

**OFFICE OF CIVIL RIGHTS AND  
WAGE ENFORCEMENT**  
7 E. Redwood Street, 9th FL  
Baltimore, MD 21202  
P. 410-396-3151



IAD Number: \_\_\_\_\_  
CRB Number: \_\_\_\_\_  
Received Date: \_\_\_\_\_  
Complaint Rec'd by: \_\_\_\_\_

**BALTIMORE CITY CIVILIAN REVIEW BOARD  
COMPLAINT FORM**

Today's Date: \_\_\_ / \_\_\_ / \_\_\_

**TYPE OF COMPLAINT**

- False Arrest                       False Imprisonment                       Harassment  
 Abusive Language                       Excessive Force

**COMPLAINT FILED AT**

- Office of Civil Rights & Wage Enforcement / Civilian Review Board                       Legal Aid Bureau                       District Station (Name) \_\_\_\_\_  
 Internal Affairs Division                       Maryland Commission on Civil Rights                       Other \_\_\_\_\_

ARE YOU INTERESTED IN LEARNING ABOUT MEDIATING THIS COMPLAINT? YES  NO  MAYBE

**PERSON MAKING COMPLAINT / INCIDENT INFORMATION**      NOTE: PLEASE PRINT CLEARLY

Complainant's Name (First, MI, Last) \_\_\_\_\_ Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age	Race	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth mm/dd/yyyy	Cell #1	E-mail
				Phone #2	

Name of Alleged Victim (If different from above) \_\_\_\_\_ Date / Time of Incident \_\_\_\_\_ Location of Incident \_\_\_\_\_

Witness or Reference Name (First, MI, Last) \_\_\_\_\_ Full Street Address \_\_\_\_\_ Phone \_\_\_\_\_

**OFFICER ACCUSED OF MISCONDUCT**

Officer(s) Name (First, MI, Last) \_\_\_\_\_

Race \_\_\_\_\_  Male  Female      Badge # \_\_\_\_\_ Rank \_\_\_\_\_      List any additional officer(s) information. NOTE: PLEASE PRINT CLEARLY

**NARRATIVE STATEMENT**

Write everything that happened exactly as it happened and do not leave anything out of your statement.

NOTE: PLEASE PRINT CLEARLY | USE SECOND PAGE IF NECESSARY


I understand that this statement of complaint will be submitted to the Baltimore Police Department/Civilian Review Board and will be the basis for an investigation. Further, I sincerely and truly declare and affirm, under penalties of perjury, that the facts contained in my Complaint Statement are true to the best of my knowledge and belief. In addition, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion, or promise of any kind.

\_\_\_\_\_  
**Complainant's Signature**

\_\_\_\_\_  
**Date of Complaint**

Notary Signature \_\_\_\_\_  
Notary (Seal) \_\_\_\_\_  
My commission Expires: \_\_\_\_\_

