



# NORTH OLMSTED POLICE

27243 Lorain Rd  
North Olmsted, Ohio 44070  
440-777-3535 (Non-Emergency)  
440-777-9189 (Fax)

Police Chief  
Bob Wagner



## Officer Complaint Form

Complainant: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_  
Business Address: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_  
(If applicable)

Nature of Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Photographs Taken: Yes No      Video Taken: Yes No

Location: \_\_\_\_\_  
Date & Time: \_\_\_\_\_  
Officer(s): \_\_\_\_\_  
Witnesses: \_\_\_\_\_

I hereby affirm the information contained in this complaint is true and to the best of my recollection. I am also aware that section 2921.15 of the Ohio Revised Code, makes knowingly filing a false complaint against a Law Enforcement Officer a Misdemeanor of the First Degree, punishable by up to six (6) months in jail and/or a \$1000 fine.

Complainant: \_\_\_\_\_ Signature      Witness: \_\_\_\_\_ Signature