BYU Police Internal Affairs Complaint Report

Section A To be Completed by the Complaining Party (Please Print)

Date Reported:	Date & Time Incident Occurred:		
Officer's Name (if known):			
or Physical Description:			
Complainant's Name:		Home Phon	e:
Address:		Cell Phone:	
#1. Witness's Name:		Home Phon	e:
Address:		Cell Phone:	
#2. Witness's Name:		Home Phon	e:
Address:		Cell Phone:	
Allegation Narrative:			
Complaining Party's Signature:			Date: