Massachusetts State Police
Citizen Response Form

Reporting Individual's Information		
Name:		DOB:
Home Address:		Home Phone Number: Cell Phone Number: Work Phone Number:
License Number and State (If applicable):		Vehicle Registration and State (if applicable):
Incident Date:	Incident Time:	Incident Location/Address:

Report Narrative

Type of Report (please check one): Complaint ☐ Other ☐

NARRATIVE: Please provide a description of the event that you are reporting. Include the following information if known and/or applicable; Officer name, rank and badge or identification number, cruiser description and number, witness information and citation number.

Signature_____ Date:_____

Use next page for additional narrative if needed.

Submission of a SP 340 Citizen Response Form

This form may be submitted in the following manner:

- Delivered in person to: The Massachusetts State Police General Headquarters 470 Worcester Road Framingham, MA 01702 / Citizen Response Reports; or
- Faxed to: The Division of Standards and Training/ Citizen Response Reports 508-820-2149; or
- Emailed to: The Division of Standards and Training/ Citizen Response Reports at Citizensresponsereports@pol.state.ma.us ; or
- Mailed to: The Massachusetts State Police Division of Standards and Training/ Citizen Response Reports 470 Worcester Road Framingham, MA 01702
- Click the submit button to electronically submit this form – Please only click once: (Requires use of an e-mail account)

Submit this form

The Massachusetts State Police take your comments seriously.
An officer assigned to the Division of Standards and Training will contact you upon receipt of this document. You may also call 508-988-7003 during regular business hours. If a report is found to be fabricated and maliciously pursued, the reporting party may be subject to criminal prosecution and/or civil proceedings.

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Additional Report Narrative