PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ EXTENSION: \_\_\_\_\_

**WITNESS:**

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

RESIDENCE PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ EXTENSION: \_\_\_\_\_

*(IF MORE WITNESS SPACE IS NEEDED, PLEASE LIST ON A SEPARATE PIECE OF PAPER)*

**NATURE OF COMPLAINT:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Incident Date: \_\_\_\_\_

Incident Time: \_\_\_\_\_

Incident Location: \_\_\_\_\_

**REPORT OF COMPLAINT AGAINST POLICE PERSONNEL**

Detailed report of Complaint:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*DETAILED REPORT CAN BE CONTINUED ON NEXT PAGE*

