CONFIDENTIAL SAN AUGUSTINE COUNTY SHERIFF'S OFFICE CITIZEN COMPLAINT FORM

Sheriff Robert Cartwright 219 North Harrison Street

San Augustine, Texas 75972

All Complaints concerning San Augustine County Sheriff's Office personnel are taken seriously and will be investigated thoroughly and impartially. Persons wishing to make a formal complaint against a department employee must submit this completed form. The form must be written legibly or typed. When completed, the form may be taken directly to the San Augustine County Sheriff's Office or mailed to the address above. An investigator will review the completed form and speak with you, after which time this form must be sworn to and notarized.

The mere filing of this complaint does not substantiate the allegations. If an investigation determines the employee acted improperly, disciplinary actions will be taken. You will be notified of the results when the investigation is complete.

TEXAS GOVERNMENT CODE Complaints against Law Enforcement Officer or Detention Officer/County Jailer

Sec. 614.022 Complaint to be in Writing and Signed by Complainant. To be considered by the head of a state agency or by the head of a fire department or local law enforcement agency, the complaint must be: (1) in writing: and (2) signed by the person making the complaint.

Sec. 614.023 Copy of Complaint to be Given to Officer or Employee. (a) A copy of a signed complaint against a law enforcement officer of this state or a fire fighter, detentions officer, county jailer, or peace officer appointed or employed by a political subdivision of this state shall be given to the officer or employee within a reasonable time after the complaint filed. (b) Disciplinary action may not be taken against the officer or employee unless a copy of the signed complaint is given to the officer or employee.

TEXAS PENAL CODE Perjury and Other Falsifications

Sec. 37.08 False Report to Peace Officer or Law Enforcement Employee, Class B Misdemeanor (a) A person commits an offense if, with the intent to deceive, he/she knowingly makes a false statement that is material to a criminal investigation and makes the statement to: (1) A peace officer conducting the investigation: or (2) any employee of a law enforcement agency that is authorized by the agency to conduct the investigation and that the actor knows is conducting the investigation

I affirm that I have read and understand the above information. I hereby wish to file an official complaint and swear the information on the following pates is true and correct to the best of my knowledge.

Signature of Complainant
Printed Name of Complainant
Date and Time

SAN AUGUSTINE COUNTY SHERIFF'S OFFICE

CITIZEN COMPLAINT FORM AFFIDAVIT AND STATEMENT

Your Name: Todav's Date:				
Date of Birth: Male Female Your Address:	e			
	7:			
City: State: Work Phone:				
Home Phone: Work Phone:	Cell Phone:			
Please provide as much information as you can about the inc	ident.			
Date of Incident: Time:	AM PM			
Location:				
If you do not know the officer's now	andler hadge #			
If you do not know the officer's name please give a physical description in the space	•			
1	_			
Officer(s) Involved:	Badge #:			
Officer(s) Involved:	5 , "			
Officer(s) Involved:				
Officer(s) Involved:	Badge #:			
If another witness of any kind was present, please list them he	ere as described above.			
Witness: Address:				
Phone Number(s):				
Address:				
Phone Number(s):				
Address				
Phone Number(s):				
Do you have criminal and/or traffic charges pending from this lf yes, please list:	incident?			
Do you have any evidence which you wish to present with thi If yes, please list:	s complaint?			
What type of complaint are you filing?				
Service Complaint (Dissatisfaction with police service	e) Inappropriate Conduct			
Excessive Force Rudeness	,—			
Alleged Criminal Conduct Other				
Si .				
Signature:				

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SAN AUGUSTINE COUNTY SHERIFF'S OFFICE

CITIZEN COMPLAINT FORM AFFIDAVIT AND STATEMENT

Your Name:		Today's Date:		
Description of Incident:				
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		A Comment of the Comm		
			*	
	_	Signature of Complainant		
	_	Date	Time	
Sworn to and subscribed before me, this	day of			
	_	Notary Public, State of Texas		
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