

ASHTABULA POLICE DEPARTMENT COMPLAINT AGAINST PERSONNEL FORM

Complaining Parties Name(Alleged Victim)	Date/Time Reported
Complaining Parties Name Address	Complaining Parties Phone Number
Type of Complaint	Location of Occurrence
Employee(s) Name and Position (if known)	Date and Time of Occurrence

Please write a summary of events below and the reason(s) why you feel that the Police personnel were involved in misconduct or unreasonable behavior.

(continue on back in necessary)

Please provide witness names and phone numbers (if any)

Please answer the follow questions by circling Yes or No

- (Y) (N) My complaint and statement is true and dos not contain and false information.
- (Y) (N) I understand the I may be asked to be interviewed and/or give either additional statements or be asked to verify information through the use of a polygraph or Voice Stress Analyzer (VSA). This includes any witnesses I may have.
- (Y) (N) I understand that I may be asked to give testimony at an administrative, civil, or criminal hearing (under oath), if matters require such action(s).
- (Y) (N) I understand that I may be asked for the release of medical records or other personal information that is pertinent to this complaint.
- (Y) (N) I understand that it is a violation of Ohio Revised Code (ORC) section 2921.15, "Making false allegation of peace officer misconduct", to file a complaint against a police officer knowing that the allegation(s) are not true and if it is discovered that I have lied about the misconduct, I am subject to criminal charges under that code.

Signature *(by signing I attest all information I provided on this form is true and accurate)* / Date and Time

I understand that this report may be obtained at the police department and returned to the Chief of Police directly. I am not required to give the nature of complaint to personnel when I obtain this form. I may complete this form and leave it with the on-duty supervisor; the on-duty supervisor will forward it to the Chief of Police. I may also give or mail the completed form directly to the Chief of Police:

Robert D. Stell, Chief of Police 110 W 44th St Unit 1 Ashtabula OH 44004

