CITIZEN COMMENDATION / COMPLAINT FORM

____ **Commendation** ____ **Complaint** _____
(Assigned CIC #)

____ Wish to remain anonymous (Anonymous complaints will be looked into)

Citizen's Name: _____ Daytime Tele # (____) _____
(Print)

Address: _____ Email:_____
(Print Street Address) (City) (State, Zip) (Print)

Witness Name: _____ Daytime Tele # (____) _____
(List add'l in narrative) (Print)

Address: _____
(Street) (Print Street Address) (City) (State, zip)

Preferred Contact Method: ____ Phone (Listed above) ____ Email (Listed Above)

Officer(s) Involved: (Print) 1. _____ 2. _____

Nature of Incident: (Traffic Stop, Arrest, Call for Service, etc.) _____
_____

Date, time and location of incident: Date: _____ Time: _____

Location: _____

PLEASE READ BEFORE SIGNING ON PAGE 2:

In compliance with the Texas Government Code Sec. 614.022 referencing Complaints against law enforcement officers, to be considered by the head of a state agency or by the head of a fire or police department, the complaint must be: (1) in writing, and (2) signed by the person making the complaint.

Supervisor taking Complaint: _____ Date/Time: _____

Complete Narrative on Next Page

Complete Narrative on Next Page

Narrative: (May be continued next page)

(Signature of person submitting Commendation/ Complaint, unless remaining anonymous) (Date)

Narrative: (May be continued by attaching additional pages)

(Signature of person submitting Commendation/ Complaint, unless remaining anonymous) (Date)