

RACIAL PROFILING COMPLAINT FORM

Name: _____ Date of Birth: _____

Address: _____ City: _____ State _____ zip _____

Phone #s Home: _____ work _____ cell _____

Best contact # _____

Officer name: _____

Location of Incident: _____

Date: _____ Time: _____

Other officer present: Yes No

Name of officer and Department: _____

Reason given for stop: _____

Were you arrested: Yes No

If yes, Charge: _____

Were you searched: Yes No

If yes, describe and indicate any items found: _____

Witness

Name: _____

Address: _____ City _____ State _____ zip _____

Phone: Home _____ Work _____ Cell _____

Name: _____

Address: _____ City _____ State _____ zip _____

Phone: Home _____ Work _____ Cell _____

Name: _____

Address: _____ City _____ State _____ zip _____

Phone: Home _____ Work _____ Cell _____

