



ORISKANY POLICE DEPARTMENT
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RICHARD A.
ZABEK

PERSONNEL/DEPARTMENT COMPLAINT FORM

Complainant's Allegations:

Continue on additional form if more space is needed and attach.

Subscribed and sworn to before me
this ____ day of _____,

Affirmed under penalty of perjury this ____ day of _____.

Signed by: _____

Witness: _____

Witness: _____