

# RIGBY POLICE DEPARTMENT



173 E Main St, Suite 1  
Rigby, Idaho 83442  
208-745-1951  
Fax 208-745-1949

## **COMPLAINT AGAINST POLICE PERSONNEL (CONFIDENTIAL)** FORM MUST BE COMPLETED IN IT'S ENTIRETY

Name of complainant: \_\_\_\_\_

At what address can you be located?: \_\_\_\_\_

\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Date and time of incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

Officer against whom complaint is being filed:

Name: \_\_\_\_\_

Badge: \_\_\_\_\_

Vehicle ID: \_\_\_\_\_

List any witnesses with their contact information:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please write your statement on the next page.

