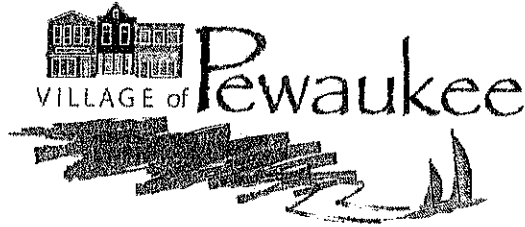




TIMOTHY HEIER
CHIEF OF POLICE



POLICE DEPARTMENT
215 Hickory Street
Pewaukee, WI 53072
Telephone 262-691-5678
Fax 262-691-5675

VILLAGE OF PEWAUKEE POLICE DEPARTMENT CITIZEN COMPLAINT FORM

1. Complainant's Name: _____
(Last) (First) (Middle)

2. Address: _____
(Street) (City) (State) (Zip)

3. Phone No.: _____ 4. Date of Birth: _____

5. Employer: _____

6. Business Phone No.: _____ 7. Work Hours: _____

8. Incident Date and Time: _____

9. Incident Location: _____

10. Name, Badge No. and Rank of Accused Officer(s), if known, or Description

11. Witness to incident:

a. Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip)

Phone No.: _____ Business Phone No.: _____

ACKNOWLEDGEMENT: I acknowledge that I have read the information on the reverse side of this form and that the information and statement I have provided in regards to my citizen complaint is true and correct.

Complainant Signature _____ Date _____ Witness Signature _____ Date _____

Please attach additional paper describing your complaint in full: When describing your complaint, please be as specific as possible as it relates to dates, times, and individuals involved,

including each individual's address, telephone number, employment and position and date of birth if applicable.

Lined area for writing the complaint.

If additional space is needed please continue your written complaint on lined paper and attach it to this form. Also, please attach any copies of supporting documentation.

Signature: _____

Date: _____

Lastly, the department is required by State Law to inform you that **“whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to Class A forfeiture.”**

Please send this completed form to:

Timothy Heier
Village of Pewaukee Police Department
235 Hickory Street
Pewaukee, WI 53072

Subscribed and sworn to before me this _____ day of _____ 20_____

Notary Public, Waukesha County, Wisconsin _____

My Commission Expires _____