

**BANKS COUNTY SHERIFF'S OFFICE  
CITIZEN COMPLAINT FORM**

**Complainant Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

How was complaint received?     Telephone     In Person     By mail     Other \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Deputies involved: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Supervisor Receiving Complaint**

Name: \_\_\_\_\_ Rank: \_\_\_\_\_ Badge No.: \_\_\_\_\_

Forwarded to Internal Affairs     Yes     No

**Supervisors Comments**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_