



Robert A. Turner
Undersheriff

Camden County Office of the Sheriff

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Gilbert L. "Whip" Wilson
Sheriff



Thomas J. Macauley
Chief
John L. Feizer
Chief Warrant Officer

INTERNAL AFFAIRS REPORT FORM

Person Making Report (Optional)

Full Name _____ Phone _____
Address _____ Email _____
City, State _____ DOB _____

Officer(s) Subject to Allegation (Provide whatever info is known)

Officer(s) _____ Badge No. _____
Incident Site _____ 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 person Phone Letter Email Other _____
Any physical evidence submitted? Yes No If yes, describe: _____
Was incident previously reported? Yes No If yes, describe: _____

To be Completed by Officers Receiving Report

Officer Receiving Complaint Badge No. Date/Time

Supervisor Reviewing Complaint Badge No. Date/Time