

# PONDERAY POLICE

**PPD Control Number**

*To Be Completed by PPD Staff*

**Date & Time Received**

*To Be Completed by PPD Staff*

**Received By:**

**In Person | Fax | U.S. Mail**

**Other Specify:**

**Please provide as much information and detail as possible so we can address your concerns to the best of our ability.**

**Your Name – Last, First, Middle**

**Date of Birth**

**Age**

**Gender**

**Race/Ethnicity**

**Home Address**

**Home Telephone Number**

**Work Address**

**Occupation**

**Work Telephone Number**

**Other Means of Contacting You (cell phone, e-mail, friend)**

**General Nature of Incident**

**Location of Incident (Where)**

**Day of Week**

**Date of Incident**

**Time of Incident**

**Witnesses**

**Officers Involved (name, badge number if known)**

**Police Vehicle No./Description**

**Physical Description of Officer(s) (hair and eye color, height, sex, race/ethnicity, etc.)**

**Were you arrested or issued a citation? If yes, please provide case # or citation #:**

**Describe Injuries (If any)**

**Where Treated (name of hospital, doctor, etc.)**

**Preferred Language of Communication (If other than English)**

**Name(s), Telephone Number(s) or Contact Information for Other People Present During the Incident (including other deputies)**

**Did you talk to a supervisor? If so, who? (Name)**

<b>Your Name – Last, First, Middle</b>	<b>PPD Control Number</b> <i>To Be Completed by PPD Staff</i>
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<b>Attach Additional Pages if Necessary</b>	<b>Page</b>	<b>Of</b>
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<b>Certification – I understand that I will be re-contacted at the conclusion of a review of this incident. I hereby certify that to the best of my knowledge, and under penalty of perjury, the statements made herein are true.</b>	
_____	_____
<b>Name</b>	<b>Date</b>