

Issue Record # _____ NAACP Tracking # _____ LEO Incident # _____

FORT LAUDERDALE/BROWARD BRANCH NAACP



POLICE COMPLAINT CENTER

Issue Record # _____ NAACP Tracking # _____ LEO Incident # _____

In order to conduct a complete and thorough investigation of your complaint, we need you to answer the following questions. Please be as specific as possible.

At the NAACP's discretion, I hereby authorize the evaluation of my allegation of brutality/misconduct and I authorize the NAACP to file a complaint as an interested third-party with the law enforcement agency I have identified. I understand that the NAACP is not obligated to contact me regarding the investigation of this complaint. The NAACP is not responsible for the evaluation of this complaint by the law enforcement agency identified in this complaint. The NAACP is not responsible for ensuring that law enforcement officials receive this complaint form. I further understand that the NAACP will not independently investigate any allegations associated with this complaint unless agreement to do so is set forth in writing. I understand that I am solely responsible for all statements contained in my complaint. I understand that it is my sole responsibility to contact the police department identified in this complaint to insure follow-up on my allegations and to verify receipt of the information I have provided.

I hereby release the National NAACP and its units including all NAACP members from all liability associated with my allegations and complaint of misconduct/brutality. I hereby waive any claims of liability against the National NAACP and or its units for dissatisfaction with any service provided to me. Furthermore, I understand that the assistance provided to me is not intended as legal advice or legal counsel. I understand that the NAACP is not obligated to represent me unless otherwise set forth in writing. Investigation of this complaint and the allegations contained herein and the development of any criminal or civil case arising out of this matter should be managed by a private attorney retained by the complainant. The NAACP urges the complainant to seek private legal counsel concerning all matters related to this complaint of police misconduct/brutality. I have reviewed, read, and fully understand all terms and conditions set forth in this document. I attest to this fact by signing below

Person making complaints, if making this complaint on behalf of another, please state:

Name _____

Sex _____, Date of Birth _____

Contact information (phone, email, mailing address): _____

Issue Record # _____ NAACP Tracking # _____ LEO Incident # _____

1. Date of Incident: _____ Time of Incident: _____

2. Location of the incident (address): _____

3. Name of police agency involved: _____

4. List any names, badge numbers, vehicle numbers and/or license plate numbers, and/or provide physical descriptions of all the officer(s) involved, including race and gender of each officer:

A. _____

B. _____

C. _____

D. _____

(Use separate page if necessary)

5. Did officers present any warrants as a basis for this encounter? _____

6. What was the reason for the stop or encounter as stated by the officer?

7. Were you handcuffed, fingerprinted, taped or photographed? _____

8. Did officers use a weapon, (taser, dog, spray, firearm, feet, fist, chokehold or nightstick)?

9. Did you sustain any injuries? _____ If yes, please list the type of injuries which were a result of this particular incident:

(Use separate page if necessary)

Issue Record # _____ NAACP Tracking # _____ LEO Incident # _____

10. Did you receive any medical attention? _____ If yes, please provide the name, address, and telephone number (s) of any doctor's office and/or hospital, as well as the date you received treatment. _____

11. Were you arrested? _____ Were you issued any tickets? _____ If yes to either question, please list the charges filed and/or citations issued and the disposition. _____

(Please use additional page if necessary)

12. What was the final action taken by the law enforcement officers? _____

13. Number of witnesses who observed the incident: _____

Provide full names, addresses, phone numbers, and any other identifying data if there are no Witnesses, please write the word "NONE"

A. _____

B. _____

C. _____

D. _____

14. Have you been the victim of excessive force or police misconduct in the past 12 months? If yes, when? _____

Issue Record # _____ NAACP Tracking # _____ LEO Incident # _____

15. Have you already tried to file a complaint or grievance with the law enforcement agency? If yes, when and what was the result? _____

16. Have you contacted an attorney? If so, what is the name and phone number of the attorney?

17. Do you have prior criminal history? If yes, what charges and outcomes? _____

18. Are you an NAACP member? _____

19. Are you willing to make a sworn statement in person? _____

20. Do you want NAACP representatives present when making this statement? _____

Please give a detailed accounting of what happened.

Issue Record # _____ NAACP Tracking # _____ LEO Incident # _____
