INTERNAL AFFAIRS REPORT FORM  Person Making Report (Optional, But Helpful)		
Address (Apt #) Email		
City, State, Zip Date of Birth		
Officer(s) Subject to Allegation (Provide Whatever Info Is Known)		
Officer(s) Name Badge No.		
Incident Location Date/Time		
In the space below, describe the type of incident (traffic stop, street encounter) and any information about the alleged conduct. If you cannot fit your response below, feel free to use extra pages and attach them to this document. If you do not know the officer's name or badge number, provide any other identifying information.		
Other Information		
How was this reported? ☐ In Person ☐ By Phone ☐ By Letter ☐ By Email ☐ Other	or	
Any physical evidence submitted?   Yes   No If yes, describe:		
Was incident previously reported? ☐ Yes ☐ No If yes, describe:		
To Be Completed by Officers Receiving Report		
Officer Receiving Complaint	Badge No.	Date/Time
Supervisor Reviewing Complaint	Badge No.	Date/Time