



Wellfleet Police Department Citizen Complaint Form

How Received:

- ☐ Phone ☐ In Person ☐ Officer Generated ☐ Anonymous ☐ Written Correspondence

Other: _____ Call / Case number: _____

Officer Involved:		Rank:	
Complainant:		Home Phone:	Work Phone:
Street Address:			
City/Town:			State:

Witnesses / Co-Complainant:	Address:	Phone:

Date/Time of Incident:	Date/Time Reported:
Location:	
Reported To:	Rank:

Complaint: _____

Continue Other Side

Complainant Signature

Receiving Officer

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

Receiving Officer: _____ Date: _____