

**TOWN OF SMYRNA
DEPARTMENT OF POLICE**

COMPLAINT OF MISCONDUCT

Internal investigation Complaint Number: _____ <i>(for official use only)</i>

(use back of page for more space)

Employee(s) involved: _____

Complainant's Name: _____

Address: _____

Home Phone: _____ **Work Phone:** _____

Location of Incident: _____

Date & time of Incident: _____

Witness information: (use this space to list all known witnesses, include addresses and telephone numbers whenever possible)

Nature of Complaint: (details of what occurred)

Date _____ **Signature** _____

INTERNAL AFFAIRS USE ONLY

Charges Pending against complainant, (if any): _____

Officer taking complaint: _____

Date & Time: _____

COMPLAINT OF MISCONDUCT

Re: Internal investigation

complaint #: _____

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Officer presenting complaint to Chief of Police: _____

Date & time: _____

Initial disposition of investigation:

- Forward to appropriate supervisor for investigation
- Authorized for Internal/Administrative investigation

ORDERED BY: _____
Norman Wood
Interim-Chief of Police

DATE & TIME: _____

Follow-up investigation:

- Re-assign to appropriate supervisor
- Re-assign to Internal/Administrative Investigation

ORDERED BY: _____
Norman Wood
Interim-Chief of Police

DATE & TIME: _____