| Department/Agency | IA Case Number |  |
|-------------------|----------------|--|
|                   |                |  |



## **INTERNAL AFFAIRS REPORT FORM**



## Person Making Report (Optional, But Helpful)

| Full Name   |  | Dhono        |                 | Preferred?              |  |  |
|---|--|--------------|-----------------|-------------------------|--|--|
|   |  |              |                 |                         |  |  |
| Address   |  | Email        |                 | □                       |  |  |
| City, State   |  | DOB          |                 |                         |  |  |
| Officer(s) Subject to Allegation (Provide Whatever Info Is Known) |  |              |                 |                         |  |  |
| Officer(s)  |  | Badge N      | lo              |                         |  |  |
| Incident Site   |  | Date/Ti      | me              |                         |  |  |
| alleged conduct. If   | describe the type of incident (traffic syou cannot fit your response below, o not know the officer's name or badge | feel free to | use extra pages | and attach them to this |  |  |
| Other Information   |  |              |                 |                         |  |  |
| How was this re   | ported?   In Person   Phone  | □ Letter     | □ Email □ (     | Other                   |  |  |
| Any physical evi  | idence submitted? 🗆 Yes 🗆 N  | o If yes,    | describe:       |                         |  |  |
| Was incident pr   | eviously reported? 🗆 Yes 🗀 N   | o If yes,    | describe:       |                         |  |  |
| To Be Completed by Officers Receiving Report                      |  |              |                 |                         |  |  |
| Officer Receivino   | g Complaint  |              | Badge No.       | Date/Time               |  |  |
| Supervisor Revie  | wing Complaint   |              | Badge No.       | Date/Time               |  |  |