



**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