**SANDWICH POLICE DEPARTMENT**  
**PERSONNEL COMPLAINT FORM**  

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**COMPLAINANT INFORMATION**

<table>
<thead>
<tr>
<th>Incident Date:</th>
<th>Incident Time:</th>
<th>Incident Location:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Complaint:</td>
<td>Time of Complaint:</td>
<td>Case Number:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Complainant:</th>
<th>DOB:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street, City, State, Zip):</td>
<td></td>
</tr>
<tr>
<td>Telephone (Home):</td>
<td>Telephone (Work):</td>
</tr>
<tr>
<td>Best time to contact:</td>
<td>Telephone (Cell):</td>
</tr>
</tbody>
</table>

**Nature of Incident** (Attach supporting documentation, as appropriate; including e-mail, correspondence, etc.)

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Signature of Complainant (if applicable):  

**PERSON RECEIVING COMPLAINT**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Rank:</th>
<th>ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Method of Contact (Circle One): Telephone In person Mail E-Mail Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subject Employee:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature of Person Receiving Complaint:  

Date:  

Original: Submit to Chief of Police  
Copy: Forward through chain of command  

Rev: 8/8/2019
SANDWICH POLICE DEPARTMENT
COMPLAINANT STATEMENT

Date: _______________    Time: _______________    Case #: _______________

Name: _____________________________________________________________

Address: __________________________________________________________

I hereby voluntarily make the following statement without threat or coercion:

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

_________________________________________    ______________________
Signature of person giving statement    Witness Signature

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