GCRTA Transit Police Department

PUBLIC COMPLAINT FORM

Completed forms can be emailed to TPcomplaints@gcrta.org, mailed to the GCRTA Transit Police Department at ATTN: Transit Police; 1240 West 6th Street, Cleveland, Ohio 44113, or arrangements can be made to deliver the form by calling 216-356-3838. Upon receipt of a completed complaint form, the complaint will be assigned for investigation. Completed investigations will be classified as follows:

- **Sustained**- There is sufficient evidence to establish that the alleged act occurred and constituted misconduct.
- **Sustained in Part**- There is sufficient evidence to establish that one or more, but not all, alleged acts occurred.
- **Sustained for Violation Not Based on the Original Complaint**- There is sufficient evidence to establish that an act of misconduct occurred that was not part of the violations alleged in the Complaint.
- **Unfounded**- The alleged acts did not occur, did not involve Department personnel, or are frivolous.
- **Exonerated**- The alleged acts occurred, but were justified, lawful, and/or proper.
- **Not-sustained**- The facts and circumstances fail to establish if the conduct occurred.
- **Administratively Dismissed**-The complaint is not GCRTA related, does not involve a Transit Police employee, or is related to a service delay that is determined to be unavoidable.

COMPLAINANT

Name [redacted]

Street Address [redacted] Apt. _____

City Cleveland State Ohio Zip [redacted]

Mobile Phone [redacted] Home Phone _____ Alt. Phone _____

Email Address _____ @ _____

SUBJECT(S) OF COMPLAINT Name(s), Badge Number(s), or Description(s) of accused personnel:

1. [redacted]
2. _____
3. _____

WITNESSES (If necessary, give names/phone numbers of additional witnesses in incident detail below)

1. Name [redacted] Phone Number [redacted]
2. Name _____ Phone Number _____
3. Name _____ Phone Number _____

INCIDENT: Date 9/5/26 Time 2301M Ticket and/or Report Number _____

Location Transit station Turnaround Tower

Please provide details of the incident and the alleged misconduct, describe any sustained injuries and other facts related to the incident. Do not include unsubstantiated information such as gossip or rumor. Attach additional pages as necessary, including other reports or documentation, photographs, medical records, etc.

My cell phone was taken of my possession while sleeping on #9 bus. Driver awaken me once downtown to inform me of last stop. The bus turn into #11 as I was departing and the driver being relieved. I walked to west 8th street to get on #29 bus and check my persons to findout that I did not have phone. I went back to West prospect to see if the bus was still laying over and it had departed.

INCIDENT: Date ~~9/5/26~~ 9/5/26 Time 2:36PM Ticket and/or Report Number _____

Location Terminal Tower Transit Station

Please provide details of the incident and the alleged misconduct, describe any sustained injuries and other facts related to the incident. Do not include unsubstantiated information such as gossip or rumor. Attach additional pages as necessary, including other reports or documentation, photographs, medical records, etc.

Badge [redacted] would not have someone to review tape surveillance to determine whether or not my cell phone were stolen and he would not write the police report for me.

I hereby state under penalty of Perjury (Revised Code 2921.11) that I am the complainant in this complaint, that I have prepared, read, and fully understand all matters set forth in this complaint, that this may result in an official investigation, and the information provided is true and complete to my knowledge.

I understand that filing a false report of misconduct against a Peace Officer is in violation of section 2921.15 of the Ohio Revised Code, a misdemeanor of the first degree.

[redacted] 9/15/26

Signature of Complainant Date

Complaint received by:

[redacted] 9/15/2026 1620

Pri Date Time

DEPARTMENTAL USE ONLY

Investigating Supervisor _____

Investigative Actions: _____

Approved by _____ **Date** _____

Civilian Oversight Committee Recommendation:

_____ **Sustained** _____ **Sustained in Part** _____ **Sustained for Violation Not Based on Original Complaint**

_____ **Unfounded** _____ **Exonerated** _____ **Non-sustained** _____ **Administratively Dismissed**

Final Determination:

_____ **Sustained** _____ **Sustained in Part** _____ **Sustained for Violation Not Based on Original Complaint**

_____ **Unfounded** _____ **Exonerated** _____ **Non-sustained** _____ **Administratively Dismissed**