



# CITIZEN POLICE REVIEW BOARD

816 Fifth Avenue, Suite 400

Pittsburgh PA 15219

412-765-8023

[www.cprbpg.org](http://www.cprbpg.org)



Internal use only
CPRB #:
Date:
Initials:

You do not have to use this form, but the CPRB does require a **SWORN (NOTARIZED) WRITTEN STATEMENT** to investigate a complaint. Your sworn statement will be held as confidential until such time as the CPRB orders a public hearing on your complaint. If the CPRB does not order a public hearing, your sworn statement will be preserved as a confidential matter.

If anyone attempts to pressure you to withdraw your CPRB complaint, please notify us at the number listed above.



Contact Information	
Full Legal Name:	Victim Name and contact info, if different than complainant:
Legal Address:	
Date of Birth:	Home Phone:
Mobile Phone:	Preferred e-mail:
Alternate Contact Name, Address, and Phone:	
Incident Report	
Incident Date & Time:	Name/ID of Subject Officer(s):
Incident Location:	
Description of Subject Officer(s) if Name/ID are unknown:	





\*\*\*NOTE\*\*\* While the CPRB investigates allegations of misconduct against Pittsburgh police officers, the Office of Municipal Investigations (OMI) investigates complaints against all City of Pittsburgh employees. Therefore, the CPRB and OMI often share information while conducting separate investigations of the same complaints. Upon receiving this completed form, the CPRB typically forwards a copy to OMI for that agency's reference, and to request documents for the CPRB investigation.

Would you like CPRB to forward your complaint to OMI? Yes  No

If you ***do not want*** the CPRB to forward a copy of this form to OMI, please sign and date here:

(Name) \_\_\_\_\_ (Date) \_\_\_\_\_

FORM OF AFFIDAVIT

\_\_\_\_\_ Of \_\_\_\_\_

County of \_\_\_\_\_

Before me, the undersigned notary public, personally appeared

\_\_\_\_\_

to me known or proven, who being duly sworn according to the law, doth depose and say that: "Pursuant to the CPRB Rules and Operating procedures, §662.05(h)(5), I hereby certify that to the best of my knowledge, and under the penalty of perjury, the statements made herein are true."

\_\_\_\_\_  
(Complainant's Signature; **must be sworn/affirmed and signed in the presence of a notary public.**)

Subscribed and sworn/affirmed to me this

\_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(Notary Public's signature)