

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:			
PEOIDENCE DUONE.		OF L. DUONE.	
RESIDENCE PHONE: BUSINESS ADDRESS:			
BUSINESS PHONE:		EXTENSION:	
_			
WITNESS:			
NAME:			
TVAIVIL.			
RESIDENCE ADDRESS:			
_			
RESIDENCE PHONE:		CELL PHONE:	
BUSINESS ADDRESS:			
_			
BUSINESS PHONE:		EXTENSION:	

<u>WITNESS:</u>	
NAME:	
	DATE OF BIRTH:
RESIDENCE ADDRESS:	
DECIDENCE DUONE.	CELL PHONE:
DUOINEGO ADDDEGO	CELL PHONE:
BUSINESS PHONE:	EXTENSION:
(IF MORE WITNESS SPACE IS N	IEEDED, PLEASE LIST ON A SEPARATE PIECE OF PAPER)
NATURE OF COMPLAINT:	
Incident Date:	Incident Time:
Incident Location:	
REPORT OF COMPLA	INT AGAINST POLICE PERSONNEL
Detailed report of Complaint:	
betailed report of Complaint.	

DETAILED REPORT CAN BE CONTINUED ON NEXT PAGE

Ido hereby certify that the above report is true, accurate and complete as best as I can present the facts pertinent to this complaint. I understand that under the regulations of the Rockwood Police Department, the employee against whom this complaint is filed may be summoned to appear at an Administrative Hearing. By signing and filing this complaint hereby agree to appear at the called Administrative Hearing and to testify under oar concerning all matters relevant to this complaint. I also understand that if a Administrative Hearing is called, a written record of all testimony will be made and a copy will be furnished to the employee and/or their attorney. If a hearing is held, the employee and their attorney have a right to be present and to cross examine me concerning are testimony that I might offer. Please mail the completed and signed form to: Chief of Police Rockwood Police Department 115 N. Front Street Rockwood, TN 37854
SIGNATURE OF COMPLAINANT:
DATE:TIME:
WITNESSED BY:
DATE: TIME:
OFFICER RECEIVING COMPLAINT:
DATE:TIME: