## CITY OF MENOMONIE BOARD OF POLICE AND FIRE COMMISIONERS

## CITIZEN COMPLAINT FORM

Date:

1	Compleinant's Name					
1.	Complainant's Name:	(Last)	(First)	(Middle)		
2.	Address:					
3.	Phone Number:					
4.	Business Phone Num	ber. Work Hours:				
5.	Incident Date and Tir	ne:				
6.	Incident Location:					
7. Name and Rank of Accused Officer(s), if known, or Description:						
8.	Witness(es) to Incide	nt:				
	Name:					
	Address:	st)	(First)	(Middle)		
	Phone No.:		Business Phone No	.:		

Name:				
Address:	(Last)	(First)	(Middle)	
Phone No.	Io.: Business Phone No.:			
	(If necessary, a	add additional witness na	ames on the back of the form.)	
Details of Complaint:				

## 10. Complaint Procedure:

All formal citizen complaints are referred to the Chief of the affected Department for the purpose of attempting informal resolution. If your complaint is not resolved before the Chief of the Department, you may request a formal hearing on your complaint before the Board of Police and Fire Commissioners. This request must be submitted in within 30 days following the hearing before the Chief of the Department.

You may submit a written statement to the Board of Police and Fire Commissioners setting forth reasons as to why your complaint should not first be referred to the Chief of the affected Department for informal resolution. If good cause is shown, your complaint may be referred to another party for informal resolution or may be immediately scheduled for formal hearing before the Board. The Board may conduct a limited hearing on the matter of the appropriateness of informal resolution, if good cause is not shown and you decline to participate in the informal hearing before the Chief of the affected Department, the Board may place your complaint on file.

Signature	

Mail this form to:

President
Police and Fire Commission
City of Menomonie
800 Wilson Avenue
Menomonie, Wisconsin 547510795