



# Beaufort Police Department Personnel Complaint Report

Use this form to register your complaint about the Beaufort Police Department.  
You may leave this form with a supervisor or mail it to:  
Chief of Police, PO Box 268, Beaufort, NC 28516.

**CITIZEN COMPLAINT**  **INTERNAL COMPLAINT**

**COMPLAINANT INFORMATION**

Internal Use Only: Leave Blank

Your Name	Control #	
Phone Number(s)	OCA#	
Date of Birth	Age	Sex
Home Address	City/Sate	Zip
Business Address	City/Sate	Zip

If applicable, list other complainants and/or witnesses and their phone numbers:

Name	Home Phone	Cell Phone
Name	Home Phone	Cell Phone
Name	Home Phone	Cell Phone

Name of Employee(s) Involved:

\_\_\_\_\_

\_\_\_\_\_

Location of Incident \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Were you arrested? (Check one)  Yes  No

Court Date: \_\_\_\_\_

What were you charged with?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Complainants Initials** \_\_\_\_\_



# Beaufort Police Department

## Personnel Complaint Report

For Internal Use Only: Leave Blank

Attempt to Resolve Complaint:

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Complaint Resolved:  Yes  No

Assigned for Further Investigation:  Yes  No

Discipline Administered:

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Further Discipline Recommended:  Yes  No

(If yes attach memorandum of recommendation)

_____ Supervisor Name	_____ Signature	_____ Date
_____ Commander Name	_____ Signature	_____ Date
_____ Chief Paul D. Burdette Jr. Chief of Police	_____ Signature	_____ Date

FINAL DETERMINATIONS:

<input type="checkbox"/> ADMINISTRATIVLY RESOLVED	(allegation is true however it constitutes a less serious violation of policy as defined in general order 3.01 and was handled informally)
<input type="checkbox"/> SUSTAINED	(allegation is true: the action of the Department or the officer was inconsistent with the Department policy)
<input type="checkbox"/> NOT SUSTAINED	(there is insufficient proof to confirm or to refute the allegation)
<input type="checkbox"/> EXONERATED	(allegation is true; the action of the Department to the officer was consistent with Department policy)
<input type="checkbox"/> UNFOUNDED	(allegation is demonstrably false)
<input type="checkbox"/> POLICY FALIURE	(allegation is true; the action of the Department or the officer was not inconsistent with the Department Policy. The policy requires modification.)