

Glenarden Police Department
Complaint Concerning Police Practices

(Today's Date)

Your Name: _____
(Last) (First) (Middle) (Date Of Birth)

Your Address: _____
(Street) (Apartment Number)

(City or Town) (State) (ZIP Code) (Home Phone)

Where can you be reached during the day? _____
If you are visiting the Metropolitan Area, where can you be contacted in this area? _____

(Address) (Phone Number)

When and where did the incident that you are complaining about occur?

(Date and Time)

(Give the address of incident or describe location in detail)

List the name(s) of the officer(s) involved if you know them.

(1) _____ (2) _____
(3) _____ (4) _____

Are these officers from the Prince George's County Police Department or from some other Law enforcement agency?

Prince George's County Police _____ Other(Please List) _____

Please list any identification of the officer that you know (ID Number, Car Number, Physical Description, ETC.)

List the name(s) and address of any witnesses to the event you are complaining about.

(1) _____ (2) _____

What is your complaint and please describe what happened in your own words (use extra paper if necessary and attach to this form).

(Continuing on next page)

