



Abilene Police Department Citizen Complaint/Commendation Form



File complaints or commendations about Police Department employees on this form. Return the completed form to the Police Department, 4565 S. 1 St. , or hand deliver to the City Manager’s Office, 555 Walnut, Room 203 or by mail to P.O. Box 60 Abilene, Texas 79604.

Involved Officer/Employee(s) Information:			
Name:			
Name:			
Person Making the Complaint/Commendation:			
Name:		Phone:	
Address:		Phone:	
Information:			
<p>Please provide as much information about the reason you were contacted by the officer/employee. Specific information about the date, time and location will help in locating computer-based information if you do not know the officer/employee’s name.</p>			
Date of Contact:		Approximate Time:	
Location Contacted:			
Reason For The Complaint/Commendation: (attach additional pages if needed)			
Witness Information:			
Name:		Phone:	
Address:		Phone:	
Name:		Phone:	
Address:		Phone:	

Submitted by: _____ **Date** _____

Intake Supervisor: _____ **Date** _____