



The General Assembly  
State of Connecticut  
Joint Committee on Legislative Management

STATE CAPITOL POLICE DEPARTMENT  
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State Capitol Police Department  
Citizen Complaint Form

Complainant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Sex: Male [ ] Female [ ] Race/Ethnicity: \_\_\_\_\_

Did you witness the incident: Yes [ ] No [ ]

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**If you are filing this complaint on behalf of someone else, please provide this person's information below.**

Parent [ ] Spouse [ ] Relative [ ] Guardian [ ] Child [ ] Friend [ ] Other \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Sex: Male [ ] Female [ ] Race/Ethnicity: \_\_\_\_\_

**WITNESS 1**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Sex: Male [ ] Female [ ] Race/Ethnicity: \_\_\_\_\_

**WITNESS 2**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Ext: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Sex: Male [ ] Female [ ] Race/Ethnicity: \_\_\_\_\_

**INCIDENT INFORMATION**

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

**Description of the Incident:** (Please write as much detail as possible.)

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**Please provide a detailed description of the police officer(s) against whom you are complaining.**

**OFFICER 1:**

Rank: \_\_\_\_\_ Name: \_\_\_\_\_

Shield/Badge #: \_\_\_\_\_ Area of Patrol: \_\_\_\_\_

Was the Officer in: Plain clothes [ ] or Uniform [ ] ; On foot [ ] or In Car [ ]

Patrol Car #: \_\_\_\_\_ License Plate #: \_\_\_\_\_ Marked Car [ ] or Unmarked [ ]

Sex: Male [ ] Female [ ] Race/Ethnicity: \_\_\_\_\_

Physical Description (eye color, hair color, approx. height & build, age, etc.):

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Please describe the role of this officer in the incident:

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**OFFICER 2:**

Rank: \_\_\_\_\_ Name: \_\_\_\_\_

Shield/Badge #: \_\_\_\_\_ Area of Patrol: \_\_\_\_\_

Was the Officer in: Plain clothes [ ] or Uniform: [ ] ; On foot [ ] or In Car [ ]

Patrol Car #: \_\_\_\_\_ License Plate #: \_\_\_\_\_ Marked Car [ ] or Unmarked [ ]

Sex: Male [ ] Female [ ] Race/Ethnicity: \_\_\_\_\_

Physical Description (eye color, hair color, approx. height & build, age, etc.):

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Please describe the role of this officer in the incident:

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If mediation were offered in an attempt to resolve this complaint, would you be willing to sit down with the officer and a third party to resolve this issue? Yes [ ] No [ ]

I have read (or have had read to me) the above statement and it is true to my best of my knowledge, information and belief.

**Complainant Signature:** \_\_\_\_\_

(Print Name): \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_

(Print Name): \_\_\_\_\_

STATE OF CONNECTICUT

COUNTY OF HARTFORD

On this, the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_, the above signed individual, personally appeared and is known to me or satisfactorily proven to be the person whose name is subscribed to this complaint and acknowledges that he/she executed the same for the purpose therein contained. In witness thereof I hereunto set my hand pursuant to Section 1-24 of the Connecticut General Statutes.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

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**Complaint Received:** Date: \_\_\_\_\_ Time: \_\_\_\_\_

Officer Receiving Complaint: \_\_\_\_\_

Incident Case #: \_\_\_\_\_ CC Case #: \_\_\_\_\_ Classification: Level 1 [ ] Level 2 [ ]

Investigator Assigned: \_\_\_\_\_

Date Assigned: \_\_\_\_\_ Date of Final Report: \_\_\_\_\_

Disposition: Exonerated [ ] Unfounded [ ] Sustained [ ] Not Sustained [ ]

Partially Sustained [ ] With Drawn [ ] Misconduct not based on Original Complaint [ ]