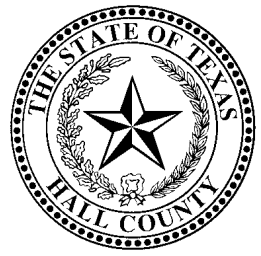


=all County Sheriff's Office
 512 Main St #7
 Memphis, Texas 79245
 (806) 259-2151

PERSONNEL COMPLAINT FORM
 Report of Inquiry / Incident



| | | | | | |
|--|--|------|------------------|------------|--------------------------------|
| Complainant's Name (Last, First, Middle) | | Age | Language Spoken: | | Internal Affairs Complaint # |
| Address | | City | Zip | Home Phone | Alternate Phone (Work or Cell) |
| | | | | | IA- |

| | | | |
|------------------------|-----|------|------|
| Location of Occurrence | DAY | DATE | TIME |
|------------------------|-----|------|------|

| Witness Name (LAST, First, Middle) | Address | City/ZIP | Phone (include Area Code) |
|------------------------------------|---------|----------|---------------------------|
| | | | |
| | | | |
| | | | |

Identity of Involved Personnel

| <input type="checkbox"/> Name / Vehicle No., etc... | <input type="checkbox"/> Officer | <input type="checkbox"/> Civilian | Badge No. | Sex | Race |
|---|----------------------------------|-----------------------------------|-----------|-----|------|
| | | | | | |
| | | | | | |
| | | | | | |

What is the nature of the complaint you are filing?

- Service complaint – (Dissatisfaction with police service)
- Rudeness / Discourtesy
- Excessive Force
- Inappropriate Conduct
- Other _____

| THIS SECTION FOR INTERNAL AFFAIRS USE ONLY: | | |
|--|---|--|
| Check ALL Categories that Apply: <input type="checkbox"/> Service <input type="checkbox"/> Citizen <input type="checkbox"/> Personnel <input type="checkbox"/> Internal Other _____ | Complaint Received by: <input type="checkbox"/> Walk-in <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Other _____ MWPDP Call / Incident No. _____ | Date Received: _____ Involved Section: <input type="checkbox"/> Patrol <input type="checkbox"/> Support <input type="checkbox"/> Admin |

Details of complaint. (Attach additional pages if necessary):

| |
|--|
| |
| |
| |
| |
| |

What would you like as a result of this complaint?

Do you desire a written response regarding your complaint? **YES** **NO**

Do you wish to know the final disposition of your complaint? **YES** **NO**

Hall County Sheriff's Office

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PERSONNEL COMPLAINT FORM

Report of Inquiry / Incident



Briefly describe in your own words what occurred. If more space is needed, attach additional page(s).

~ IMPORTANT NOTICE ~

Government Code: 614.022-023 Complaints Against Law Enforcement Officers

In order for a complaint, against a law enforcement officer in the State of Texas, to be considered by a chief or the head of a police department, the complaint must be placed in writing and signed by the person making the complaint. A copy of the signed complaint must be presented to the affected officer or employee within a reasonable amount of time after the complaint is filed and before any disciplinary action may be taken against the affected employee. Additionally, the officer or employee may not be terminated from employment based on the subject matter of the complaint unless the complaint is investigated and evidence is substantiated to prove the allegation(s) of misconduct.

Penal Code: 37.02-03 Perjury and Aggravated Perjury

It is a criminal offense in the State of Texas for a person, with the intent to deceive and with knowledge of the statement's meaning, to make a false statement under oath or swear to the truth of a false statement previously made and where that statement is required or authorized by law to be made under oath. This crime is punishable as a Class A misdemeanor. This criminal offense may be enhanced as a 3rd degree Felony if the person commits perjury, as defined above, and the false statement is made during or in connection with an official proceeding; and is material.

If allegation(s) are sustained and it is determined an officer/employee acted improperly, disciplinary action will be taken. Because this is a serious matter, with serious consequences potentially resulting for the employee(s) involved, all formal complaints are required to be signed, as sworn to, and notarized.

***I hereby attest that the statement made is my own and the information provided is true and correct.
I understand that if my statement is found to be false or otherwise untrue, I may be subject to criminal charges.***

Signature of Complainant Date

Witnessed by Date

[Notary SEAL]

Sworn to and Subscribed before me, the _____ day of _____, 20 ____.
Notary public in and for the State of Texas.
My Commission expires ____/____/____. Signature of Notary: _____