IA	Case	Number	
	Juse	NULLIDEL	

INTERNAL AFFAIRS REPORT FORM					
Person Making Report (Optional, But Helpful)					
Full Name	Phone	Preferred?			
Address (Apt #)	Email				
City, State, Zip	Date of Birth				
Officer(s) Subject to Allegation (Provide Whatever Info Is Known)					
Officer(s) Name	Badge No				
Incident Location	Date/Time				
In the space below, describe the type of incident (traffic stop, street end your response below, feel free to use extra pages and attach them to the provide any other identifying information.					
Other In	formation				
How was this reported?  In Person  By Phone  By Letter	□ By Email □ Other				
Any physical evidence submitted?  Yes No If yes, descr	ibe:				
Was incident previously reported?  Yes No If yes, descr	be:				
To Be Completed by Officers Receiving Report					
Officer Receiving Complaint	Badg	e No. Date/Time			
Supervisor Reviewing Complaint	Badge	e No. Date/Time			