Appendix B

Department/Agency _____ IA Case Number _____

INTERNAL AFFAIRS REPORT FORM

Person Making Report (Optional, But Helpful)

Full Name _____ Phone _____ Preferred? ☐

Address _____ Email _____ ☐

City, State _____ DOB _____

Officer(s) Subject to Allegation (Provide Whatever Info Is Known)

Officer(s) _____ Badge No. _____

Incident Site _____ Date/Time _____

In the space below, describe the type of incident (traffic stop, street encounter) and any information about the alleged conduct. If you cannot fit your response below, feel free to use extra pages and attach them to this document. If you do not know the officer's name or badge number, provide any other identifying information.

Other Information

How was this reported? ☐ In Person ☐ Phone ☐ Letter ☐ Email ☐ Other _____

Any physical evidence submitted? ☐ Yes ☐ No **If yes, describe:** _____

Was incident previously reported? ☐ Yes ☐ No **If yes, describe:** _____

To Be Completed by Officers Receiving Report

_____ _____ _____

Officer Receiving Complaint Badge No. Date/Time

_____ _____ _____

Supervisor Reviewing Complaint Badge No. Date/Time