

COSHOCOTON COUNTY SHERIFF'S OFFICE Compliment/Complaint Form

The most appropriate person to file a complaint is the person experiencing or witnessing alleged employee misconduct rather than uninvolved third parties. However, parents or guardians should feel free to make complaints on behalf of their minor children. Your complaint will receive a complete investigation and review. The goal of the Coshocoton County Sheriff's Office is to provide the citizens of the County with the highest level of professional conduct possible.

What are you reporting? <i>(Check only one)</i> LI-Compliment LI-Complaint				I.A. # <i>(Administrative Use Only)</i>				
Target of Compliment/Complaint Information								
Sheriff Employee's Name and Badge # <i>(if known)</i>				Race	Sex	Height	Weight	Age
Identifying Characteristics				Vehicle or Tag #				
Reporting Party's Information								
Name <i>(Last Name, First Name)</i>				Home Address			Apt#	
City	State	Zip Code	Contact them by LI-Home LI-Business LI-Mobile LI-Email					
Witness Information								
Name <i>(Last Name, First Name)</i>				Home Address			Apt#	
City	State	Zip Code	Contact them by LI-Home LI-Business LI-Mobile LI-Email					
Name <i>(Last Name, First Name)</i>				Home Address			Apt#	
City	State	Zip Code	Contact them by LI-Home LI-Business LI-Mobile LI-Email					
Incident Information								
Date of Incident				Time of Incident				
Location of Incident								
Incident Summary								
Acknowledgement & Endorsement								
<p>2921.15 Making false allegation of peace officer misconduct. (A) As used in this section, "peace officer" has the same meaning as in section 2935.01 of the Revised Code. (B) No person shall knowingly file a complaint against a peace officer that alleges that the peace officer engaged in misconduct in the performance of the officer's duties if the person knows that the allegation is false. (C) Whoever violates division (B) of this section is guilty of making a false allegation of peace officer misconduct, a misdemeanor of the first degree. Effective Date: 0322-2001</p>								
Signature of Reporting Party: _____				Date: _____				
Name of Employee Accepting Form <i>(Last Name, First Name)</i>				Assignment		Time & Date		

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Incident Summary Continuation

Signature of Reporting Party: _____ Date: _____

Investigative time-lines and what to expect:

This form may be turned in either in person or by mail to the Sheriff's Office.
Please send this to the attention of;
Human Resources
328 Chestnut Street
Coshocton, Ohio 43812

A representative from the Sheriff's Office will contact you within 2 business days to discuss the status of your compliment or complaint if you have marked for them to do so. The nature and complexity of the investigation will change how soon the investigation may be finalized, but the Sheriff's Office is committed to accepting and acting on community feedback. All follow up on complaints may be done with our Director of Administrative Services.