GAINESVILLE POLICE DEPARTMENT

413 NW 8 TH AVE

GAINESVILLE, FL 32601

***CITIZEN Complaint form***

# http://b.vimeocdn.com/ps/543/543444_300.jpg

**Dear Concerned Citizen,**

Thank you for taking the time to inform us of a situation that you believe deserves our attention. We encourage both positive and negative citizen feedback to assist us in our goal of providing the best law enforcement service possible to the citizens of our community. The attached form is used to collect information regarding allegations of misconduct involving a GPD employee.

***Should I file a formal complaint or contact the employee’s supervisor?***

The Internal Affairs Office *(****352) 393-7580*** coordinates investigations into allegations of misconduct by members of this agency and can be contacted if you need assistance.

Supervisors within the agency handle performance related issues dealing with their subordinates. Contacting an employee’s direct supervisor is often the best and most timely way to address issues concerning things such as disputed traffic citations, improperly written reports, and dissatisfaction with the way a call or situation was handled. Supervisors can be contacted through the **Combined Communications Center (CCC)** non-emergency line at *(****352) 955-1818*,** or by calling the Patrol Supervisors office at *(****352) 393-7724.*** Please be aware that the Patrol Supervisors office is not staffed 24/7. The Combined Communications Center (CCC) is staffed 24/7 and a request for contact from you will be forwarded to an on-duty Shift Supervisor.

***Formal Complaints:***

If you have a complaint of misconduct involving a GPD employee, please complete the attached form and return it to any GPD supervisor or the GPD Front Desk located at our main headquarters. The form can also be mailed to ***Gainesville Police Dept., Internal Affairs, PO Box 1250, Gainesville FL 32627***. The most appropriate person to file a complaint is the person experiencing or witnessing the alleged police misconduct rather than uninvolved third parties. We will need the cooperation of any involved citizen to ensure a successful investigation. Parents or guardians should feel free to make complaints on behalf of their minor children.

Additional information about the processing and handling of complaints can be found at the GPD website:[**https://gainesvillepd.org/index.php/online-services/report-a-complaint**](https://gainesvillepd.org/index.php/online-services/report-a-complaint)

***What is expected of me when my formal complaint is being investigated?***

Your cooperation will be needed throughout the investigative process. You may be requested to meet with the investigator and provide a sworn and recorded statement under oath. In addition, you may be requested by the investigator to sign a medical release (if your case involves an alleged injury), provide witness information, and/or provide evidence related to your complaint.

Internal Affairs will use the information you provide to conduct an initial inquiry into your complaint. This can take anywhere from a few days to a few weeks depending on the nature of the allegation. You will be notified by mail verifying that we have received your complaint. At the conclusion of a formal investigation you will be provided, via mail or email, a summarized result of the investigation.

***GAINESVILLE POLICE DEPARTMENT***

***CITIZEN COMPLAINT FORM***

***IA#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***(To Be Completed by Internal Affairs)***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **COMPLAINANT**  **INFORMATION** | | **LAST NAME:** | | | | **FIRST NAME:** | | | | **M.I.** | | **RACE Optional** | | **SEX: Optional** |
| **HOME ADDRESS:** | | | | | | **TELEPHONE NUMBER:** | | | | **DATE OF BIRTH:** | | |
| **CITY:** | | | | | **STATE:** | **ZIP CODE:** | | **TELEPHONE NUMBER:** | | | | |
| **I agree to accept Electronic Mail at the below listed E-mail address in regards to this complaint. (Please Circle) YES NO** | | | | | | | | | | | | |
| **EMAIL ADDRESS** | | | | | | | | | | | | |
| **INVOLVED EMPLOYEE (s)** | | **LAST NAME:** | | **FIRST NAME:** | **ID #** | | | | **CAR#** | | **Race:** | | | **SEX:** |
| **LAST NAME:** | | **FIRST NAME:** | **ID#** | | | | **CAR#** | | **Race:** | | | **SEX:** |
| **LAST NAME:** | | **FIRST NAME:** | **ID#** | | | | **CAR#** | | **Race:** | | | **SEX:** |
| |  | | --- | |  | |  | |  | |  | |  | |  | |  | |  | |  |   ***STATEMENT OF COMPLAINT*** | | ***CASE REPORT NUMBER:*** | ***LOCATION OF INCIDENT:*** | | | | | ***DAY OF INCIDENT:*** | | ***TIME OF INCIDENT:*** | | | ***DATE OF INCIDENT:*** | |
| **(USE ADDITIONAL SHEETS IF NECESSARY):** | | | | | | | | | | | | |
|  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Complainant’s Signature)**  **EMPLOYEE RECEIVING FORM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID# \_\_\_\_\_\_\_**  **DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | |

**GAINESVILLE POLICE DEPARTMENT**

**CITIZEN COMPLAINT FORM**

***IA#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***(To Be Completed by Internal Affairs)***

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| **STATEMENT OF COMPLAINT - CONTINUED:** |

**GAINESVILLE POLICE DEPARTMENT**

**CITIZEN COMPLAINT FORM**

***IA#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***(To Be Completed by Internal Affairs)***

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| **STATEMENT OF COMPLAINT - CONTINUED:** |