USPP FORM 44-06
(04/02)

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE
UNITED STATES PARK POLICE

CITIZEN COMPLAINT REPORT

COMPLAINANT'S NAME – LAST, FIRST, MIDDLE	DATE OF REPORT	**USPP USE ONLY**
COMPLAINANT'S HOME ADDRESS	DATE OF INCIDENT	IMARS CASE NUMBER
COMPLAINANT'S BUSINESS ADDRESS	COMPLAINANT'S HOME PHONE	PP ☐☐☐☐☐☐☐☐
NATURE OF COMPLAINT	COMPLAINANT'S BUSINESS PHONE	REFER TO CASE NUMBER
LOCATION OF INCIDENT		PP ☐☐☐☐☐☐☐☐

DESCRIPTION OF COMPLAINT

NOTICE: MAKING OF A FALSE STATEMENT IS PUNISHABLE BY CRIMINAL PENALTIES (18 USC SEC. 1001 OR 36 CFR 2.32)

COMPLAINANT'S CERTIFICATION

I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF
THE ABOVE INFORMATION IS TRUE AND CORRECT.

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COMPLAINANT'S SIGNATURE

REVIEWED BY (SIGNATURE AND DATE)	SUPERVISORY REVIEW (SIGNATURE AND DATE)