## Police Complaint Form



Please fill out this form to the best of your ability. Print clearly.

All complaints will be fully investigated by BPD's Internal Affairs (IA). The Civilian Review Board (CRB) will review all IA investigations of CRB eligible complaints. CRB may authorize an independent investigation. Complaints will be investigated by BPD if they are signed or unsigned by the person making the complaint. Questions? Contact either:

CRB: 410-396-3151 / civilrights@baltimorecity.gov					IA: 410-396-2300 / complaints@baltimorepolice.org					
you need an interpreter	? □Yes □	No If yes, w	hich language?			¿Necesita uste	d un inté	rprete de español?	□Sí □No	
. TELL US ABO	UT THE	E PERSOI	N COMPLE	TINC	G THIS F	ORM				
Name (First, Middle Initial,			Iome Address			3. Date of Bir	th 4. A	ge 5. Race/Ethnicit	y 6. Disability	
Anonymous/I do not want to share	personal info.								□ Yes □ I	
Gender/Gender Identity	8. Contact	t Number		9. Otl	her Contact N	lumber	10	). Email Address		
1. Location of Incident			12. Incident Date		13. Incident		at Time 14. Was there an arrest? ☐ Yes ☐ No			
5. Was a ticket or summons issued? 16. Ticke			/Summons/Case # 17. Was th			nere an injury?  Yes  No				
Yes No		20111011017				, describe the injury and any medical care received in your statement on Page 2.				
					ij yes, describe	the injury and any me	uicui cuic re	ecived in your statement of	ruge z.	
I. TELL US ABO	UT THE	E VICTIN	I (If different	from	person con	npleting this f	orm)			
3. Victim's Name (First, MI,			ome Address	., <u>,</u>		20. Date of Birth		22. Race/Ethnicity	23. Disabilit	
Person named above is the victim.	Go to Section II.	1.							☐ Yes ☐ N	
4. Gender/Gender Identity 25. Contact N			umber 26.		ther Contact Number		27. Em	ail Address		
							•			
II. TELL US ABO	UT THE	E OFFICE	CR (To the be	st of y	our knowle	edge)				
28. Officer's Name (First, MI, Last)		29.	29. Assignment/Police District				30. Badge # and/or Sequence #			
. Description of the Officer	or addition	al details (For	more space, cont	tinue in	your stateme	ent on Page 2)				
** If		· · · · · · · · · · · · · · · · · · ·								
** If multiple officers involved, pl	•									
V. TELL US ABO									tement)	
2. Witness's Name (First. MI. Last)		3	33. Home Address (If known)			34. Contact Number				
Other Control Noveler				1	26 Famil A	Liling				
5. Other Contact Number				36. Email Address						
Z CIONATUDE A		DEDCON	COMPLET		THIC FO	DM				
SIGNATURE ( understand that this stater							and will he	the hasis for an inves	tigation	
The facts contained in my s								•	-	
made by me voluntarily and	l without pe	rsuasion, coer	cion, or promise o	of any ki	ind.					
Print Name:			Signature:		Date:			te:		
BE COMPLETED BY BE	PD OR CRB	PERSONNE	CC#			IA#		CRB#		
7. BPD Member Who Receiv	ed This Fori	m	38. Seq. :	#	39. Date Cor	mplaint Received		40. Time Complain	t Received	
1. CRB Member Who Received This Form (If applicable)			e) 42 Date	42. Date Complaint Received				43. Time Complaint Received		
*1. CND INTERPOLE WITH NECESTAL THIS FORTH (IT applicable)				42. Date Complaint Received			43. Time Complaint Received			

Ensure the next page (STATEMENT) is completed and remains with this form.

## SUBMIT A POLICE COMPLAINT THROUGH <u>ANY</u> OF THESE METHODS:

- o To BPD, by giving this form directly to any BPD employee, visiting any BPD location, or
  - Call: 1-833-288-7245 (24-hour hotline) or 410-396-2300 (Internal Affairs)
  - Email: Complaints@baltimorepolice.org
  - Or visit: www.baltimorepolice.org/transparency/citizen-complaint
  - In person or by mail to:

BPD IA 2524 Kirk Ave Baltimore, MD 21218

- o To the Civilian Review Board, through any of the following ways:
  - Call: 410-396-3151
  - Email: <u>crbintake@baltimorecity.gov</u>
  - Or visit: https://civilrights.baltimorecity.gov
  - In person or by mail to:

Civilian Review Board 7 E. Redwood St., 9<sup>th</sup> Floor Baltimore, MD 21202

Within 10 days of receiving your complaint, you will be contacted by the agency to which your complaint was submitted (either BPD or CRB). The agency will contact you through the information provided on this form.

If you would like to find out the status of your complaint, you may call IA at 410-396-2300 or, for CRB-eligible complaints, CRB at 410-396-3151 and provide the reference number (CC#) on this form.

## Police Complaint Form



## **STATEMENT**

happened. What is your primary complaint and what outcome believe is important and that you think would		
TO BE COMPLETED BY BPD OR CRB PERSONNEL CC#	IA#	CRB#
COII	, w	5.7511