

Socorro Police Department
Socorro, Texas

CITIZEN COMPLAINT/ COMPLIMENT

Upon completing this form, you may mail it to:

**Socorro Police Chief 240 N.
Moon Rd. Socorro, Texas 79927**
or email to:
policechief@costx.us

Name _____

Address _____

Phone _____

Name of Officer (If known) _____

Officer's Agency _____

Date and Time of Incident _____ Location of Incident _____

Complaint/Compliment (What did the officer/employee do wrong/right?) _____

Details (In your own words, describe what the officer/employee did and said). _____

Witness Name _____ Telephone No. _____

Witness Name _____ Telephone No. _____

Citizen's Signature: _____ Date _____

For Department Use Only

Date Received: ____/____/____ By: _____

Administrative Case No. _____