

PLEASANT PRAIRIE POLICE DEPARTMENT CITIZEN COMPLAINT FORM



INSTRUCTIONS:

1. Complete the form with as many details as possible
2. Return or mail the completed form to the Pleasant Prairie Police Department

COMPLAINANT INFORMATION

Last Name	First Name	M.I.	Date of Birth
Home Phone	Work Phone & Extension	Other Contact Numbers	
Street Address	City	State	Zip

OFFICER(S) INVOLVED

Officer's Name	Badge #
Officer's Name	Badge #
Officer's Name	Badge #
Officer's Name	Badge #

WITNESS INFORMATION

1. Last Name	First Name	M.I.	Date of Birth
Home Phone	Work Phone & Extension	Other Contact Number	
Street Address	City	State	Zip
2. Last Name	First Name	M.I.	Date of Birth
Home Phone	Work Phone & Extension	Other Contact Number	
Street Address	City	State	Zip
3. Last Name	First Name	M.I.	Date of Birth
Home Phone	Work Phone & Extension	Other Contact Number	
Street Address	City	State	Zip

INCIDENT DETAILS

Be as specific and detailed as possible

Date of Incident	Time of Incident	PPPD Case Number (if known)
Location of Incident		

NATURE OF COMPLAINT

