

**CITY OF MEADE – MUNICIPAL COURT
132 S. FOWLER ST.
PO BOX 338
MEADE, KS 67864
(620) 873-8432**

CITIZEN COMPLAINT FORM

Court File Stamp

To ensure prompt prosecution of your complaint, please provide as much information as you can. Failure to include all necessary information may result in delay of the prosecution of your complaint. Not all complaints will be prosecuted.

Your Information:

First Name: _____ Last Name: _____ M.I.: _____
Physical Address: _____ Date of Birth: _____
PO Box #: _____ Cell/Home/Work #: _____
Tag # (if applicable): _____ State of Tag (if applicable): _____

I ☐ do ☐ do not wish to be involved with the prosecution of this case.*

Description of Person:

First Name: _____ Last Name: _____ M.I.: _____
Physical Address: _____

If complaint is about an animal, please describe the owner of the animal

Complaint:

On the ____ day of _____, 20____, at approximately _____ a.m./p.m.,
the above described person did, at _____ (location), the following act(s):

Use reverse side if necessary

It is unlawful for any person to report or cause to be reported, to any court or police agency, any information concerning the commission of an offense or other incident that would require court or police action when the person knows that no offense occurred or the person knows the information provided is false.

Citizen Complainant