



Waupaca Police Department

Pete Kraeger, Chief of Police
124 S. Washington Street • Waupaca, WI 54981
pete.kraeger@waupacawi.gov
www.cityofwaupaca.org
715.258.4400

Dear Citizen,

Attached you will find the Waupaca Police Department's complaint against Member/Department Statement form. Please read this letter carefully before completing the forms, it will explain the various options and procedures available for filing a complaint.

You may decide to take your complaint directly to the Waupaca Police Commission. For further directions on that process, please review page 6. In some cases, the Department or officers involved may take your complaint to the Police Commission. Any proceeding before the Police Commission is public. Documents related to Police Commission proceedings are public records and are generally disclosable under Wisconsin law.

Any written complaint submitted to us is a public record. This means that upon request, the department may be subject to disclosure to news media or any person requesting the documents. If you request confidentiality, the Department will make every legal effort to respect that request, however, it is not possible to guarantee confidentiality. The Department is required by State Law to inform you that **"whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture."**

If you decide to file a complaint with the Department and want it to be a formal complaint, the "Attestation and Notary Form" should be completed and notarized. The Department can assist you with this upon completing the complaint.

If a complaint is not notarized it will be treated as an Informal Complaint. Both Formal and Informal complaints are investigated. In either case, please complete the Statement form with as much detail as possible including specific dates, times, witnesses, officer names, badge numbers, and descriptions of the officers involved and why you feel the officer's conduct was inappropriate.

Finally, be sure to sign the Complaint form.

Completed complaints can be mailed, faxed, emailed, or dropped off in person to the Chief of Police.

The address is: Chief of Police
 Waupaca Police Department
 124 S Washington St
 Waupaca, WI 54981



CITIZEN COMPLAINT FORM

Date: _____

1. Complainant's Name: _____
(Last) (First) (Middle)

2. Address: _____
(Street) (City/State) (Zip Code)

3. Phone No.: _____ 4. Date of Birth: _____

5. Business Phone No.: _____ 6. Work Hour's: _____

7. Incident Date and Time: _____

8. Incident Location: _____

9. Name, Badge No. and Rank of Accused Officer(s), if known, or Description: _____

10. Witnesses to Incident:

Name _____ Age: _____

Address _____ City _____ State _____ Zip Code _____

Phone Number Home (_____) _____ Business (_____) _____

Name _____ Age: _____

Address _____ City _____ State _____ Zip Code _____

Phone Number Home (_____) _____ Business (_____) _____



FORMAL COMPLAINT
FORM REQUIRED FOR ATTESTATION AND NOTARY

State of Wisconsin)

County of Waupaca)

_____, being first duly sworn on oath, deposes and says
(Printed Name of Complainant)

That he/she is the complainant in the described in the following pages; and he/she has read the forgoing complaint and knows that content thereof; that the same are true and complete to his/her own knowledge, except as to those matters therein stated upon information and belief, and as to those matters he/she believes to be true.

Wisconsin Statue 946.32, FALSE SWEARING:

- 1) Whoever does the following is guilty of a Class “D” Felony
 - a) Under oath or affirmation makes or subscribes a false statement which (s)he does not believe is true, when such oath or affirmation is authorized or required by law, or is required by any public officer or governmental agency as a prerequisite to such officer or agency taking some official action.

OATH TO BE ADMINISTERED BY NOTARY:

Do you solemnly swear that the facts contained in the complaint which you have filed are true and correct to the best of your knowledge, so help you God?

Complainant’s Signature Under Oath

Translator/Signer, if applicable

Witness:

Subscribed and sworn to before me
This _____ day of _____, 20_____.

Notary Public, _____ County, Wisconsin
My commission is (permanent) or (expires on _____)



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BOARD OF POLICE COMMISSIONERS: You may, as an alternative, file your complaint directly with the Police Commission by delivering to the Chairperson, or addressed to the WAUPACA POLICE COMMISSION, ATTN: CHAIRPERSON, 111 S MAIN ST, WAUPACA WI 54981. If the complaint is against the Chief of Police, the complaint must be filed with the Mayor or his/her designee. A complaint filed with the Board will be referred to the Chief for resolution. If the complaint is not resolved by the Chief to the satisfaction of the complainant, you may, pursuant to WI ss 62.13(5) file formal charges directly with the Police Commission provided you file a written request with the Board within thirty days (or later, if good cause is shown) of written notification from the Chief regarding his/her disposition of the complaint.

COMPLAINT PROCEDURE: Investigation of a complaint filed on this form will be completed within a reasonable amount of time at which point the complainant will be provided a written disposition from the Chief or designee. If the complaint is not resolved to the satisfaction of the complainant, he/she may either request a meeting with the Chief to discuss the matter and/or file a written request for a hearing with the Police Commission. This request must be filed with the Commission within thirty days (or later, if good cause is shown) of receiving written notification from the Chief regarding disposition of the complaint. The Police Commission will review all investigatory reports of the incident and any supporting or conflicting documentation and in its discretion either schedule a formal hearing before them or place the complaint on file.



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DEPARTMENT USE ONLY

- Signature of Supervisor Taking Complaint _____ Date/Time _____
- Reviewed by Chief of Police: Date/Time _____
- Investigator Assigned to: _____ Date/Time _____
- Investigation Complete: Date/Time _____
- Recommended action to be taken: _____
- Chief's Signature _____ Date/Time _____
- Complainant Notified: Date/Time _____ By: (Mail, Telephone, Person)