MINNESOTA UNIVERSAL POLICE CONDUCT COMPLAINT FORM

PERSONAL INFORMATION			
Name (First, Middle, Last)		Phone	
Home Address (Street, City, State, Zip)		Email Address (optional)	
OFFICER/DEPARTMENT INFORMATION			
	Officer Badge Number/		
Officer Name(s) (if known)	Identification Number (if known)	Squad Nun	nber (if known)
Incident Leastion Address (Street Otto St. 4 7)			
Incident Location Address (Street, City, State, Zip)		Incident Date & Time	
Witness Names (if applicable)	Mailing Address	Phone Number	
DESCRIPTION OF INCIDENT			
Dated	Signature		

INSTRUCTIONS FOR COMPLETING THIS FORM

- 1. Please print neatly and carefully in black or blue ink.
- 2. Describe the incident in a short and concise manner. If you cannot fit all of the information in the space provided, consider revising your statement to make it shorter. Only attach additional sheets if absolutely necessary.
- 3. Include only information that you know or experienced firsthand; do not guess, do not exaggerate.
- 4. By signing the form you are asserting that the information contained in it is true and correct.
- 5. This is not intended to be legal advice. If you have questions about your rights, you should speak with a licensed attorney.

INSTRUCTIONS FOR SUBMITTING THIS FORM

- 1. Each city and county has a unique complaint submission process. This form is designed to be submitted by mail to maximize the likelihood that it is retained and recorded by the responsible government agency.
- 2. Determine which department or government agency you should send this form. Keep in mind, there may be more than one if several officers were involved.
 - a. If the officers involved in the incident worked for a small city or town, then send this form to the city administration department.
 - b. If the city is large enough to have police department outside of city hall, send this form to the police department's internal affairs division or administration division.
 - c. If the officers involved in the incident were sheriff's deputies, send this form to the county sheriff's internal affairs division or administration division.
- 3. Find the correct mailing address. Most city police departments and county sheriff's offices maintain websites with their current mailing address. This information can also be found in a phone book.
- 4. Complete a cover letter in a form substantially similar to the attached template.
- 5. Determine which state representative and/or state senator to send a copy of your cover letter and the form. If you do not know who represents you, the state website has a great tool. Go to: www.gis.leg.mn/OpenLayers/districts/ and enter your address into the search bar.
- 6. Mail the completed form, and the cover letter to both the correct city / department **and** your state representative and/or state senator.
- 7. Make sure your voice is heard! Mail a copy of the completed form and cover letter to:

ABATE OF MN c/o Frank Ernst 840 Cree Drive Chanhassen, MN 55317

COVER LETTER SAMPLE/TEMPLATE

John Doe 123 USA Lane Anytown, Minnesota 55100

Month, Day, Year

Anytown Police Department Attn:Internal Affairs/Administration 987 Anytown Road. Anytown, Minnesota 55100

RE: Submission of Police Conduct Complaint Form for Incident Dated <u>date of incident</u>

Dear Sir or Madam:

I believe I was the victim of police misconduct which I wish to report. The misconduct is described on the Minnesota Universal Police Conduct Complaint Form which I have enclosed. If I have addressed this to the wrong office, division, or department, please see that it is directed appropriately.

Because I believe police misconduct is an important issue facing Minnesota and the USA, and because I wish to ensure that my complaint is not misplaced or overlooked, I have copied my state representative and/or state senator, <u>Name</u>, to this letter.

If an investigator or internal affairs officer wishes to speak with me about the incident, I can be reached by the contact information provided on the form.

Sincerely,

John Doe

cc. w/ enc. Representative/Senator Name of representative/senator

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cc. w/ enc._____