Civilian Complaint Form

| Incident number: | Date rep | ort filed: | | | | | | |
|---|------------------------------|------------------|--|------------------------------------|---------------|------------------|--------------------------|--|
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| | | | | | | | | |
| Reporting Party Informat | ion | | | | | | | |
| Name (Last, First, Middle) | | | Hon | ne phone #: | Business #: | | Mobile #: | |
| | | | | | | | | |
| Address (Street, City, State, 2 | Zip Code) | | | | Date of birth | | Driver license #: | |
| , , , | • | | | | | | | |
| | | | | | | | | |
| Victim of Misconduct (if a | lifferent fi | rom above) | | | | | | |
| Name (Last, First, Middle) | | · | Home phone #: | | Bu | siness #: | Mobile #: | |
| | | | | | | | | |
| Address (Street, City, State, 2 | 7in Code) | | | | | | | |
| Address (street, city, state, i | ip couc _j | | | | | | | |
| Day and date of incident | Tin | ne of inciden | +• | Location of incident: | | | | |
| Day and date of incident | | ie or meiden | <u>. </u> | Location of it | of incident. | | | |
| | | | | | | | | |
| Witness(s) | | | | | | | | |
| Name | Ad | dress | | Phone numbers (Home, Mobile, Bus.) | | | | |
| | | | | | | , , , | | |
| | | | | | | | | |
| | | | | | | | | |
| Department member(s) c | omplaine | d of: | | | | | | |
| Name of officer/employe | - | _ | Car number (if known): | | | Badge numb | Badge number (if known): | |
| Traine or officery employe | realite of officer/employee. | | car namber (ii known). | | | Dauge manne | er (ii kiiowii). | |
| | | | | | | | | |
| | | | | | | | | |
| Give a brief description o | f the even | +c +b >+ o d + | , this s | amplaint Atta | sch a | dditional chaots | ac nacoccaru | |
| Give a brief description o | i the even | its that led to |) tills t | ompiami. Atta | ich a | uullional sheets | as necessary. | |
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| | | | | | | | | |
| Signature of person receiving complaint | | | | Badge number: Bu | | Business phone: | | |
| - | _ | | | | | | | |
| | | | | | | | | |

Q: Forms\Public Forms PUB # 905 Updated 11/03/2021

Citrus Heights Police Department 6315 Fountain Square Drive, Citrus Heights, CA 95621 (916) 727-5500



The Citrus Heights Police Department welcomes justified complaints concerning the actions of our employees. As your Chief of Police, I want to assure you that this Department wishes to provide you the best law enforcement service possible.

SUMMARY OF COMPLAINT PROCEDURE

Every person has an absolute right to file a complaint. Your reluctance to prepare a complaint form shall not impair that right. If you do not wish to complete the form, or sign it, it shall be completed by the Watch Commander with whom the complaint is lodged. It is desirable that you come to the Police Department where your complaint can be received during a personal interview. However, complaints can be made by mail or by telephone, and may be made anonymously.

If the complaint is made by either telephone or mail, a copy of the complaint will be mailed to you if an address is provided. An investigator will contact all witnesses, examine any relevant physical evidence, and gather all information associated with each charge made in the complaint. After completion of the investigation, a disposition for each charge shall be made, based on each alleged act of misconduct.

The final disposition of your complaint will be made by the Chief of Police. Departmental procedure allows thirty (30) days for completion of an investigation into a Civilian's complaint. An extension may be granted by the Chief of Police, if necessary. You will be notified of the extension and the reasons for that extension. You will be notified by mail of the disposition of the complaint.

Thank you for bringing this matter to our attention. Every report will receive my personal attention.

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Sincerely,

Alexander A. Turcotte, Chief of Police

CIVILIAN COMPLAINT ADVISEMENT (PENAL CODE SECTION 148.6)

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CIVILIANS' COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CIVILIAN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT.

| Complainant: | Date: | |
|--------------|-------|--|

Mail to: Chief of Police, Citrus Heights Police Department, 6315 Fountain Square Drive, Citrus Heights, CA 95621

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