

**MILTON POLICE DEPARTMENT
INTERNAL AFFAIRS COMPLAINT FORM**

Please submit as much contact information as possible so we may best get back to you for additional information and clarification. You may submit a complaint anonymously, but that could hamper our ability to investigate this incident.

Your Contact Information

Name: _____

DOB: _____

Address: _____

Address 2: _____

City/Town: _____

State: _____

Zip/Postal Code: _____

Country: _____

Email Address: _____

Phone Number: _____

Please enter any other contact information that will help us contact you during business hours

Officer's Name (member about whom you are complaining)

Location (address/street name/highway name) where the incident occurred

Date the incident in question occurred (Please try to be as specific as possible)

Time the incident occurred
