

NEWBERRY POLICE DEPARTMENT CITIZEN COMPLAINT FORM

Complainant: _____

Street Address: _____

(H) Phone: () _____ **(W) Phone:** () _____ **(C) Phone:** () _____

Officer / Employee Involved: _____

Incident Date: _____ **Incident Time:** _____

Incident Location: _____

Allegation / Complaint: _____

Witness (if any): _____

Street Address: _____

(H) Phone: () _____ **(W) Phone:** () _____ **(C) Phone:** () _____

I certify that all information is true and correct. Complainant's signature _____

Bring this form to the on-duty supervisor or an administrative staff member at Newberry Police Department, or mail to:

Internal Affairs, Newberry Police Department, 1507 Nance Street, Newberry, SC 29108.