

Citizen Complaint Form

Type of Complaint \_\_\_\_\_

**Complaining Party**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**Offensive Party**

(if known)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**Narrative:** \_\_\_\_\_

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Office Use Only
Date Rec'd: _____
Time Rec'd: _____
Taken by: _____
Log No. _____

\_\_\_\_\_

Complainant Signature

\_\_\_\_\_

Date