DAIM (FORM) NAJ NPAWB *(FORM NUMBER)*

NTAWV QHIA THAUM NROOG MINNEAPOLIS TUB CEEV XWM COJ TUS YAM NTXWV TSIS ZOO

(MINNEAPOLIS POLICE CONDUCT INCIDENT REPORT FORM)

Siv daim ntawv no los ua ntawv tsis txaus siab txog ib tug tub ceev xwm twg hauv nroog Minneapolis (Minneapolis Police Officer). Xa daim ntawv no xa tuaj yog **thawj kauj ruam ntawm kev tsis txaus siab**. Siv ib tug npiv thiab sib sib zog sau. Muaj peb daim ntawv tom ua ke; daim xim pink (daim nyob hauv qab) yog koj daim khaws cia. Ob daim saum toj yuav tsum muab xa rau **Minneapolis Police Department Internal Affairs Unit Hoob 126, 350 S. 5th Street Minneapolis, MN 55415** (siv lub hnab ntawv uas muab tuaj nrog). Muaj neeg hauv chaw tshawb nrhiav (Internal Affairs) mam li hu koj li ntawd **tsib hnub (cov hnub neeg ua haujlwm)** thaum lawv tau txais koj daim ntawv tsis txaus siab. Chaw ua haujlwm tshawb nrhiav (Internal Affairs) yuav yog tus uas taug qhov kev tsis txaus siab no, ntshe koj ho xav kom **lwm cov neeg (Civilian Review Authority) yog cov uas taug qab xwb.** Thov khij lub npov raws li qhov koj xav tau saum toj txoj kab xyeem npe. Yog tias koj khij lub npov kom cov neeg Civilliam Review Authority yog cov taug qab no, chaw ua haujlwm tshawb nrhiav (Internal Affairs Unit) mam li muab koj daim ntawv tsis txaus siab xa mus rau cov neeg (Civillian Review Authority). Yog koj muaj lus nug txog qhov kev ua haujlwm no, thov hu rau chaw ua haujlwm tshawb nrhiav (Internal Affairs Unit) ntawm 612-673-3074.

NPE (XEEM, NPE, NPE NRAB) *(NAME(LAST, FIRST, MIDDLE))*	**HNUB YUG** *(DATE OF BIRTH)*

CHAW NYOB (KEV, NROOG, XEEV, ZIP) *(HOME ADDRESS (STREET, CITY, STATE, ZIP)*

XOV TOOJ HAUV TSEV *(HOME PHONE)*	**XOV TOOJ HAUJLWM** *(WORK PHONE)*	**XOV TOOJ NTAWM TES** *(CELL PHONE)*	**TUS PAGER** *(PAGER)*

TUS KHEJ NAJ NPAWB (YOG TIAS KOJ PAUB) LUB SIJHAWM MUAJ TEJ XWM NO *(INCIDENT CASE NUMBER (IF KNOWN))*	**HNUB/SIJHAWM UAS MUAJ TEJ XWM NO** *(INCIDENT DATE/TIME)*

MUAJ TEJ XWM NO NYOB RAU QHOV TWG (THOV PIAV KOM MEEJ MEEJ) *(INCIDENT LOCATION (PLEASE BE AS SPECIFIC AS POSSIBLE))*

TUS TUB CEEV XWM NTAWD DAIM BADGE NAJ NPAWB *(OFFICER BADGE NUMBER(S))*	**TUS TUB CEEV XWM NPE** *(OFFICER NAME(S))*	**DAIM TSHEB NAJ NPAWB** *(SQAD NUMBER)*

COV NEEG POVTHAWJ *(WITNESS NAME(S))*	**CHAW NYOB** *(ADDRESS)*	**XOV TOOJ** *(PHONE NUMBER)*

PIAV QHIA: THOV PIAV QHIA KOM MEEJ SEB UA LI CAS *(NARRATIVE - PLEASE DESCRIBE THE INCIDENT IN DETAIL)*

XA MUS RAU *(REFERRED TO)*

☐ MPD Internal Affairs Unit ☐ Civilian Review Authority

* Ceeb Tom: Koj xav kom chaw tshawb nrhiav (Internal Affairs) lossis pawg neeg (Civilian Review) uas tus taug qab los tau, tiamsis koj hais tsis tau kom **ob pawg taug qab tibsi**.

TUS NEEG TSIS TXAU SIAB XYEEM NPE *(COMPLAINANT SIGNATURE)*	**HNUB/SIJHAWM** *(DATE/TIME)*

TAU TXAIS LOS NTAWM *(RECEIVED BY)*	**HNUB/SIJHAWM** *(DATE/TIME)*

DAIM NTAWV NO MUAJ UA LWM HOM *(THIS FORM IS AVAILABLE IN ALTERNATIVE FORMAT.)*

Thov hu rau Roberts Hawkins, tus neeg ua haujlwm hauv ADA, Human Resources Department ntawm 612-673-2694. Cov neeg lag ntseg lossis tsis hnov lus zoo no hu rau 612-673-2626 TTY yog xav paub ntxiv lossis xav teem caij kom ib tug neeg uas paub siv lus piav tes paub nws teb daim ntawv no.