## **Stonington Police Department**

## **CIVILIAN COMPLAINT REPORT**

Please give this completed document to a Police Supervisor or send it to the Internal Affairs Unit of this agency at the following address or email: Captain Todd Olson, Stonington Police Department, 173 South Broad Street, Pawcatuck, Connecticut 06379. Email: tolson@stonington-ct.gov

Date of Incident	Time of Inc	ident	Date Reported		Time R	eported	
Location of Incident	<del>-</del>						
Complainant's Name		Compla	inant's Address (Stre	et, City, Sta	te, ZIP)		
Complainant's DOB	Complainant's Ho	ome Phone#	Complainant's Wor	k Phone#			
Complainant's Cell Ph	none#	Complainant'	s E-mail				
Employer			Occupation				
Employer's Address			1	Employer's	Telepho	ne	
Name of Person Assis	sting Complainant	Address			Telephor	ne	
Employee Complaine	d about (if known)	: (Name or ph	ysical description, Ba	adge #, Car #	, etc.)		
Witness Information	(Name, D.O.B., Add	dress, Telepho	ne #, etc.)				
Please provide answe	ers to the following	questions:			YES	NO	UNSURE
To your knowledge     audio taped by ar		art of the incid	dent complained of v	ideo or			
2. Are you afraid for	r your safety, or tha	at of any other	person, for any reas	son as a			
•	ntened you or other		intimidate you in an	effort to			
•	n making this complead, write and spea		Language?				
5. If your answer to	Question #4 is "No	o" or "Unsure"	, have you been prov derstand and fill out				
(If you answered "Yes	s" to any of the abo	ove questions,	please provide detai	ls below.)			

supporting documentation, as appropriate; including letter	.13, C-mans, photogra	phs, video o	r audio tapes, etc.
			<del>-</del>
,			
(Attach additional pages, if necessary)			
I have read, or had read to me, the above and attached cor	•	•	
answers are true and accurate to my knowledge. I underst	_		
law enforcement officer in his official function is a violation	of Connecticut Gene	eral Statute 5	3a-15/b and could result
in my arrest and being fined and/or imprisoned.			
Complainant's Signature	Date and Time Sign	ed	
Complainant's Signature  On this the day of,,			5. §§1-24, 3-94a et seq.)
			s. §§1-24, 3-94a et seq.)
On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and	Notary (For Author	ity See C.G.S	5. §§1-24, 3-94a et seq.)
On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this		ity See C.G.S	5. §§1-24, 3-94a et seq.)
On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and	Notary (For Author	ity See C.G.S	5. §§1-24, 3-94a et seq.)
On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.	Notary (For Author Print Rank/Name/II	ity See C.G.S	5. §§1-24, 3-94a et seq.)
On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.	Notary (For Author	ity See C.G.S	5. §§1-24, 3-94a et seq.)
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On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.  Person Receiving	Notary (For Author Print Rank/Name/II	ity See C.G.S	
On this the day of,, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.  Person Receiving Rank/Name/ ID Number	Notary (For Author Print Rank/Name/II	ity See C.G.S	Time Received