



GREENBELT POLICE DEPARTMENT CITIZEN COMPLAINT FORM

Log #: _____
Date _____
Received: _____

To: Chief of Police

From: _____ Phone: _____
(Your Name-Please Print)

(Your Address)

When and where did the incident occur about which you wish to complain?

Date: _____ Time: _____ Location: _____

Please list names and badge numbers of personnel involved, if you know them:

Please list the names and addresses of any witness(s) to the incident:

What is your complaint? Please describe in your own words:

(please use separate sheet of paper if necessary)

NOTE: Must be notarized if excessive force complaint _____
(your signature)

Subscribed and sworn before me this _____ Day of _____

(Notary Public-My commission expires)

Please mail or return this form to:
Chief of Police
Greenbelt Police Department
550 Crescent Road
Greenbelt, MD 20770

Thank you for bringing this complaint to our attention.

Warning: Any person knowingly making a false statement, report or complaint in the course of an investigation is subject to penalties as provided in the Annotated Code of Maryland.