



La Center Police Department  
105 W. 5<sup>th</sup> Street  
La Center, WA 98629  
Ph. 360.263.2745 Fax. 360.263.2757

**Citizen Complaint / Comment Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Detailed description of comment or complaint:**  
\_\_\_\_\_

Officer / Staff involved: \_\_\_\_\_

Do you want staff to contact you regarding a resolution: Yes      No

**\*\*\*\*\*CITY USE ONLY\*\*\*\*\***

Routed to:		Date Routed:	
Routed to:		Date Routed:	
Resolution by:		Date Resolved:	
Supervisor:		Date reviewed:	

*(Initial response or Resolution should be completed within 5 business days)*

**ACTION TAKEN:**