



# Daytona Beach Police Department Citizen's Complaint Form

Complaint Control #: \_\_\_\_\_

(Revised: 06/26/2024)

### COMPLAINANT INFORMATION:

Name (L, F, MI): \_\_\_\_\_ Age: \_\_\_\_\_ Race/Sex: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Business Address: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

### DEPARTMENT PERSONNEL INVOLVED:

Name: \_\_\_\_\_ ID # \_\_\_\_\_ Car # \_\_\_\_\_  
 Name: \_\_\_\_\_ ID # \_\_\_\_\_ Car # \_\_\_\_\_

### COMPLAINT INFORMATION:

Nature of Complaint: \_\_\_\_\_  
 Location of Incident: \_\_\_\_\_  
 Date/Time Incident Occurred: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ at \_\_\_\_ a.m. / p.m.  
 Date/Time Incident Reported: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ at \_\_\_\_ a.m. / p.m.  
 Incident Report Number if Applicable: \_\_\_\_\_

### CITIZEN'S COMMENTS:

Description of Incident: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

***Pursuant to F.S.S. 837.06 – Anyone who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of their official duty shall be guilty of a misdemeanor in the second degree.***

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 COMPLAINANT SIGNATURE

\_\_\_\_\_  
 NOTARY PUBLIC/LAW ENFORCEMENT OFFICER SIGNATURE

