CITIZEN COMPLAINT FORM

Gila River Police

Department

CITIZEN COMPLAINT







"To Protect and Serve"

Gila River Police Department PO Box 2186 Sacaton, AZ 85147 520-562-7139

Citizen Complaint Form Office Use Only Instructions: Date and time received______ Initials_____ 1. Fill out form. Please write legibly. Your information is confidential. 2. Submit the form to the Gila River Police Department at the address below. 3. You will be contacted for a follow up from the assigned supervisor that is investigating your complaint. Name: Date: Street Address: _____ Home Phone: _____ Work Phone: _____ City: _____ State: ____ Zip Code: Location or Address Where Incident Occurred: Date of Incident: _____ Time: _____ am/pm Was someone arrested? Yes No Name (s) of the person (s) arrested: Witness (es) Name (s): Name of GRPD Officer Involved: ______ GRPD Vehicle #_____ Officer Badge #_____ Briefly describe what happened (attach additional sheets of paper if How would you like to see the complaint resolved?

Mediation involves bringing you and the officer involved together with an outside facilitator in a confidential setting to work out a resolution both parties can

Mail Forms to: C/o Citizen Complaint
Gila River Police Department

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agree to. Would you like to mediate this complaint? Yes No