

APPENDIX C

CITIZEN COMPLAINT STATEMENT FORM

Complainant Name _____ DOB _____

Address _____ Phone _____

I, _____, give the following statement to
_____ of the Onalaska Police Department. I am
making this statement freely and voluntarily and understand that:

1. The Onalaska Police Department has an obligation to investigate the alleged wrongdoing of any of its employees and will investigate the situation or circumstances as I have presented them in my statement.
2. The officer involved in this situation may be subject to discipline by the Onalaska Police Department and/or prosecuted for violations of the law.
3. I may be subpoenaed and required to testify under oath in a civil or criminal proceeding pertaining to my statements.
4. The making of a false complaint against a law enforcement officer which I do not believe to be true is subject to a Class A forfeiture, state statute 946.66(2).

Knowing this, I hereby give the following statement:

The above statement is true and correct to the best of my knowledge. Any erasures, strikeouts, additions or corrections have been initialed.

Signature (Full Name)

Date/Time

Witness

Date/Time