

Date: \_\_\_\_\_

**PRIVATE CRIMINAL COMPLAINT QUESTIONNAIRE**

1. Affiant: Name: \_\_\_\_\_  
(person filing complaint)

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: (home) \_\_\_\_\_

(work) \_\_\_\_\_

2. Defendant: Name: \_\_\_\_\_  
(filed against whom)

Address: \_\_\_\_\_  
\_\_\_\_\_

3. Relationship of Affiant to Defendant: \_\_\_\_\_  
(i.e. spouse, ex-spouse, neighbor, relative, friend, employee, no- relationship)

4. Were the police contacted in regard to this incident? YES/NO  
If yes, please list police department contacted: \_\_\_\_\_

5. Statement of Facts:  
(Please state in as much detail as possible, all the facts pertaining to the incident upon which these charges are being filed).

DATE & TIME OF OFFENSE: \_\_\_\_\_

LOCATION OF OFFENSE: \_\_\_\_\_

(Next Page)

Details/Sequence of Events: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Name	Street Address	City	State	Telephone

7. Types of injuries sustained, if any:

- a. Personal Injuries: (Please describe the nature and extent of injuries and whether any medical or hospital treatment was incurred. Also, please note whether any loss of work resulted because of injuries).

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- b. Property Damages: (Please describe the nature and extent of any property damage in the alleged incident and the estimated costs to repair and/or replace the property- 2 estimates recommended).

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8. Does the affiant expect the defendant to file charges against him/her from the same incident upon which these charges were filed? YES\_\_\_ NO \_\_\_\_\_