





# SANDY TOWNSHIP POLICE

1094 Chestnut Ave., DuBois, Pennsylvania 15801  
Phone: 814-371-4220 Fax: 814-371-2573 Dispatch: 814-765-1533



Citizen Complaint (cont'd):

**Witness Information:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Statements "Under Penalty"- A person commits a misdemeanor of the third degree, if he/she makes a written false statement which he/she does not believe to be true, on or pursuant to a form bearing notice, authorized by law, to the effect that false statements made therein are punishable. (Title 18 PA C.S., Sections 4904 and 4906, dealing with Unsworn Falsifications to Authorities & False Reports to Law Enforcement Authorities).**

Pursuant to Title 18 PA C.S., Section 4904 and 4906, Unsworn Falsification to Authorities & False Reports to Law Enforcement Authorities, I \_\_\_\_\_ do hereby swear that the above statements against \_\_\_\_\_ are to the best of my knowledge true and correct and do accurately reflect the incident on the above stated date and time.

I do hereby request the alleged misconduct and/or improper procedure by the above named officer(s) be investigated in accordance with the Standard Operating Procedures of the Sandy Township Police Department. I understand that I may be required to give additional statements to investigators and attend public hearings regarding this matter, and that my failure to do so will result in dismissal of this complaint.

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date