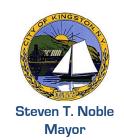


City of Kingston Police Department 1 Garraghan Drive Kingston, NY 12401



(845) 331-1671

"Committed to Excellence"

Public Compliment or Complaint Form

The City of Kingston Police is dedicated to providing the highest quality police services to residents, business owners and visitors. Your compliments and complaints are important to KPD and we appreciate your taking the time to contact us.

Please identify if this is acompliment or a complaint.			
Name of individual filing compliment/complaint:			
Address:	_City/State/Zip	Phone No	
Email address:			
Identification of Police Department Employee(s) involved in incident, if known:			
Name	Badge No	Vehicle No	
Description of Employee: Gender: _	Race/Ethnicity	Uniformed? Y or N	
Name	Badge No	Vehicle No	
Description of Employee: Gender: Witnesses to the incident and or in	dividuals with relevant		
(Please provide Names, Addresses	and Phone Numbers.)		

Name:	Agency/Affiliation
	Phone#
Details of the incident: <i>include circumstances of Police contact</i> (Attach additional pages if need	
	· · · · · · · · · · · · · · · · · · ·
	icable only to the filing of a complaint against an officer(s):
I realize that	t may be necessary in the investigation of this complaint for me to meet
with Officials of the	City of Kingston and/or the Board of Police Commissioners to discuss thi
complaint. I understa	nd that if my complaint results in a legal proceeding my testimony at such
proceeding may be n	eeded and I hereby agree to make myself available if required to do so. I
hereby certify that to	the best of my knowledge, and under penalty of perjury, the statements
made herein are true.	
C: 1.	D.4
Signed:	Date