



**Isleta Police Department
Formal Citizens Complaint Form**

Date of Complaint: _____

Complainant's Name: _____

Date of Birth: _____

Complainant's Address: _____

Complainant's Contact Number: _____

Case# _____

Officer(s) Name: _____

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

*Please request or add additional statement pages

Complainant Signature

INTERNAL USE ONLY

Complaint Codes

_____ Excessive Force _____ Rudeness/Discourteous _____ Failure to Act
_____ Speeding _____ Misconduct _____ Other (Specify) _____

Date of Occurrence: _____ Time: _____ AM / PM

Location: _____

Witness Name: _____ Contact #: _____

Witness Name: _____ Contact #: _____

Witness Name: _____ Contact #: _____

Witness Name: _____ Contact #: _____

Evidence Reviewed: _____

Complaint Advised of Disposition: Yes _____ No _____ Date: _____

If "No," Reason: _____

Disposition: Unfounded _____ Non-Sustained _____ Sustained _____

Supervisor Assigned: _____ Date Assigned: _____

Date Completed: _____

Date Submitted: _____

Submitted To: _____