GOULDSBORO POLICE DEPARTMENT



P.O. BOX 68 PROSPECT HARBOR, ME. 04669 OFFICE #: (207)-963-5589 NON-EMERGENCY #: (207)-667-7575 EMERGENCY #: 9-1-1 FAX #: (207)-963-2986



Officer Complaint Form

Complaints should be filed within 90 days of original incident. Read waiver on reverse side of this form prior to submitting.

Date:
Name of Individual Submitting Complaint:
Address:
Phone Number: Date of Incident:
Name of Officer Involved with Complaint:
Reason for Complaint:
Describe Incident in Detail (use reverse side if necessary):

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I have made this statement form out to the bo	est of my abilities and all information provided is accurate and
rue to my knowledge. All information provid	ded was of my own free will and I understand that providing
false information is a class D crime, punisho	able under 17-A section 453 as Unsworn Falsification . I have
read and understood this warning and wish	to submit this complaint by signing below.
Signed:	Date: