

## Complaint Against Police Officer

Name of Complainant (First, Middle & Last):		
Address (Actual Street Address):		
Home Phone Number:	Work Phone Number:	Cell Phone Number:
Location of Incident (Street address if known):		
Date of Incident:	Time of Incident:	
Name of officer(s) and/or employee(s) against whom complaint is being filed or other identifying marks (ie: vehicle number, officer's badge number, physical description of officer, etc).		
Officer's Name:		Badge Number:
Other identifying Information on Officer:		
Officer's Name:		Badge Number:
Other identifying Information on Officer:		
Name(s), address and phone number concerning any witnesses; if applicable:		
Name of Witness:		Phone Number
Address (No PO Boxes):		
Name of Witness:		Phone Number
Address (No PO Boxes):		
Statement of Allegation (use reverse side if needed):		
<p>I understand that this statement of complaint will be submitted to the Colonial Heights Police Department and may be the basis for an investigation. I sincerely and truly declare and affirm that the facts contained herein are complete, accurate and true to the best of my knowledge and belief. Further, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion or promise of any kind. I understand that under the regulations of the department, the employee against whom this complaint is filed may be entitled to request a hearing before a board of inquiry. By signing and filing this complaint, I hereby agree to appear before a board of inquiry; if one is requested by the employee and to testify under oath concerning all matters relevant to this complaint.</p>		

<hr/> Signature of Complainant	<hr/> Date
<input type="checkbox"/> Complainant Refused to Sign	
<hr/> Signature of Person Receiving Complaint & Unit #	<hr/> Date