## Pierce County Sheriff's Office

Sheriff Nancy Hove Chief Deputy Steve Albarado



Sheriff Department Phone: 715-273-5051 Administration Fax: 715-273-3409 Investigation Fax: 715-273-3409 Jai/Administration: 715-273-1137

555 West Overlook Drive • Ellsworth, WI 54011

## CITIZEN COMPLAINT FORM

|  | Cit              |                            | 7:n Codo        |
|--|------------------|----------------------------|-----------------|
| Street   | City             | State                      | Zip Code        |
| hone: ()   |                  | Date:/                     |                 |
| riefly state the nature o                            | f the complaint: |                            |                 |
|  | <u>.</u>         |                            |                 |
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|  |                  |                            |                 |
|  |                  |                            |                 |
|  |                  | mes and addresses of other | r persons who h |
| Use additional sheets if i<br>nowledge supporting th |                  | mes and addresses of other | persons who h   |
| ionature of Complainan                               |                  |                            |                 |

| This form is to be sealed in an envelope and immediately forwarded directly to the Chief Deputy.  |
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| *Note: In accordance with WI Statutes 946.66, you are hereby notified that whoever makes a false complaint regarding conduct of a law enforcement officer is subject to a Class A forfeiture. |
| Date and time complaint received:/  |
| Date and time received by Chief Deputy:/  |
| Supervisor Taking Complaint:  |
| Investigating Officer Assigned:   |
| Officer(s) Involved (If known):   |
|   |
|   |