

Kenosha Police Department Citizen Complaint Form

Kenosha Police Department 1000-55th Street Kenosha, Wisconsin 53140

If you wish to make a complaint against a police officer of the Kenosha Police Department, you need to complete and sign this Citizen Complaint form. Once the department has received the signed form, an investigation will be initiated and completed as soon as possible. However, much depends on the depth of the investigation and/or the availability of involved persons. You will be provided a contact person who will keep you informed of the status of the investigation. Upon completion of the investigation, you will be provided with a written disposition from the Chief of Police or his designee which will explain the results of the investigation.

If the complaint is not resolved to your satisfaction, you may request a meeting with the Chief of Police to discuss the matter, or as an alternative, you may file formal charges against the police officer with the City of Kenosha Police and Fire Commission.

Pursuant to Section 62.13(5) of the Wisconsin Statutes, you may, as an alternative, file your complaint directly with the Board of Police and Fire Commissioners. Formal charges can be filed if you believe that you are an aggrieved person. Formal charges must be in writing and must be sufficiently detailed so that all parties understand the conduct involved and contain the specific rules, regulations, or standards of conduct you believe the police officer violated. The formal charges shall be filed with the Chairperson of the Board of Police and Fire Commissioners. The

rules for any subsequent inves	stigation and resolution of	of those charges are set by	y the Board.				
		C	Complainant's In				
Name (Last, First, Middle)			Date of Birth		Today's Date	Case Number	
<u>Address</u>		City		State	Zip	Email Address	
Home Phone	Cell Phone	Employer	<u>r</u>	<u>.I.</u>		Work Phone Number	
			Incident Infor	mation			
Incident Date and Time		Incident L		mation			
Details of Complaint							
			Witness Infor				
Witness Name (Last, First	, Middle)	<u>Phone</u>	Relationship	Address			
Witness Name (Last, First	, Middle)	<u>Phone</u>	Relationship	<u>Address</u>			
			Officer Inform	nation			
Name, Badge and Rank of	Accused Officer(s), i	f known, or Description	<u>vn</u>				
			Resolution Re	guested			
		LEGAL NOT	TE - PLEASE RE	AD BEFORE	SIGNING		
It is important to note that Wisconsin State Statute 9 knowingly makes a FALSI This statute has been add	946.66 states, E complaint regarding	which you know to be g the conduct of a Law	e untrue may subje v Enforcement Off	ect you to crimi ficer is subject	inal charges and/or a o to a Class "A" forfeitu	"Whoever	
			Acknowledge				
l acknowled	lge that I have read th	ne information on this o	document and the	at the informati	on and statement I pro	ovided are true and correct.	
Complainant's Signatu	re		Date		Witness Signatu	re	
		For Keno	osha Police Dep	artment Use (Only		
Copy of Complaint Provid	ed to Complainant			Disposition			
Date Complaint Assigned			_	Date Complain	nant Notified		
Complaint Assigned to			_	Notification M	lade By		_
		•	int completed doc Chief of Po Kenosha Police D 1000-55th St Kenosha, WI	olice Department Street	il to:		