



# Hebron Police Department

## Officer Complaint Form



**IC 35-44.1-2-3 (5)** A person who: makes a complaint against a law enforcement officer to the state or municipality (as defined in IC 7-1-13-3(b)) that employs the officer: (A) alleging the officer engaged in misconduct while performing the officer’s duties; and (B) knowing the complaint to be false; commits false informing, a Class B misdemeanor. However, the offense is a Class A misdemeanor if it substantially hinders any law enforcement process or if it results in harm to another person.

**Instructions:** Please provide as much information as possible including date and time of incident and return to the Hebron Police Department. Forms can either be dropped off in person at the Hebron Police Department, 611 North Main Street , Hebron, IN 46341 Monday – Friday 8:00am – 4:00pm, or mailed to the Hebron Police Department , 611 North Main Street, Hebron, IN 46341.

**PERSON COMPLETING FORM**

LAST NAME	FIRST NAME	M.I.	DATE OF BIRTH
HOME PHONE	WORK PHONE & EXTENSION	OTHER CONTACT NUMBER	
ADDRESS	TOWN/CITY	STATE	ZIP

**OFFICER(S) INVOLVED**

OFFICER'S NAME	BADGE #	CAR#	DESCRIPTION OF OFFICER IF NAME OR BADGE# UNKNOWN

**WITNESS INFORMATION**

LAST NAME	FIRST NAME	M.I.	PHONE
ADDRESS	TOWN/CITY	STATE	ZIP

LAST NAME	FIRST NAME	M.I.	PHONE
ADDRESS	TOWN/CITY	STATE	ZIP

**INCIDENT DETAILS (PLEASE BE AS SPECIFIC AND DETAILED AS POSSIBLE)**

\_\_\_\_\_  
SIGNATURE OF PERSON COMPLETING FORM

\_\_\_\_\_  
DATE SIGNED

PAGE \_\_\_ OF \_\_\_



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\_\_\_\_\_  
SIGNATURE OF PERSON COMPLETING FORM

\_\_\_\_\_  
DATE SIGNED

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