



Boundary County Sheriff's Office

Sheriff David Kramer ~ Chief Deputy Richard Stephens

Summary of Complaint Process

It may be required that at some point you come to the Sheriff's Office where your complaint can be reviewed during a personal interview. All information received will be treated confidentially by the Sheriff's Office. A parent or guardian's signature is required on any complaint filed by a person under 18 years of age. You will be required to provide the following information when filing a complaint;

1. Your name, address, telephone number and age.
2. The name, address, telephone number and age of the alleged victim, if other than yourself.
3. The date, day, time and location of the incident about which you are complaining.
4. The names of any witnesses, their addresses and phone numbers.
5. The name, address and telephone number of any person arrested during the incident.
6. The name, unit number, or identifying description of the deputy(s) involved.
7. The name, address and telephone number of any attorney or other person representing you in this matter.
8. A legible, printed and signed narrative describing the events regarding your complaint.

An investigator appointed by the Sheriff will contact witnesses, examine any physical evidence and gather information pertinent to each allegation made. After completing the investigation, a complaint disposition will be made based on each alleged act of misconduct and forwarded to the Sheriff.

While complaints are investigated by a person assigned by the Sheriff, the final disposition of the complaint will be made by the Sheriff. When complaints are found to be sustained, the Sheriff will administer appropriate corrective and/ or disciplinary action. The Sheriff may consider one or more of the following; counseling, training, oral or written reprimand, suspension, demotion, or termination.

Understand that there are two types of misconduct, criminal violation and violation Sheriff's Office Policy. If your complaint is sustained and found to be a violation of policy you are not entitled to being informed of the type of corrective action decided upon by the Sheriff, other than your complaint was sustained and that corrective action was taken. If your complaint is deemed a violation of law, you will be notified of that fact and treated as a victim or witness of a crime in accordance with the investigation, or potential prosecution in a court of law.

You have the right to make a complaint against a member of the Boundary County Sheriff's Office for what you believe to be misconduct. However, this agency may find through investigation into your complaint that there is not enough evidence to warrant action on your complaint. If through the course of the investigation facts or evidence arise that show the complaint was falsely made against any member of the Boundary County Sheriff's Office you may be criminally prosecuted surrounding the filing of the false allegations and statements. Additionally, you may also be held civilly liable for your actions and knowingly false accusations made against any member of the Boundary County Sheriff's Office by the member(s) whom the false accusations were made.

I have read and understand the above statement.

Complainant Signature
Required

Citizen's Report

Reporting Person:

Telephone Number:

Age:

Address (City, State, Zip Code):

Subject of Complaint (if different than above)

Name:

Telephone Number:

Age:

Address (City, State, Zip Code):

Day of Incident:

Date:

Location:

Witnesses (If the witness is not known, give their descriptions) (vehicle license plate, etc.)

	Name	Address	Telephone Number
1:			
2:			
3:			

Boundary County Sheriff's Member Complained of

	Name	Vehicle Number	ID Number (if known)
1:			
2:			
3:			

Persons Arrested

	Name	Address	Telephone Number
1:			
2:			
3:			

Complainant's Attorney or Representative

Name	Address	Telephone Number
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Citizen's Report Continued...

Provide a narrative of the events giving rise to the complaint or criticism. Print and attach additional pages, if needed.

Signature of Reporting Person:

Date:

Signature of Parent or Guardian (if complainant is under 18)

Was the party to the complaint, or witness, detained or interviewed by a deputy?

Yes

No

If so, whom?

Can the complainant be contacted at his / her place of employment?

Yes

No

If so, provide work phone number:

Do Not Write Here. Official Use Only

Name / Rank of Person Receiving Complaint:

ID Number:

Summary of Complaint Process Signed by Complainant?
(required for complaint acceptance)

Yes

No

Forwarded to:

Date: