



Animal Rescue League of Boston Law Enforcement Department

Citizens Compliment/Complaint Form

To file this form:

Mail to: 10 Anna's Place, Dedham, MA 02026, Attn: LE Dept.

Email to: Cruelty@arlboston.org

If you need assistance, please call 617-426-9170 x110

PLEASE FILL OUT THIS FORM IN ITS ENTIRETY

PERSON MAKING COMPLIMENT/COMPLAINT INFORMATION

Name:			
Address:			
Telephone:	(Home)	(Work)	(Cell)

EVENT/INCIDENT INFORMATION

Location of Event/Incident	Date of Event/Incident	Time of Event/Incident

WITNESS INFORMATION

Name of Witness	Phone number	Address	Relation to You (Yes or No) If yes, please specify.
1)			
2)			

OFFICER(S) INFORMATION

Name of Officer	Badge Number of Officer	Description of Police Vehicle

DESCRIPTION OF INCIDENT

Description in as much detail as possible of the event/incident. (Use Page 2 of this form if additional space is necessary)

