

Polk County Sheriff's Office Citizen Inquiry / Complaint Form



Complainant's Name _____

Address _____ City _____ State _____ Zip Code _____

Home Phone # _____ Cell Phone # _____ Work Phone # _____ Date of Birth: _____

Gender Female Male

Date of Incident _____ Time of Incident _____ Arrested? No Yes Case # _____

Location of Incident _____

Sheriff's Office Staff Involved _____

Other Agency Staff Involved _____

Witness Name _____

Address _____ City _____ State _____ Zip Code _____

Home Phone # _____ Cell Phone # _____ Work Phone # _____

Witness Name _____

Address _____ City _____ State _____ Zip Code _____

Home Phone # _____ Cell Phone # _____ Work Phone # _____

Complaint Details

A person who reports or causes to be reported false information, knowing the information is false, or who reports the alleged occurrence of a criminal act knowing the act did not occur, commits a misdemeanor. An officer shall have the right to pursue civil remedies under the law against a citizen arising from the filing of a false complaint against the officer.

Complainant Signature _____ Date/Time _____

Sheriff's Staff Receiving _____ Date/Time _____