



**CITY OF SOUTH LAKE TAHOE  
POLICE DEPARTMENT**

**CITIZEN'S PERSONNEL COMPLAINT**

EMPLOYEE COMPLAINED OF \_\_\_\_\_

RECEIVED \_\_\_\_\_  
Date Time

DESCRIPTION OF EMPLOYEE \_\_\_\_\_  
(Include badge number if known)

DATE AND TIME OF INCIDENT \_\_\_\_\_

LOCATION OF INCIDENT \_\_\_\_\_

DETAILS OF COMPLAINT (Include nature of complaint, names and addresses of witnesses; any doctor, hospital, or attorney contacted regarding this complaint. It is important that as many actual details as possible be included, so that your complaint may be thoroughly investigated. Use an additional sheet if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I declare, under penalty of perjury, that the foregoing statements are true to the best of my knowledge and belief.**

RECEIVING OFFICER: SIGNATURE \_\_\_\_\_  
NAME \_\_\_\_\_  
Signature and badge number ADDRESS \_\_\_\_\_  
TELEPHONE \_\_\_\_\_

WHEN AND WHERE CAN YOU BE CONTACTED (Time and Place):  
\_\_\_\_\_

**I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENT**

\_\_\_\_\_  
Complainant