

PERSON MAKING COMPLAINT

Full Name: _____ Date of Birth: ___/___/_____

(Last, First, Middle) (MM/DD/YYYY)

Address: _____

(Please include your complete address- House number, street or county road name, city, state, and zip code)

Telephone: _____/_____/_____

(Home, work, cell, or whatever applicable)

INCIDENT IN QUESTION

Date of incident: ___/___/_____ Day of week: _____ Time: _____ AM or PM

(Please circle one)

Location of incident: _____

(Please include a complete address or describe the location as much as possible)

Officer's name: _____

Type of contact: _____

(I.E. Traffic stop, pedestrian stop, etc...)

Witness name (if applicable):

Address: _____

(Please include your complete address- House number, street or county road name, city, state, and zip code)

Telephone: _____/_____/_____

(Home, work, cell, or whatever applicable)

Narrative of incident: Please print and be as neat and as detailed as possible. Thank You!

DISD POLICE DEPARTMENT
Chief Chiz Bell
701 E 10th Street
Dalhart, Texas 79022

806-244-7349

Signature of Complainant: _____

Notary _____

On this _____ day of _____, 20 ____, personally
appeared _____, whom on their oath, stated the above
facts were true and correct.

Notary Public in and for Dallam or Hartley County, Texas