

Montgomery County Sheriff's Office
Administrative Investigation
Non-Employee (Citizen) Complaint Form

Official Use Only: Date/Time Received: _____ Received By: _____ IA #: _____ Assigned to: _____

Instructions:

This form should only be completed if you wish to initiate a complaint against the Sheriff's Office or an employee(s). If you would rather attempt to resolve this issue with the employee's supervisor, you may contact the employee's supervisor directly (936-760-5800). For assistance, please contact the Internal Affairs Office during regular hours or any Sheriff's Office supervisor.

If you decide to file a complaint:

Complete the complainant information and statement portions on the following pages. Once the form is completed it can be delivered to an on-duty supervisor or during regular business hours to the Internal Affairs Office in person (an appointment is required) or the complaint can be mailed to Montgomery County Sheriff's Office – Internal Affairs- 301 North Thompson, Suite 205 in the *James H. Keeshan Building*, Conroe, Texas 77301. You may also meet directly with any Sheriff's Office supervisor or someone in Internal Affairs. Please notify the Internal Affairs Office if your address or phone number changes prior to the resolution of your complaint.

AFFIDAVIT

Please describe both the incident and the specific nature of your complaint as completely as possible. Be sure to give the names, addresses and phone numbers of any witnesses of which you are aware. Be as specific as possible about the details such as exactly what was said, time and dates of incident. Identify the exact location of the incident, identification of the Sheriff's Office employees involved, if known. If Sheriff's Office employee's names are not known, please include detailed descriptions of deputies. Be specific, it is important to provide as much information as possible. Attach additional sheets if necessary. Please feel free to include any other relevant information or items. i.e., photos

AFFIDAVIT

File No: _____

**STATE OF TEXAS
COUNTY OF MONTGOMERY**

**Before me, the undersigned authority in and for the State of TEXAS, on this _____
day of _____, 20____ personally appeared**

_____, who, after being by me duly sworn,

deposed and said:

My name is _____. I am of sound mind, 18 years
of age or older, and competent to give this affidavit. My date of birth is _____. My
driver’s license number is _____ State _____.

My home address is _____.

Street City/State Zip

My home telephone number is _____.

My cell phone and/or work number is _____.

Cell Work

Affiant Signature

Witnesses:

Name: _____

Address: _____

Phone Number: _____

Name: _____

Address: _____

Phone Number: _____

Name: _____

Address: _____

Phone Number: _____

Names of deputies you are complaining about: _____
