

Police Department
P.O. Box 380
Venus, TX. 76084
972-366-3332
cityofvenus.net/departments/police

Complaint Processing Form

Last Name:	First Name:	N	MI:	Home Phone #:		Cell Phone #:	
Mailing Address:		(City:	ity:		State:	Zip:
Email Address:							
ate of Incident:		Location of Inc	ident:				
Time of Incident:		Report Number	Report Number of Incident: Citation Number:				
Name of Involved Employees		I I	Badge #	How Involved? (Committed act or witness)			
iling a false complaint ntentionally makes a fa e found guilty and pur have read each pa ertify the facts cor	alse statement under nished by a fine up ge of this statem	r oath, or swears to to \$4,000, confiner ment consisting of	the truth ment in jar	of a false stateme il up to one year,	ent previously r or both fine an	nade under o	ath, a person m ent.
ignature				Date			

Complaint Processing From

Statement Continuation

Please sign and date each page that bears your statement and initial all corrections.						
	n of the Texas Penal Code, Section 37.02. If a person knowingly and the truth of a false statement previously made under oath, a person may nent in jail up to one year, or both fine and imprisonment.					
I have read each page of this statement consisting of certify the facts contained herein are true and correct	of page. Corrections, is any bears my initials. I ct.					
Signature	Date					