Lebanon Division of Police
Internal Affairs Report
Complaint Against Agency

Date of Complaint:_____ Time of Complaint:_____ Case No.:_____

Complainant Name: _____ Telephone No.:_____

Complainant Address:_____

Complete a narrative of the facts of the complaint. Describe who, what, where, when, why and how. List any witnesses and evidence to support the allegation. Have the complainant complete a written statement or record the conversation. List all employees involved. If additional room is needed for the information, use a Supplemental Report Form. If this is considered a minor complaint that can be handled by the supervisor, what does the complaint wish to be done and what is the resolution of the complaint?

Nature of Complaint:_____ Date of Occurrence:_____

Police Employees Involved: _____

This report is to be completed and forwarded to the Assistant Chief of Police by the end of the shift.

☐ Referred to I.A. ☐ Handled by Supervisor

Supervisor Taking Complaint

☐ Exonerated ☐ Not Sustained ☐ Sustained ☐ Unfounded

Complainant notified of outcome on_____ by ☐ In Person ☐ Telephone ☐ Mail (attach copy of letter to file).

Investigation Conducted By

Reviewed by Assistant Chief of Police: