



### **Formal Complaint Form**

The mission of the Oklahoma City Police Department is to deliver exceptional police services to our community with integrity, compassion, accountability, respect, and equity.

#### **Complainant Information**

If you would like to remain an	onymous, please check this box:
Name:	Age: Date of Birth:
Address:	Phone Number:
Business Address:	Business Phone:
E-mail Address:	
	, make the following true and
correct statement voluntarily, of my own fi	ree will. It is made without any threat, coercion, offer

of benefit, favor or offer of favor, by any person whatsoever.

#### **Respondent Information**

Name of Accused (if known):							 
If unknown, provide description	on:						 
Employment:							 
Alleged Incident Occurred:	Month	_/	_/Year	_ at	AM	PM	
Location of Incident:							

On the pages that follow, describe in detail the nature of the incident, giving specific details, statements, violations, locations and/or personal injuries.

Mail, email, or deliver the completed packet to:

Oklahoma City Police Department Office of Professional Standards 700 Colcord Drive Oklahoma City, OK 73102 ProfessionalStandards@okc.gov

Name of Complainant

Date of Statement

Complainant:
Respondent:
List specific allegation(s):
1
2
3
4
5
6
7
8
9
10

In narrative form, please describe or explain the actions that are alleged to have been committed by the respondent:

Name of Complainant

Complainant:
Respondent:
List specific allegation(s):
11
12
13
14
15
16
17
18
19
20

In narrative form, please describe or explain the actions that are alleged to have been committed by the respondent:

Name of Complainant

Complainant:
Respondent:
List specific allegation(s):
21
22
23
24
25
26
27
28
29
30

In narrative form, please describe or explain the actions that are alleged to have been committed by the respondent:

Name of Complainant

Complainant:
Respondent:
List specific allegation(s):
31
32
33
34
35
36
37
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39
40

In narrative form, please describe or explain the actions that are alleged to have been committed by the respondent:

Name of Complainant

Date of Statement

Complainant: _	 	 	
Respondent:	 	 	

I, \_\_\_\_\_, have read (or have had read to me) the foregoing statement, consisting of \_\_\_\_ pages, and affirm the facts contained therein are true and correct.

A video of the referenced incident may have been captured on a body worn camera, and, in turn, may be applicable to your complaint. The video will be reviewed by the assigned supervisor prior to initiating an investigation.

#### NOTICE OF RACIAL PROFILING:

Racial profiling is defined as the detention, interdiction or other disparate treatment of an individual solely on the basis of the racial or ethnic status. If you believe you have been a victim of racial profiling, you may file a complaint with the State of Oklahoma Human Rights Commission or the District Attorney's Office in the county where the incident occurred.

Name of Complainant

Date of Statement