

CITIZEN COMPLAINT FORM
MAHONING TOWNSHIP
 Department: Road Admn. Other
Print Legibly

Mahoning Township Admn. # _____

WHEN/DATE/TIME: _____

REPORT DATE: _____ TIME: _____

PERSON RECEIVING COMPLAINT _____

SIGNATURE of RECEIVER _____

DATE AND TIME OF ORIGINAL INCIDENT _____

SUPERVISOR NOTIFIED
 YES NO

REF'D TO OTHER FOR INVESTIGATION _____

CITIZEN MAKING COMPLAINT TO COMPLETE THE BALANCE OF THE REPORT

COMPLAINANT'S NAME: LAST FIRST M/INT ADDRESS: _____

AGE: RACE: SEX: DATE OF BIRTH: PHONE-HOME, BUSINESS, CELL: _____

NAME OF ALLEGED VICTIM OF INCIDENT IF OTHER THAN COMPLAINANT: ADDRESS: _____

AGE: RACE: SEX: DATE OF BIRTH: PHONE-HOME, BUSINESS, CELL: _____

NAME OF WITNESSES: ADDRESS - PHONE: _____

NAME OF WITNESSES: ADDRESS - PHONE: _____

NAME OF WITNESSES: ADDRESS - PHONE: _____

NAME OF EMPLOYEE INVOLVED (If Known) TOWNSHIP DEPT. ROAD ADMN. OTHER _____

DESCRIPTION: HEIGHT WEIGHT: HAIR: EYES: SEX AGE (Approx>): RACE: _____

NAME OF EMPLOYEE INVOLVED (If Known) TOWNSHIP DEPT. ROAD ADMN. OTHER _____

DESCRIPTION: HEIGHT WEIGHT: HAIR: EYES: SEX AGE (Approx>): RACE: _____

§ 4904. Unsworn falsification to authorities.
 (a) IN GENERAL.—A person commits a misdemeanor of the second degree if, with intent to mislead a public servant in performing his official function, he:
 (1) makes any written false statement which he does not believe to be true;
 (2) submits or invites reliance on any writing which he knows to be lacking in authenticity;

§ 4906. False reports to law enforcement authorities.
 (a) FALSELY INCRIMINATING ANOTHER.—Except as provided in subsection (c), a person who knowingly gives false information to any law enforcement officer with intent to implicate another commits a misdemeanor of the second degree.
 (b) FICTITIOUS REPORTS.—Except as provided in subsection (c), a person commits a misdemeanor of the third degree if he:
 (1) reports to law enforcement authorities an offense or other incident within their concern knowing that it did not occur

IN DETAIL, STATE WHAT OCCURRED:

Page _____ of _____

THE ABOVE INFORMATION IS TRUE AND CORRECT: _____ DATE AND TIME COMPLAINT WRITTEN: _____

Signature of Complainant: _____

NAME OF TOWNSHIP SUPERVISOR REVIEWING REPORT & SIGNATURE _____ DATE: _____