## Appendix B

Department/Agency \_\_\_\_\_\_ IA Case Number \_\_\_\_\_

INTERNAL AFFAIRS REPORT FORM		
Person Making Report (Optional, But Helpful)		
Full Name	Phone	Preferred?
Address	Email	
City, State	DOB	
Officer(s) Subject to Allegation (Provide Whatever Info Is Known)		
Officer(s)	Badge No	
Incident Site	e Date/Time	
In the space below, describe the type of incident (traffic stop, street encounter) and any information about the alleged conduct. If you cannot fit your response below, feel free to use extra pages and attach them to this document. If you do not know the officer's name or badge number, provide any other identifying information.		
	Other Information	
How was this reported?  In Per Any physical evidence submitted Was incident previously reported	ed? 🗆 Yes 🗆 No If yes, describ	
To Be Completed by Officers Receiving Report		
		•
Officer Receiving Complaint	Bade	ge No. Date/Time
Supervisor Reviewing Complaint	Bad	ge No. Date/Time

Internal affairs complaints can be submitted by:

In person at the front desk

By e-mail: internalaffairs@rahwaypolice.com

By regular mail addressed to: Internal Affairs 1 City Hall Plaza, Rahway, NJ 07065

By telephone: 732-827-2108