

PERSONNEL COMPLAINT FORM

Cayuga County Sheriff's Office

7445 County House Road Auburn, NY 13021

Phone: (315) 253-1222 Fax: (315) 253-4575

www.cayugasheriff.com sheriff@cayugacounty.us

The Cayuga County Sheriff's Office is committed to providing the highest quality police, custody, civil and security services to each and every member of the community and your input is important to us. If you have a complaint concerning a CCSO employee, please do one of the following:

- Complete this form and submit it directly at the Public Safety Building or mail this form to:
- Call (315) 253-1222 and ask to speak to a supervisor.
- Send an E-mail to: **sheriff@cayugacounty.us**.
- Go to **www.cayugasheriff.com** and click on the "Citizen Feedback" icon on the homepage.

Cayuga County Sheriff's Office
ATTN: Undersheriff
7445 County House Rd.
Auburn, NY 13021

PERSON MAKING COMPLAINT

NAME		PHONE
ADDRESS		EMAIL

INCIDENT

DATE	TIME	REASON PERSON FILING COMMENT CAME INTO POLICE CONTACT	CASE NUMBER IF KNOWN
LOCATION OF INCIDENT / ADDRESS IF KNOWN			

PERSONNEL INVOLVED

NAME	POST / STATION	BADGE NUMBER	CAR NUMBER	SEX <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U
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WITNESSES (IF AVAILABLE)

NAME	ADDRESS	PHONE
NAME	ADDRESS	PHONE

DETAILS OF COMPLAINT – USE PAGE 2 OR ATTACH ADDITIONAL SHEETS IF NEEDED

AFFIRMATION

NOTICE: (Penal Law §210.45) In a written instrument, any person who knowingly makes a false statement which such person does not believe to be true has committed a crime under the laws of the State of New York punishable as a Class A Misdemeanor.

Complainant's Signature _____ Date ____ / ____ / ____

Print Full Name _____

COMPLAINT RECEPTION

OFFICIAL USE ONLY – COMPLETED BY MEMBER RECEIVING COMPLAINT

DATE COMPLAINT RECEIVED	TIME COMPLAINT RECEIVED	STAFF MEMBER RECEIVING COMPLAINT	PAGE 1
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SOURCE OF COMPLAINT

IN PERSON PHONE MAIL EMAIL WEBSITE MAIL OTHER:

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PERSON MAKING COMPLAINT

NAME	PHONE
ADDRESS	EMAIL

DETAILS OF COMPLAINT CONTINUED FROM PAGE 1

(This area is intentionally left blank for the continuation of the complaint details from the previous page.)

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SOURCE OF COMPLAINT

- IN PERSON
 PHONE
 MAIL
 EMAIL
 WEBSITE
 MAIL
 OTHER: