

# Mt. Healthy Police Department 7700 Perry St. Mt. Healthy, OH 45231

MHPD USE ONLY
DATE RECEIVED
TIME RECEIVED
RECEIVED BY (PRINT NAME)
,

### CITIZEN COMPLAINT FORM

#### Instructions:

- 1. Complete with as many details as possible.
- 2. Return the completed form to the Office of the Police of Police.

COMPLAINANT INFORMATION	This form is to	be completed b	by the person ma	aking the compla	aint.
LAST NAME FIRST	NAME	MI.	DATE OF BIRTH	SEX	RACE
HOME/CELL PHONE	WORK PHONE &	EXTENSION	DRIVER	LICENSE NUMBER &	& STATE
ADDRESS		CITY		STATE	ZIP
OFFICER(s) / DEPARTMENT INVOL	VED				
OFFICER'S / DEPARTMENT NAME	BADGE# CAR#	OFFICER'S DEPAR	RTMENT NAME	BADGE#	CAR#
OFFICER'S / DEPARTMENT NAME	BADGE# CAR#	OFFICER'S DEPAR	RTMENT NAME	BADGE#	CAR#
OFFICER'S / DEPARTMENT NAME	BADGE# CAR#	OFFICER'S DEPAR	RTMENT NAME	BADGE#	CAR#
WITNESS INFORMATION				<u>``</u>	
LAST NAME FIRST 1	NAME	MI.	DATE OF BIRTH	SEX	RACE
HOME/CELL PHONE	WORK PHONE & I	EXTENSION	DRIVER	LICENSE NUMBER &	& STATE
ADDRESS		CITY		STATE	ZIP
LAST NAME FIRST 1	NAME	MI.	DATE OF BIRTH	SEX	RACE
HOME/CELL PHONE	WORK PHONE & I	EXTENSION	DRIVER	LICENSE NUMBER &	& STATE
ADDRESS		CITY		STATE	ZIP

# Citizen Complaint Form

# WITNESS INFORMATION CONTINUED

LAST NAME	FIRST NAME	MI.	DATE OF BIRTH	SEX	RACE
HOME/CELL PHONE	WORK PHONE & E	DRIVER LICENSE NUMBER & STATE			
ADDRESS		СПҮ	STA	ATE	ZIP
NCIDENT DETAILS	Please be as speci	fic and detailed as	possible.		
DATE OF INCIDENT	TIME OF INCIDENT MHPD REPORT # (If known)		wn)		
OCATION OF INCIDENT					
TURE OF COMPLAINT					
			***************************************		
				<u></u>	
			<b>-</b>		

	Citizen Complaint Form	
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I swear and affirm that the preceding st	atement is true and accurate.	
i swear with aritim that the proceeding se		
		<u></u>
	Print name	
	Signature of person making complaint	date signed
		_
Sworn to and subscribed before me on this	day of ,	_
Signature of Notary Public		

#### **ADVISEMENT OF § 2921.15**

Under Ohio Law, it is illegal for a person to knowingly file a complaint against a peace officer that alleges that the police officer engaged in misconduct in the performance of the officer's duties if the person knows that the allegation is false. If found guilty of making a false complaint, you could be fined up to \$1,000.00, sentenced to serve up to six (6) months in jail, or both (Section 2921.15 of the Ohio Revised Code). In addition, you may also be subject to civil penalties and actions. This advisement is for your information and is not intended to prevent you from making a legitimate complaint.