Buffalo Valley Regional Police Department

Complaint Statement Form

Complainant's Name:		Home Phone:	
Address:		Bus. Phone:	
Witnesses Name:		Home Phone:	
Officer Receiving Compl	aint:	Date/Time:	
Location: Synopsis:		Date/Time:	
Additional page(s) Attach	ned: □ yes □ no		
Officer(s)/Personnel Invo	lved		
misdemeanor of the thi does not believe to be to the effect that false sta and/or False Reports to	rd degree, if he/she make rue, on or pursuant to a fatements made therein a Law Enforcement Author he/she knowingly gives	s "Under Penalty"- A person es a written false statement worm bearing notice, authorized punishable. (Title 18, Sectivities – A person commits a maralse information to any law e	hich he/she d by law, to on 4904.b), isdemeanor
	Signature of Complain	ant Date	

Rev 3/2010 Form 2.3.1 B