



Robinson Police Department Complaint and Commendation Form



I want to file a: Complaint Commendation

Are you filing on behalf of someone else? Yes No

His/Her Name: _____ Phone: () _____

Are you represented by an attorney regarding this matter? Yes No

His/Her Name: _____ Phone: () _____

Information about you:

Name: _____ Date of Birth: ____/____/____

Address: _____ Apt: _____

Day: () _____ Evening: () _____

Cell: () _____ E-mail: _____

Information about the incident:

Date: ____/____/____ Time: AM / PM

Address/Location: _____

Information about the Robinson Police Department employee(s) involved:

Name: _____

Name: _____

Information about a witness: (continue on reverse side; attach additional pages or documents if needed):

Name: _____ Phone: () _____

Address: _____

Briefly summarize what happened (attach additional pages or documents if needed):
