Appendix B

IA Case Number Department/Agency — — INTERNAL AFFAIRS REPORT FORM Person Making Report (Optional, But Helpful) Preferred? Phone ——— **Full Name** Email _____ Address -DOB City, State Officer(s) Subject to Allegation (Provide Whatever Info Is Known) ____Badge No. Officer(s) Date/Time **Incident Site** In the space below, describe the type of incident (traffic stop, street encounter) and any information about the alleged conduct. If you cannot fit your response below, feel free to use extra pages and attach them to this document. If you do not know the officer's name or badge number, provide any other identifying information. Other Information How was this reported? o In Person o Phone o Letter o Email o Other _____ Any physical evidence submitted? o Yes o No If yes, describe: Was incident previously reported? o Yes o No If yes, describe: To Be Completed by Officers Receiving Report Date/Time Badge No. . Officer Receiving Complaint

Supervisor Reviewing Complaint

Badge No.

Date/Time