

Sioux City Police Department Citizen Complaint Form

CONFIDENTIAL

Name of Complainant: _____ DOB: _____

Home Address/Telephone: _____

Sex: M ___ F ___ Race: White ___ Black ___ Asian ___ Nat. Am. ___ Other ___

Place of Employment/Telephone: _____

Preferred Time and Place of Contact: _____

Nature of Complaint: Unbecoming Conduct Offensive Language
 Unsatisfactory Service Rude Behavior Excessive Force
 Other: _____

Case No. _____ Incident Date/Time: _____

Location: _____

Name of Officers Involved:

1. _____

2. _____

3. _____

Witnesses: (Names/Addresses/Telephone)

1. _____

2. _____

3. _____

Any person who reports false information to a law enforcement authority knowing that the information is false or reports the alleged occurrence of a criminal act knowing that act did not occur is subject to criminal charges under Iowa Code 718.6 (False Reports) and civil remedies under Iowa Code 80F.1(13).

