MPD 1-108 (1-10)

MERCERSBURG POLICE DEPARTMENT

IAD CONTROL NUMBER

COMPLAINT VERIFICATION

COMPLAINT INFORMATION

1. **NAME**	FIRST		MI	LAST	
2. **HOME ADDRESS**	STREET/P.O. BOX				
	CITY				
	STATE	ZIP	HOME TELEPHONE NUMBER	WORK TELEPHONE NUMBER	CELL PHONE NUMBER

3. **REMARKS** PROVIDE A DETAILED NARRATIVE OF THE INCIDENT. IF THE COMPLAINT INVOLVES VERBAL ABUSE OR RUDENESS, STATE THE SPECIFIC TERM, PHRASE, OR LANGUAGE CONSIDERED TO BE OFFENSIVE. IF THE COMPLAINT CONCERNS DISSATISFACTION WITH AN INVESTIGATION OR OTHER POLICE SERVICE, EXPLAIN WHAT ACTION OR OMISSION WAS UNACCEPTABLE, IF ADDITIONAL SPACE IS NEEDED, USE THE REVERSE SIDE

I verify that the facts set forth herein are true and correct to the best of my knowledge or information and belief. This verification is made subject to penalties of the Crimes Code, 18 PA C.S. §4904, relating to unsworn falsification to authorities.

4. SIGNATURE	5. DATE

(CONTINUE IF NEEDED)

I verify that the facts set forth herein are true and correct to the best of my knowledge or information and belief. This verification is made subject to penalties of the Crimes Code, 18 PA C.S. §4904, relating to unsworn falsification to authorities.

6. SIGNATURE/DATE

Mercersburg Police Department Verification Form Instructions

Blocks #1 through #5 are mandatory.

Block #1 – NAME – Full Name

Block #2 – ADDRESS – Address and Contact Information

Block#3 – REMARKS – Please provide a brief description of the events leading up to your initial contact with Mercersburg Police Department personnel. In describing the incident, thoroughly detail the events surrounding your complaint, including the date, day of week and time. Also list the names, addresses and telephone numbers of anyone who was present with the incident occurred. If your complaint includes verbal abuse or rudeness, include the specific term, phrase or language you found offensive.

If an arrest action has taken place by the Mercersburg Police, personnel complaints filed with the Chief of Police will have no impact upon such cases. Issues regarding the validity of an arrest must be adjudicated before the appropriate judicial authority. In accordance with due process, you are entitled to request a hearing/appeal and present those issues before the judiciary identified on the citation/summons.

Block #4 – SIGNATURE – An original signature must be placed on the Complaint Verification Form.

Block #5 – DATE – Date form was signed.

Block #6 – SIGNATURE/DATE – An original signature and date if continuation part is utilized.

Questions regarding the completion of the Complaint Verification Form or the status of your complaint may be directed to the Chief of Police at (717) 328-0150 or via mail at:

Mercersburg Police Department
Chief of Police John D. Zechman
113 South Main Street
Mercersburg, Pennsylvania 17236