



MEDLEY POLICE DEPARTMENT

7777 NW 72 Avenue
Medley, FL 33166
PHONE: (305) 883-2047
FAX: (305) 805-3720
police@medleypd.com

Complaint Intake Form

Name:

Last	First	Middle
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Current Address:

Street Address		
City	State	ZIP Code

Contact Number:

E-Mail Address:

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Incident Date:

Time:

Police Vehicle #:

Marked/Unmarked

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Incident Location (address):

Location Name:

Case Number:

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Name and I.D. Number of employee(s) you are complaining about:

Description of the incident: (please give as much detail as possible and attach additional pages if necessary)

Complaint Intake Form *(continued)*

Description of the incident: (continued)

Witnesses: (please include names, addresses and phone numbers)

Per F.S.S. 837.06 - Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. [775.082](#) or s. [775.083](#).

Complainant's Signature

Date and Time