CITIZEN COMPLIMENT/COMPLAINT FORM

For over 30 years, California law has required each department or agency in this state that employs peace officers to have a procedure for the investigation of complaints by members of the public against its personnel. The policy of the Mendocino County Sheriff’s Office is simple: we will conduct a full and fair investigation into all complaints regarding our personnel. The Sheriff’s Office also has a policy on recognizing employees for good conduct. We are now providing citizens with the ability to report either good or bad conduct on one form, and we are making this form available on our website.

Citizen Compliment / Complaint forms can be delivered to any of our offices or substations, or mailed to our administrative office at the address shown below, or e-mailed to sheriff@mendocinosheriff.com. All compliment / complaint forms will be reviewed first by either the Undersheriff or a Sheriff’s Captain. Compliments will be recognized appropriately—up to and including a formal commendation or award. Complaints will be investigated fully and fairly. Allegations of serious misconduct will be investigated by the Sheriff’s Professional Standards Bureau. These investigations include interviews with the complaining party, witnesses, the involved personnel and an examination of all physical and documentary evidence. Investigative reports are reduced to writing. Pursuant to California law, each complaint will receive one of the following dispositions: Sustained, Not Sustained, Unfounded or Exonerated. The Sheriff’s Office will provide written notification to the complaining party of the disposition of the complaint within 30 days of the disposition.

California Penal Code Statutes §832.5 and §832.7 provide further information about the complaint investigation process. You can read these statutes by going to the website of California’s Legislative Counsel. The URL is: http://www.leginfo.ca.gov/calaw.html.

I have read and understand the above statement.

Citizen’s Signature                          Date
Citizen’s Name:  

Address:  

City:  |  State:  |  Zip:  

Driver’s License No:  |  Home Phone:  |  Work Phone:  

I would like to be contacted:  |  Yes:  |  No:  

Employee’s Name:  |  Case No:  

Date of Incident:  |  Time:  |  Location:  

Witness/es:  
1.  
2.  
3.  
4.  

Supervisor giving citizen the form:  |  Date/Time:  

Supervisor receiving form:  |  Date/Time:  

WRITE A NARRATIVE OF THE INCIDENT INCLUDING ANY STATEMENTS MADE:

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Continue Narrative On Next Page