

## **Fresno County Probation Department**

Kirk Haynes, Chief Probation Officer



## Citizen Complaint Form Peace Officer

The Fresno County Probation Department welcomes justified complaints concerning the actions of our employees. The Chief Probation Officer wants to inform you that this Department wishes to provide you the best service possible.

Citizen Complaint Form			Incident Number		Date Report Filed
Reporting Pe	erson:				
Name (Last, First, Middle)		Home Phone	Bus. Pho	ne#	Mobile #
Address (City, State, Zip Code					
Date of Birth:		CDL#			
Victim of Mis	sconduct (if other than	above):			
Name (Last, First, Middle)		Home Phone	Bus. Pho	ne#	Mobile #
Address (City					
Day and Date of Incident		Time of Incident	Location of Incident		
Witness(s):					
Name		Address		Phone (Home/Bus/Mobile)	
Namo(s) of E	imployee (if known):				
Name(s) of Employee (if known):  Name of officer/employee		Car Number (if known)		Badge Number (if known)	

## OFFICE OF THE CHIEF PROBATION OFFICER

3333 E. American Ave. / Building 701 / Suite B / Fresno, California 93725 Phone (559) 600-1294 / FAX (559) 455-2488

Give a brief narrative description of the e	vents that led to this o	complaint. You may attach
additional sheets as necessary.		
ADVISORY T	O COMPLAINANTS	
Fresno County Probation Department requir or other personnel be verified by a declaration statements and reports communicated by yo	on "under penalty of p	erjury" confirming all
"PLEASE BE AWARE THAT PURSUANT T BEING REQUIRED BY LAW TO MAKE AN' OATH, WILLFULLY MAKES AND DELIVER REPORT, PURPORTING TO BE UNDER C ANY PARTICULAR, IS GUILTY OF PERJUITAKEN OR NOT. California Penal Code §1	Y RETURN, STATEM S ANY SUCH RETUF ATH, KNOWING THE RY, WHETHER SUCF	ENT, OR REPORT, UNDER RN, STATEMENT, OR E SAME TO BE FALSE IN
HAVING READ AND UNDERSTOOD THE I TO VERIFY EACH STATEMENT BY ME SE PERJURY.		,
"I hereby declare under penalty of perjury puthe foregoing statements and reports by me		the State of California that
Signature (be sure to READ above statement	nt BEFORE signing)	Date
When completed mail to: Assistant Deputy Chief- Personnel 3333 E. American Ave., Ste. B Fresno, California 93725 (559) 600-4825		
FOR USE BY THE PROBATION DEPARTMEN	Τ:	
Signature of person receiving complaint	Phone number	Date/Time

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