



Erie Police Department Citizen Complaint Form

Name of Complainant		Date of Birth	Social Security Number
Address		Phone Number	
City, State, Zip		Alternative Phone Number or email	
Incident Number: (If Known)	Location where incident occurred	Date & Time Occurred	
Names of Officers, Badge Numbers and/or Car Assignment			
1.		2.	
3.		4.	
Persons Who Actually Witnessed the Event			
Name	Address	Phone Number	
<p>I accused the named members or employees of the City of Erie Police Dept. of misconduct and/or improper procedure based on the facts contained within this Citizen Complaint Form. I understand that I may be required to give additional statements to investigators, attend public hearings and that my failure to do so, could result in dismissal of the complaint.</p> <p>I declare that the statement on the reverse side is true and correct. I understand that providing a false statement, which is intended to mislead a public servant in the performance of their official function, is punishable under Pennsylvania Law PCC 4904 relating to Unsworn Falsifications.</p> <p style="text-align: center;">PLEASE PROVIDE A SUMMARY OF THE COMPLAINT ON THE BACKSIDE OF THIS FORM.</p>			
Signature of Complainant			Date
OFFICIAL USE ONLY:			
Officer Receiving Complaint:		Badge Number	Date
Office of Professional Standards			
Assigned Investigator		Date Received	Internal Tracking No.

Summary of Incident: Please be as detailed as possible. Use additional pages if necessary.