



Bristol Police Department

395 METACOM AVENUE ❖ BRISTOL, RHODE ISLAND 02809
TELEPHONE (401) 253-6900



COL. RUSSELL S. SERPA
Chief of Police

I understand that this statement of complaint will be submitted to the Department and may be the basis for an investigation. Further, I swear or affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Further, I affirm that my statement has been made by me voluntarily without persuasion, coercion, or promise of any kind.

I understand that, under the regulations of the police department, the officer against whom this complaint is filed may be entitled to request a hearing. By signing and filing this complaint, I hereby agree to appear before the appointing authority, if one is requested by an officer, and to testify under oath concerning all matters relevant to this complaint.

Signature of Complainant

Date

Signature of Person Receiving

Date and Time Received Complaint

Signature Not Requested

Check if complainant refused to Sign