



Oconto County Sheriff's Office Citizen Complaint Form

For employees of the Oconto County Sheriff's Office

As a citizen, if you believe you have been mistreated or have not received adequate service, you have a moral and legal right to express dissatisfaction with your Sheriff's Office. This will not only make you a responsible citizen, but your input will help to improve our agency. No member of the Oconto County Sheriff's Office will attempt to interfere or influence your right to complain about the service this agency provides to you. Your complaint will be thoroughly and impartially investigated. Before completing this form, please refer to the attached citizen guide brochure that explains the process and defines possible findings.

Date: _____

Complainant Information

Name:	(Last)	(First)	(Middle)
Address:			
Home Phone:	Date of Birth: _____		
Cell Phone:	Email: _____		
Work Phone:	Work Hours: _____		

Employee Involved

Name, Badge #, Rank (if known), or description:	_____

Incident Information

Date:	Time:	Location:
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Witness Information

(Additional witness names can be added to the back of the form)

Name:	(Last)	(First)	(Middle)
Address:			
Home Phone:	Cell Phone: _____		
Name:	(Last)	(First)	(Middle)
Address:			
Home Phone:	Cell Phone: _____		

Details of Complaint

Filing of False Reports

Pursuant to Wis. Stats. Section 946.66(2), whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture.

Signature

Complainant Signature: