## SHAFTER POLICE DEPARTMENT PERSONNEL COMPLAINT FORM (PLEASE PRINT)

Date Received:	Time Received:	Ca	Case Number:	
Complainant Name:		We	Were you arrested? _ Telephone:	
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Time, Date, and Location o	of Occurrence:		Marine control in the control of Arrived Arrived Arrived Arrived Arrived Arrived Arrived Arrived Arrived	
Employee(s) Involved:				
Type of Complaint:	(Offensive Language, Harassme	ent, Excessive Force, etc.)		
May We Contact You at Yo	our Residence?	At Your Pl	ace of Work? _	
Brief Description of Circum	nstances:		*****	Name and a second s
Witness #1:	Address:		Phone:	
Witness #2:	Address:	Phone:		
Signature of Complainant:		Copy to Complainant?		
CONDUCT. CALIFORNIA L CITIZENS' COMPLAINTS. AGENCY MAY FIND AFTER YOUR COMPLAINT. EVEN IT INVESTIGATED IF YOU	D MAKE A COMPLAINT AGAIN AW REQUIRES THIS AGENCY YOU HAVE A RIGHT TO A V INVESTIGATION THAT THERE IF THAT IS THE CASE, YOU H BELIEVE AN OFFICER BEHA RELATING TO COMPLAINTS M	( TO HAVE A PROCE WRITTEN DESCRIPTI E IS NOT ENOUGH EV IAVE THE RIGHT TO I AVED IMPROPERLY.	DURE IN PLAC ON OF THIS F IDENCE TO WA MAKE THE COM CITIZEN COM	E TO INVESTIGATE PROCEDURE. THIS ARRANT ACTION ON MPLAINT AND HAVE IPLAINTS AND ANY
	V TO MAKE A COMPLAINT AN OFFICER KNOWING TH E.			
I have read and understoo	d the above statement.			
X Signature of Complainant		Officer Receiving	Complaint	Date/Time
	Office U	se Only		
Investigation Assigned To: Findings of Investigation:	Unfounded Sustained	Exonerated Not Sustained	Complainant Notified Personnel Notified	