

# Napa County Sheriff's Department

## Formal Citizen's Complaint Form

<b>COMPLAINANT</b> Name- Last, First Middle		<b>COMPLAINANT</b> Residence Address	
Date of Birth	Home/Business Phone #'s	Business/School Address	

<b>WITNESS</b> Name- Last, First Middle		<b>WITNESS</b> Residence Address	
Date of Birth	Home/Business Phone #'s	Business/School Address	

Who are you making the complaint about? \_\_\_\_\_  
(Deputy's Name or Vehicle No.)

What do you believe the Deputy did wrong? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Where did this happen? \_\_\_\_\_

When did this happen? \_\_\_\_\_ AM / PM (circle one)  
(Date) (Time)

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### ADMONITION

(To be completed by citizen)

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE MISCONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZEN'S COMPLAINTS. YOU HAVE THE RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.

I have read and understand the above statement.

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(Complainant's Signature)

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(Date)