STRUTHERS POLICE DEPARTMENT

CITIZEN COMPLIMENT / COMPLAINT FORM

than uninvolved thir	•	•	•	•	_					
However, parents ar	_	feel free to m				of their minor	chila	lren.		
What are you reporting:			Nature of Complaint:							
☐ Compliment	□ Complaint									
Target of Complain			1	1		1 .		 		
Department Employee Name and Badge # if known:			Race		Sex	Height		Weight	Age	
Identifying Characteristics:						Vehicle I	Vehicle Number:			
Reporting Party's I Name (Last, First, M.			Address							
Name (Last, First, IVI.	1.).		Address	•						
City			State:			Zip:	: Phone #:			
City:			State.		Zip.	- '	riione #.			
Witness Information	on:									
Name (Last, First, M.I.):				Add	ress:					
reame (East) mist) minj.										
City:			State:			Zip:	F	Phone #:		
Name (Last, First, M.I.):			Ad		ress:	I	<u> </u>			
City:			State:	ate:		Zip:	F	Phone#:		
Incident Information										
Date of Incident:	Time of Incident:	Location of I	Incident:							
Incident Summary	•									
Acknowledgement	t & Endorsement:									
2921.15 Making a false a		misconduct:								
(A) As used in this section (B) No person shall knowi							niscon	duct in the nerfo	rmance of the	
officer's duties if the pers	on knows that the allega	tion is false.							-	
(C) Whoever violates division (B) of this section is guilty of making a				T T T T T T T T T T T T T T T T T T T						
Signature of Reporting Party:				Date:						
Employee Accepting Complaint:				Date	Date & Time:					

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Incident Summary Continuation:	
Signature of Reporting Party:	Date: