

**FRESNO COUNTY SHERIFF'S OFFICE  
JOHN ZANONI, SHERIFF  
CITIZEN COMPLAINT FORM**

For Official Use Only

Reporting Person (Last, First, Middle Name)	Date of Birth	Age	I.A. File #
Residence Address (Address and Zip Code)	Telephone	C/R #	
Business or School	Telephone	Date/Time of Complaint	

**VICTIM OF ALLEGED INCIDENT**

Name (Last, First, Middle Name)	Date of Birth	Arrested ( ) Yes ( ) No
Residence Address and Zip Code	Telephone	Attorney or Representative
Business or School	Telephone	Telephone

**NAME OF EMPLOYEE (If known)**

Name	Division	Rank	Badge #	Car #	Description

**WITNESS**

Name	Address	Telephone
Date & Time of Incident	Location of Incident	

**Details of complaint. It is important to include as many factual details as possible so that the incident may be fully investigated. Place complaint on reverse side of form. If necessary, please use additional pages. Also read and sign admonishment on reverse side of form.**

Signature of Reporting Person	Signature of Parent/Guardian (if under age 18)
Signature of Officer Receiving Complaint	Date

**RACIAL OR IDENTITY PROFILING**

Does this Citizen Complaint involve Racial or Identity Profiling? ( ) Yes ( ) No
<b>If "Yes" which of the following best describes the type of Racial or Identity Profiling. Circle those that apply.</b>
Race / Color / Ethnicity / National Origin / Age / Religion / Gender Identity / Sexual Orientation / Mental or Physical Disability

