Kagawaran/Ahensiya Bergenfield Police Department Numero ng Kaso sa IA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **FORM NG ULAT NG MGA GAWAING PANLOOB** | | | |
| **Taong Gumagawa ng Ulat** (Opsiyonal, Pero Nakakatulong) | | | |
| **Buong Pangalan**  **Tirahan (Apt #)**  **Lungsod, Estado,**  **Zip** | \_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Telepono**  **Email**  **Petsa ng**  **Kapanganakan** | Mag Gusto?  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **(Mga) Opisyal na Sumasailalim sa Alegasyon** (Ibigay ang Anumang Alam na Impormasyon) | | | |
| **Pangalan ng (mga) Opisyal**  **Lokasyon ng Insidente** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_ | **Numero ng Tsapa**  **Petsa/Oras** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Sa espasyo sa ibaba, ilarawan ang uri ng insidente (engkuwentro sa hintuan ng trapiko, kalye) at anumang impormasyon tungkol sa ibinibintang na pagkilos. Kung hindi mo mapagkasya ang iyong sagot sa ibaba, huwag mag-atubiling gumamit ng mga ekstrang pahina at ilakip ang mga ito sa dokumentong ito. Kung hindi mo alam ang pangalan o numero ng tsapa ng opisyal, ibigay ang anumang ibang nagpapakilalang impormasyon. | | | |
| **Ibang Impormasyon** | | | |
| **Paano ito iniulat?** □ Nang Personal □ Sa Telepono □ Sa Liham □ Sa Email □ Iba \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **May pisikal na ebidensiyang isinumite?**  □ Oo □ Hindi Kung oo, ilarawan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Naiulat na ba dati ang insidente?**  □ Oo □ Hindi Kung oo, ilarawan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Upang Kumpletuhin ng mga Opisyal na Tumatanggap ng Ulat** | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Opisyal na Tumatanggap ng Reklamo Numero ng Tsapa Petsa/Oras  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Superbisor na Nagsusuri ng Reklamo Numero ng Tsapa Petsa/Oras | | | |