



LIBERTY HILL ISD POLICE DEPARTMENT

16500 W SH 29
LIBERTY HILL, TX, 78642
Phone: 512.260.5532
Fax: 512.260.5533

Chris Rybarski
Chief of Police

COMPLAINT FORM

Name: _____ **Sex:** M F **Date of Birth:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Cell Phone: _____ **Work Number:** _____ **Email:** _____

Case # or Call # (if applicable): _____

Describe the Incident: _____

I have read the statement, which bears my signature, and the facts contained therein are true and correct to the best of my knowledge. I understand that if the investigation proves these allegations to be false, I may be liable to both criminal and civil prosecution.

Complainant Signature: _____ **Date:** _____

Complete and return signed form to:

Email: LHISDPD@libertyhill.txed.net

In Person: Liberty Hill ISD Police Department, 16500 W SH 29, Liberty Hill, TX 78642