

Richardson Police Department  
Citizen Complaint Statement

Please complete the following information and provide a summary of the incident / allegation on the back of this page. Your signature and date of signature are required on this document. Upon completion, you may either mail or personally deliver this complaint to:

**Internal Affairs  
Richardson Police Department  
140 N. Greenville Avenue  
Richardson, TX 75081**

Your Name: \_\_\_\_\_  
(Last) (First) (M. I.)

Your Address: \_\_\_\_\_  
(Street Address) (Apt. or Suite #)

\_\_\_\_\_  
(City) (State) (Zip Code)

Your Home Phone #: \_\_\_\_\_ Work #: \_\_\_\_\_

Additional #'s: \_\_\_\_\_

Name of Employee(s) if known: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Have you discussed this incident with a Richardson Police Department supervisor or Internal Affairs? Yes \_\_\_ No \_\_\_

If yes, please provide the name(s) of whom you spoke with: \_\_\_\_\_

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Do you have criminal and/or traffic charges pending from this incident?

Yes \_\_\_ No \_\_\_

If yes, please list: \_\_\_\_\_

Do you have evidence (audio recordings, videos, photos, etc.) that need to be included as part of your complaint? Yes \_\_\_ No \_\_\_

If yes, please list: \_\_\_\_\_

\_\_\_\_\_  
(Your Signature) (Date)

**Please provide a summary of the incident / allegation on the back of this page:**