



CITY OF WILLIAMSBURG
Police Department

Compliment – Complaint Form

Case Number: _____

Name: _____

Date: _____

Address: _____

Age _____ Sex _____

Phone: _____

Parent/Guardian: _____

Parent Phone: _____

Nature of Incident: _____

Complainant Arrested? _____

Date/Time of Incident: _____

Charge: _____

Arrest Date: _____

Witness: _____

Phone Number: _____

Address: _____

Officer Involved: _____

Badge Number: _____

Other Personnel Involved: _____

Badge Number: _____

Remarks: _____

Signature: _____

Use additional paper if necessary.

I do hereby certify that the attached report is true, accurate, and complete as best I can present the facts pertinent to this complaint. I am available to speak with an investigator from _____ to _____ on _____.

I understand that the officer against whom this complaint is filed may be entitled to request a hearing before a Board of Inquiry. By signing and filing this complaint, I hereby agree to appear before a Board of Inquiry, if one is requested by the officer, to testify under oath concerning all matters relevant to this complaint. If a hearing is held, the officer and/or his attorney has a right to be present and to cross examine me concerning any testimony I might give.

Signature of Complainant

Date and Time

Refused to sign (YES/NO)

Officer Receiving Complaint

Date, Time, and Case Number