



# WILKESBORO POLICE

100 West Street • Wilkesboro, North Carolina 28697

Phone 336.667.7277

Fax 336.838.9905

CHIEF OF POLICE CRAIG GARRIS

INTERNAL USE ONLY \_\_\_\_\_

COMPLAINT# \_\_\_\_\_

## Public Complaint Form

The Wilkesboro Police Department aggressively investigates all allegations of misconduct lodged against officers and other employees of the agency. The purpose of these investigations is to determine and examine all facts and circumstances relevant to the incident in question. Should such allegations be sustained as a result of the investigation, appropriate actions will be taken to prevent a future occurrence of the conduct.

Please complete this form with as much detail as possible. You may be contacted by a department representative to gather further information for a complete investigation.

We are a professional law enforcement agency. We require all our employees to act in a professional manner in order to promote a positive public image and serve the community in adherence with the highest ethical and professional standards.

Your complaint will be reviewed and feedback on the complaint will be offered. Here is the procedure to file a complaint:

1. Fill out the attached form to the best of your ability, including any and all information that can assist us in determining the basis of your complaint. Do not include only what you think may be important but give a full account of the situation that caused you to file this complaint.
2. The complaint can be mailed or brought to the department in hand. If you decide to bring the complaint in to the department, leave it with the Records Clerk.
3. Once the department receives the complaint you will receive verification that we have received it through the mail.
4. The Wilkesboro Police Department will also accept complaints by phone and mail; however, we would appreciate the complaint being written onto the form provided, and any additional information can be attached to the form.
5. Your complaint will be forwarded to the appropriate supervisor for review. Every person who has filed a complaint against the department or any employee shall be notified promptly as to the results of the investigation, personally if possible or otherwise by mail.



*A Nationally Accredited Law Enforcement Agency*



6. The department will accept anonymous complaints. We encourage any person making a complaint to do so without anonymity; but in any case, we encourage you to use this form.

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Phone Numbers: Cell \_\_\_\_\_ Home \_\_\_\_\_

Work \_\_\_\_\_

Date of Occurrence \_\_\_\_\_

Time of Occurrence \_\_\_\_\_

Location of Occurrence \_\_\_\_\_

Police Officer's Name(s) And/or Badge

Number \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Witnesses Name(s) and Contact

Information \_\_\_\_\_

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Complaint Narrative:

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