

DISPOSITION (check all that apply):

<input type="checkbox"/>	Praise noted / copy forwarded	Comments: _____ _____ _____
<input type="checkbox"/>	Explained policy or procedure to Citizen	Comments: _____ _____ _____
<input type="checkbox"/>	Resolved with citizen without officer's input	Comments: _____ _____ _____
<input type="checkbox"/>	Resolved with citizen with officer's input	Comments: _____ _____ _____
<input type="checkbox"/>	Discussed with officer to resolve	Comments: _____ _____ _____
<input type="checkbox"/>	Filed only, no way to identify officer involved	Comments: _____ _____ _____
<input type="checkbox"/>	No evidence or basis for complaint	Comments: _____ _____ _____
<input type="checkbox"/>	Other resolution (see comments)	Comments: _____ _____ _____



Received by:	Date:	Referred to (Supervisor):	Date:
Supervisor:	Date Received:	Disposition Date:	Involved Officer's Initials: