CANTON POLICE DEPARTMENT OFFICE OF THE CHIEF OF POLICE P.O. BOX 24218, CANTON, OHIO 44701-4218 221 - 3<sup>RD</sup> ST. S.W., CANTON, OHIO 44702 (330) 489-3111

Interviewing Supervisor

Complaint No	=
Internal Affairs Case No.	

		PE	RSONNI	EL COMPLA	AINT		
Date	Time		Location of Inte	rview			
Complainant's Name				Address			
Residential Phone Work / 0		Work / Other Phone		Cell Phone / Pa	Cell Phone / Pager		
Nature / Type of Complaint							
Date of Occurrence		Time of	Occurrence		Day of Week		
Location of Occurrence							Was Complainant Arrested in the Incident?
Officer (s) Involved, Include I	Badge No. If known					Division of	r Bureau
Witness (es)							
Witness Address						Witness Ph	none No.
		Nari	rative / N	ature of Con	nplaint		
		Use	CPD Form 7	# 76 for additiona	al space		
SIGNATURE:					DATE:		
	NT ATTESTS OR S'	WEARS THA	T THE ABOVE I	NFORMATION IS THE			EIR KNOWLEDGE UNDER

Major Assigned

Bureau Assigned

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Original (white) - Chief

Complaint No	
Internal Affairs Case No	

Triplicate (pink) - Complainant

PERSONNEL	COMPLAINT - Narrati (Continued from CPD Fo	ive / Nature of Complaint orm # 75)
	•	
SIGNATURE:		DATE:
	EARS THAT THE ABOVE INFORMATION IS CATION, IS A FIRST DEGREE MISDEMEAN	THE TRUTH TO THE BEST OF THEIR KNOWLEDGE UNDER OR.
Interviewing Supervisor	Major Assigned	Bureau Assigned

Duplicate (yellow) - Internal Affairs File