Town of Stillwater Police Department

PO Box 700 Stillwater, NY 12170
(518) 664-4611
police@stillwaterny.org

**Chief
Paul Pecor**
Ext. 215

**Sergeant
Alex Dunn**
Ext. 214

Stillwater Police Department
Complaint/Commendation Form

The Mission of Stillwater Police Department is to work collaboratively with the community to ensure the safety and security of the public we serve. We will serve with honor, integrity and professionalism.

If you would like to commend a member of the Stillwater Police Department, or file a complaint against a member of the Stillwater Police Department please complete this form. This form can be mailed, emailed or submitted in person to any member of the Stillwater Police Department.

I would like to a file: [ ] Complaint   [ ] Commendation

Your Information:

Last Name: _____ First Name: _____ M.I._____ Date of Birth: _____

Street Address: _____ City: _____ Sate: _____ Zip: _____

Phone#: _____ Email Address: _____

Incident Information:

Date of Incident: _____ Time of Incident: _____

Location of Incident: _____ Incident # (if known): _____

Witnesses, if any (include name and contact information):
_____

Incident Details:
_____
_____
_____
_____
_____
_____

Pursuant to section 210.45 of Penal Law of the State of New York. Any incorrect or false statement contained in this instrument is punishable as a Class A Misdemeanor. I hereby affirm that the foregoing statements are true under penalty of perjury, this _____ day of _____. 20____.

_____
      Signature of Reporting Person

Date Received: _____ Received by: _____   Page _____of _____

Town of Stillwater Police Department

PO Box 700 Stillwater, NY 12170
(518) 664-4611
police@stillwaterny.org

Chief
Paul Pecor
Ext. 215

Sergeant
Alex Dunn
Ext. 214

Stillwater Police Department
Complaint/Commendation Form-Continuation

Incident Details:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Pursuant to section 210.45 of Penal Law of the State of New York. Any incorrect or false statement contained in this instrument is punishable as a Class A Misdemeanor. I hereby affirm that the foregoing statements are true under penalty of perjury, this _____ day of _____. 20____.

_____
     Signature of Reporting Person

Date Received: _____ Received by: _____