REPORT A COMPLAINT OR CRIME

Date and Time of Complaint_____

Complainant's Information (***Optional – however we may not be able to act on the information you provide. But, we would still rather you report the activity even if you cannot give your name***):

Name_____Address_____

Phone Number_____Email Address_____

Location of Complaint/Crime_____

Persons involved in activity (if known)_____

_____

_____

Description of complaint/crime (be as complete as you can. Including the dates, times, locations, vehicles, etc.)

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Would you like the police department to contact you?_____Yes_____No