

Affirmation

I, _____,
do hereby affirm that the foregoing information provided by me is true and complete to the best of my knowledge and belief. I understand that any false, misleading, or untrue statements, accusations or allegations, herein made by me, either orally or in writing, to any person(s) investigating this complaint, may subject me to civil and/or criminal prosecution.

I realize that it may become necessary, during the investigation of this complaint for me to meet with a member of Village Administration, Village Police Department or Village Building Department to discuss this complaint, either in the presence or absence of any accused party. I hereby accept the premise that if any action is initiated through court or administrative hearing, as a result of my complaint, my testimony before these hearings may be required. I hereby agree to make myself available to the aforementioned court or administrative hearing when requested to do so.

Signed,

Complainant Signature

Date

in the Village of St. Charles, County of Saginaw.

Witness Signature (*NOTARY NOT REQUIRED*) _____

Witness Signature (*NOTARY NOT REQUIRED*) _____

For Village Use Only

Name of Initial Reviewer of Complaint	Date of Review
Recommendation	
Signature	

To be completed by investigator of complaint:

Type of Complaint	Date Received
Date Investigation Was Initiated	
Date Investigation was Completed	
Dated of Filing Final Report	
Determination <input type="checkbox"/> Substantiated <input type="checkbox"/> Unfounded <input type="checkbox"/> Inconclusive	
Investigators Signature	Date

Final Determination:

Substantiated Unfounded Inconclusive

Action taken:

Comments:

Complainant Notified of Disposition by: _____ Date _____

Department Notified of Disposition by: _____ Date _____

Village Manager Signature _____ Date _____