

**WOODBURY COUNTY SHERIFF
REPORT OF COMPLAINT AGAINST POLICE PERSONNEL
CONFIDENTIAL**

Name of Complainant(s):

Address you can be reached at:

Phone #'s:

Complaint # (If Known):

Date and time of incident:

Location of incident:

Name of officer(s) or employee(s) against whom the complaint is being lodged:

Name:

Rank:

I.D. #:

Vehicle:

Name(s)/Address(s)/Phone #(s) of witnesses, if applicable:

Statement of allegation:

I understand that this statement of complaint will be submitted to the **Woodbury County Sheriff's Office** and may be the basis for an investigation. Further, I sincerely and truly declare and affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Further, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion, or promise of any kind. I understand that, under the regulations of the Office, the employee(s) against whom this complaint is filed may be entitled to request a hearing before a board of inquiry, if one is requested by the employee, and to testify under oath concerning all matters relevant to this complaint. Any false allegation made against member(s) of this Office shall also be investigated and where warranted, criminal action may be taken.

Signature of Complainant

____/____/_____
Date

Signature of Person Receiving Complaint

____/____/_____
Date