



**WITNESS INFORMATION:**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

Telephone Numbers:	Home	Work	Cellular
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Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

Telephone Numbers:	Home	Work	Cellular
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Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

Telephone Numbers:	Home	Work	Cellular
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Name: \_\_\_\_\_  
(Last) (First) (Middle)

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

Telephone Numbers:	Home	Work	Cellular:
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**EMPLOYEES INVOLVED: (If known)**

Name: \_\_\_\_\_  
(Last) (First) (I.D. Number)

Name: \_\_\_\_\_  
(Last) (First) (I.D. Number)

Name: \_\_\_\_\_  
(Last) (First) (I.D. Number)

Name: \_\_\_\_\_  
(Last) (First) (I.D. Number)

I solemnly affirm under the penalties of perjury that the contents of the foregoing complaint are true.

Complainant's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Sheriff's Office employee to whom this Complaint Form is given:

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

Distribution: Original - Sheriff's Office

Copy - To Complainant as receipt