

Gorham Police Department

Citizen Complaint and Inquiry Form

Date of Complaint: _____

Nature of
Complaint: _____

Date of

Incident: _____

Location of Incident: _____

Complainant's Name: _____

Home Address: _____ Phone: _____

Business Address: _____ Phone: _____

Other Complainants: _____

Officer Involved: _____

Officer 2 Involved: _____

Officer 3 Involved: _____

Summary of Incident: _____

Complaint Received By: _____

Witnessed By: _____

Disposition of Complaint or Inquiry: _____

Resolved with Citizen and/or No Further Action Deemed

Necessary: _____

Routing: _____

Signature of Supervisor: _____ Date: _____

Signature of Lieutenant: _____ Date: _____

Signature of Chief: _____ Date: _____

INFORMAL RESOLUTION OF COMPLAINT

GORHAM POLICE DEPARTMENT

DATE: _____

COMPLAINANT:

NAME: _____ DOB: _____

ADDRESS: _____

TELEPHONE #: _____

NATURE AND DETAILS OF COMPLAINT: _____

(Use the back of this form for additional space)

After consulting with _____ I agree to an informal
(Shift Commander)
resolution of the above described complaint. I agree to such a resolution
knowing that I have the right to submit a written formal complaint which
will be formally investigated by the Gorham Police Department. I understand
that the nature and kind of informal resolution to my complaint is within the sole
discretion of the Gorham Police Department.

Complainant Signature

Witness – Shift Commander

COMPLAINT FORM

Complainant's Name	Home Address	Home Phone
---------------------------	---------------------	-------------------

Witness or Other Complainant	Home Address	Home Phone
-------------------------------------	---------------------	-------------------

1. _____

2. _____

3. _____

Date and Time of Incident

Location of Incident

Details of Complaint:

Name of Person Assisting

Signature of Complainant

Reason for Assistance

Date and Time

Town of Gorham
Police Department
ADMINISTRATIVE COMPLAINT FORM

Name _____ Date _____

Time _____ Place _____

Persons Present _____

WARNINGS AND INFORMATION

Maine law provides in section 453, Chapter 19, Title 17-A Maine Criminal Code that:

A person is guilty of unsworn falsification if, with the intent to deceive a public servant in the performance of his official duties, he makes any false written statement which he does not believe to be true, provided, however that this subsection does not apply in the case of a written false statement made to a law enforcement officer by a person then in official custody and suspected of having committed a crime....

Unsworn falsification is a Class D crime punishable by a \$1,000 fine and/or a maximum of one year imprisonment

I UNDERSTAND THAT ANY FALSE STATEMENT MADE BY ME IN THE COURSE OF THIS COMPLAINT MAY SUBJECT ME TO CRIMINAL OR CIVIL LAW LIABILITY.

I realize that it may become necessary, during the investigation of this complaint, for me to meet with a member(s) of the Gorham Police Department to discuss this complaint, either in the presence or absence of the accused member(s), at the discretion of the department. I hereby accept and agree that if any action is initiated through a court or administrative hearing as a result of my complaint, my testimony before these hearings may be required. I hereby agree to make myself available to the aforementioned court or administrative hearing when requested to do so.

I HAVE READ THE ABOVE WARNINGS AND INFORMATION OR HAVE HAD IT READ TO ME. I UNDERSTAND AND DO HEREBY MAKE THE ATTACHED PERSONAL STATEMENT VOLUNTARILY AND OF MY OWN FREE WILL.

Witness Signature

Signature of Complainant
