

Appendix B

Department/Agency _____

IA Case Number _____

INTERNAL AFFAIRS REPORT FORM

Person Making Report (Optional, But Helpful)

Full Name	_____	Preferred? Phone	_____
	_____		— <input type="checkbox"/>
Address	_____	Email	_____
	_____		— <input type="checkbox"/>
City, State	_____	DOB	_____
	_____		_____

Officer(s) Subject to Allegation (Provide Whatever Info Is Known)

Officer(s)	_____	Badge No.	_____

Incident Site	_____	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 Phone Letter Email Other _____

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