

**Oak Bluffs Police Department
Citizen Complaint of Police Misconduct Form**

Name of complainant: _____

Home Address: _____ Home Phone: _____ Work Phone _____

City/Town _____ State _____ Zip Code _____

Officer (s) Complained About:

Name _____ Rank: _____ Badge # _____

Name _____ Rank: _____ Badge# _____

Name _____ Rank: _____ Badge# _____

Nature of Complaint: (Describe in your own words everything you consider necessary for the matter to be completely investigated. Use another sheet of paper if necessary.)

Names, Addresses, Phone numbers of any witnesses:

I understand that I will be informed of the result of any investigation and the disposition of my complaint within sixty (60) days. I am _____ am not _____ willing to testify at any internal or criminal hearing on this matter. To the best of my knowledge, the above statement (and if applicable, attached supplementary sheets) is a true and accurate account.

Signature: _____

Signature _____
(Superior Officer or OIC)

Date/Time Received: _____