# Woodland Park Police Department

Citizen Comment Form

*Please fill out the following to the best of your ability*

| | |
|---|---|
| Officer's Name (if known): | Case # (if applicable): |
| Person(s) Involved: | Date of Incident: |
| Location of Incident: | |

**OPTIONAL INFORMATION**

Do you want to be contacted concerning this comment/complaint? ☐ Yes ☐ No

| | | | |
|---|---|---|---|
| **Name** | | | |
| **Home Phone:** | | **Cell Phone:** | |
| **Home Address** | | | |
| **Email Address** | | | |

Please write your comments below.

What would you like done about this situation?

Received By:_____ Date Received_____