

Reporting Party

Name

LAKE HAVASU CITY POLICE DEPARTMENT

2360 McCulloch Boulevard North Lake Havasu City, Arizona, 86403-5947 928-855-1171

Complaint / Commendation Form

Date of Birth

The Lake Havasu City Police Department views all allegations of impropriety against its police personnel seriously and actively conducts investigations on employee misconduct. For this reason, the complainant must ensure that their complaint is based on fact.

We also like to know of an employee who has done something for which you believe they should receive recognition.

Home Address			Home Phone Number		
Business Address			Bus. Phone Number		
Local Address (if different from above)			Mobile Phone Number		
Incident Information					
Location of Incident Re			Report or Citation Number		
Date/Time of Incident			Reporting Officer (ID Number)		
Police Department Employee(s) Involved (Na	me/ID Nu	mber)			
Witness(es)					
Name/Address			Phone Number/s		
Name/Address			Phone Number/s		
False reporting in an attempt to unjustly disc their employment in jeopardy can result in ci involved.					
I read and understand the above statement.					
Signature of reporting party			Date		
PD-ADM-409 (1-17)					

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