



CITY OF WAUPACA POLICE DEPARTMENT

124 S. Washington St Waupaca WI 54981
715-258-4400

Dear Citizen,

Attached you will find the Waupaca Police Department's Complaint Against Member/Department Statement form. Please read this letter carefully before completing the forms, it will explain the various options and procedures available for filing a complaint.

You may decide to take your complaint directly to the Waupaca Police Commission. For further directions on that process please review the last page of the Complaint Statement form. In some cases the Department or officers involved may take your complaint to the Police Commission. Any proceeding before the Police Commission is public. Documents related to Police Commission proceedings are public records and are generally disclosable under Wisconsin Law.

Any written complaint submitted to us is a public record. This means that upon request the department may be subject to disclosure to news media or any person requesting the documents. If you request confidentiality the Department will make every legal effort to respect that request, however, it is not possible to guarantee confidentiality. The Department is required by State Law to inform you that **"whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture."**

If you decide to file a complaint with the Department and want it to be a formal complaint, the "Attestation and Notary Form" should be completed and notarized. The Department can assist you with this upon completing the complaint.

If a complaint is not notarized it will be treated as an Informal Complaint. Both Formal and Informal complaints are investigated. In either case please complete the Statement form with as much detail as possible including specific dates, times, witnesses, officer names, badge numbers, and descriptions of officers involved and why you feel the officers conduct was inappropriate.

Finally, be sure to sign the Complaint form.

Completed complaints can be mailed, faxed, or dropped off in person to the Chief of Police. The address is:

Chief of Police
Waupaca Police Department
124 S Washington St
Waupaca, WI 54981

Complaint against Member/Department Form

Department Use Only

ICN# _____

NAME: _____ DATE OF BIRTH: ____/____/____
First M.I. Last

ADDRESS _____
Number and Street City State Zip Code

PHONE: (____) _____ / (____) _____ Best Time to contact you _____ AM / PM
Home Work

Please Check One: This is a (____) Formal Complaint—Notarized Attestation must be completed (____) Informal Complaint*

This Statement is being given by: (____) Aggrieved Party (____) Witness

WITNESSES TO INCIDENT:

NAME _____ DATE OF BIRTH ____/____/____
First M.I. Last

ADDRESS _____
Number and Street City State Zip Code

PHONE (____) _____ / (____) _____
Home Work

COMPLAINT INCIDENT

INCIDENT DATE ____/____/____ TIME ____ AM / PM INCIDENT # If Known _____

LOCATION _____

NAME/BADGE NUMBER/ OF ACCUSED OFFICER(S), IF KNOWN OR DESCRIPTION

DETAILS OF COMPLAINT: (Use next page or attach additional pages if necessary)

*The Department is required by State Law to inform you that "*whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture*" Wisconsin State Statute 946.66(2)

Department Use Only: Received On _____ Referred To: _____

(____) Formal (____) Notarized Attestation Attached (____) CRN Assigned

(____) Informal

CC: _____

