Arcanum Police Department

Citizen Compliant Form

Incident Information

Date of Incident(s):	Time of Incident(s):	Incident(s) Location:
Name of Officer(s):	If officer's name is unknown other information to establish identity:	

Complainant Information

Complaint's First Name:	Complaint's Last Name:	Complaint's Home Phone Number:
Complaint's Cell Phone #:	Complainant's Home Address:	

Witnesses Information, if any

Witness #1 Last name:	Witness #1, First Name:	Witness #1 home address:
Witness #1 Phone #:	What	t did the witness see
Withess #1 Phone #.	What did the witness see?	
Witness #2 Last name:	Witness #2, First Name:	Witness #2 home address:
Witness #2 Phone #:	What did the witness see?	
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Witness #3 Last name:	Witness #3, First Name:	Witness #3 home address:
Witness #3 Last name:	Witness #3, First Name:	Witness #3 home address:
Witness #3 Last name: Witness #3 Phone #:		Witness #3 home address: t did the witness see?

Details of the Incident:

Arcanum Police Department

Intake/Investigation Form	hereby make this	
voluntary statement to		
the Arcanum Police Department, at		

SIGNATURE:	PHONE #:
DOB:	DATE:

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Note: It is a violation of the Ohio Revised Code to knowingly file a complaint against a Peace Officer that alleges that officer engaged in misconduct in the performance of the officer's duties if the person knows the allegation is false (ORC sec. 2921.15)