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## CITIZEN COMPLAINT FORM

DeForest Police Department

110 South Stevenson St.

DeForest, Wisconsin 53532

Website:

<https://www.vi.deforest.wi.us/police>

[DFPDConduct@vi.deforest.wi.us](mailto:DFPDConduct@vi.deforest.wi.us)



### INSTRUCTIONS FOR FILING YOUR COMPLAINT

**What is a complaint** – a complaint is a written statement alleging that a member of the department has violated the department's Code of Conduct or Standard Operating Procedures, DeForest village ordinances, or state or federal laws.

**Who can file a complaint** – in most cases, a complaint may be filed by any citizen or agent representing the citizen. An agent is limited to an attorney, parent or guardian of a child or a translator representing a non-English speaking complainant. Agents may obtain a Citizen Complaint Form and assist in its completion. All complaints are confidential.

**What must be filed** – in cases when an online complaint is filed, a narrative must be included on this form. A supervisory officer will review the online Citizen Complaint Form and attempt to contact the complainant. Anonymous complaints can be filed, however anonymous complaints are difficult to investigate, and it is encouraged that the complainant provide their contact information so that a supervisor may be able to discuss this matter in further detail. If it is more convenient, you may complete the form and either mail it to the department, drop it off at the DeForest Police Department, or email the complaint to [DFPDConduct@vi.deforest.wi.us](mailto:DFPDConduct@vi.deforest.wi.us).

### INFORMATION ABOUT YOU

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Birth Date: \_\_\_\_\_ \* Sex \_\_\_\_\_ \* Race \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Agent Representing Complainant: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

*\* To be used for DeForest Police Department statistics.*

### INFORMATION ABOUT THE INCIDENT

Location of Incident: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ a.m. / p.m. (circle one)

### INFORMATION ABOUT THE EMPLOYEE

Department employee(s) involved: Name(s) and/or physical description:

**STATEMENT/DESCRIPTION OF INCIDENT**

Describe the incident in detail:

**WITNESS/OTHERS INVOLVED**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Birth Date: \_\_\_\_\_ \*Sex \_\_\_\_\_ \*Race \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_ Involvement: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Birth Date: \_\_\_\_\_ \*Sex \_\_\_\_\_ \*Race \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_ Involvement: \_\_\_\_\_

*\* To be used for DeForest Police Department statistics.***(You may use additional sheets or submit a separate written statement)****DESIRED OUTCOME**

What would you like to have happen as a result of filing this complaint?:

**SIGNATURE****NOTE: Wis. s.s. 946.22(2) False complaint of police misconduct: "Whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture."**\_\_\_\_\_  
Complainant Signature\_\_\_\_\_  
Date**DEFOREST POLICE DEPARTMENT USE ONLY****0** Resolved by Initiating Supervisor      **0** Request I.A. Investigation**DISTRIBUTION: 1. Internal Affairs Division****2. Complainant/ Agent**

(Detail of Incident Continued from Page 1)