

# ELK MOUND POLICE DEPARTMENT

206 E MENOMONIE STREET

PO Box 188

Elk Mound, WI 54739

Phone: 715-879-4411

[police@elkmoundpd.org](mailto:police@elkmoundpd.org)

## CITIZEN COMPLAINT FORM

Complainant Contact Information			
NAME		DOB	BEST TIME TO CONTACT
ADDRESS		CITY	STATE
PHONE #		EMAIL ADDRESS	

Instructions
<p>You must complete this form with all applicable information. You may submit the form in person to the police station, by mail at the above listed address, or via email to <a href="mailto:police@elkmoundpd.org">police@elkmoundpd.org</a>. Unsigned or anonymous complaints will be reviewed, but not investigated. We do not accept complaints from anyone who was not personally involved in the alleged incident or a witness to the incident.</p> <p>Personnel complaints include any allegation of misconduct or improper job performance that, if true, would constitute a violation of department policy or of federal, state, or local law, policy, or rule. Complaints will be reviewed shall be classified in one of the following categories:</p> <p><b>Informal</b> - A matter in which the Supervisor is satisfied that appropriate action has been taken by a supervisor of rank greater than the accused member.</p> <p><b>Formal</b> - A matter in which a supervisor determines that further action is warranted. Such complaints may be investigated by a supervisor of rank greater than the accused member or referred to the Chief, depending on the seriousness and complexity of the investigation.</p> <p><b>Incomplete</b> - A matter in which the complaining party either refuses to cooperate or becomes unavailable after diligent follow-up investigation. At the discretion of the assigned supervisor or the Chief, such matters may be further investigated depending on the seriousness of the complaint and the availability of sufficient information.</p> <p>An investigator will be assigned to your complaint. The investigator may need to interview you to obtain additional information. At the conclusion of an investigation, complaints shall be classified with one of the following dispositions:</p> <p><b>Unfounded</b> - When the investigation discloses that the alleged acts did not occur or did not involve department members. Complaints that are determined to be frivolous will fall within the classification of unfounded.</p> <p><b>Exonerated</b> - When the investigation discloses that the alleged act occurred but that the act was justified, lawful and/or proper.</p> <p><b>Not sustained</b> - When the investigation discloses that there is insufficient evidence to sustain the complaint or fully exonerate the member.</p> <p><b>Sustained</b> - When the investigation discloses sufficient evidence to establish that the act occurred and that it constituted misconduct.</p> <p>The Chief of Police will notify you of the complaint disposition. If a complaint is sustained, due to confidentiality laws you will not be advised of what administrative actions have been taken against an employee.</p>

Incident Information		
OFFICER(S) INVOLVED OR DESCRIPTION		
BPD CASE # (IF AVAILABLE)	INCIDENT DATE/TIME	INCIDENT LOCATION

Nature of Complaint

Statement of Events
Describe the incident in detail:

You May Continue On the Back

**CITIZEN COMPLAINT FORM  
CONTINUED**

**Statement of Events Continued**

You may attach additional sheets as needed.

**Desired Outcome**

What would you like to happen because of filing this complaint?

**Complainant's Affirmation**

I swear the information provided by me on this form is true to the best of my knowledge. I understand that based on this complaint, an investigation may be conducted and that if substantiated, appropriate action will be taken. I further understand that if the investigation proves the allegations were known by me to be false when the complaint was submitted, the Elk Mound Police Department may refer me for prosecution for knowingly making false complaints regarding the conduct of a law enforcement officer (Wisc. Stat. 946.66(2)).  
**I have read and understood the above statement.**

\_\_\_\_\_ **Complainant Signature**

\_\_\_\_\_ **Date**

**Department Use Only**

RECEIVED BY	DATE	TIME	HOW <input type="checkbox"/> In Person <input type="checkbox"/> Email <input type="checkbox"/> Mail	COMPLAINT #
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