



**Shorewood Police Department**  
**Citizen Complaint Form**

The Shorewood Police Department takes seriously all complaints regarding the service provided by the Department and the conduct of its members. The Department will accept and address all complaints of misconduct in accordance with policy and applicable federal, state and local law.

No member of the Shorewood Police Department will attempt to interfere or influence your right to complain about the service this department provides to you. Your complaint will be thoroughly and impartially investigated. Before completing this form, please refer to the citizen complaint brochure that explains the process and defines possible findings.

**Date:** \_\_\_\_\_

<b>Complainant Information</b>		
Name:		
	(Last)	(First) (Middle)
Address:		
Home Phone:		Date of Birth: <span style="border-bottom: 1px solid black;"></span>
Cell Phone:		Email: <span style="border-bottom: 1px solid black;"></span>
Work Phone:		
		Work Hours: <span style="border-bottom: 1px solid black;"></span>

<b>Employee Involved</b>
Name, Badge #, Rank (if known), or description: _____

<b>Incident Information</b>		
Date:	Time:	Location:

<b>Witness Information</b>		
<i>(Additional witness names can be added to the back of the form)</i>		
Name:		
	(Last)	(First) (Middle)
Address:		
Home Phone:		Cell Phone: <span style="border-bottom: 1px solid black;"></span>
Name:		
	(Last)	(First) (Middle)
Address:		
Home Phone:		Cell Phone: <span style="border-bottom: 1px solid black;"></span>

**Details of Complaint**

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**Filing of False Reports**

Pursuant to Wis. Stats. Section 946.66(2), whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture.

**Signature**

Complainant Signature: \_\_\_\_\_ Date: \_\_\_\_\_