

## THORNTON POLICE DEPARTMENT CITIZEN COMPLAINT/COMMENDATION FORM

Citizens may file a complaint or commendation about Police Department employees on this form. You may hand deliver or mail the completed form to the Thornton Police Department, Office of the Chief of Police, 16 Merrill Access Rd, Thornton, NH 03285.

Involved Officer/Empl	loyee(s) Information:					
Name:						
Name:						
Person Making the Complaint/Commendation:						
Name		Phone:				
Address:		Phone:				
Information:						
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 the information if you do not know the officer/employee's name.						
Data of Contracts	know the officer					
Date of Contact:		Approximate Ti	me:			
Location:						
Reason	For the Complaint/Commen	dation: (attach additio	nal pages i	f needed)		
Witness Information:	[					
Name:			Phone:			
Name:			Phone:			
Name:			Phone:			
Name:			Phone:			

Submitted By:	Date:
(Signature)	