



333 Daniel Webster Highway, Boscawen, NH 03303 Tel: 603-796-6600

## **HOW TO MAKE A COMPLAINT**

1. If you wish to make a complaint about the actions of a Deputy Sheriff or about any aspect of Merrimack County Sheriff's Office operations, please:
  - a. Come to the office and tell an employee that you want to make a complaint; or
  - b. Call the Sheriff's Office and tell the person answering the phone that you want to make a complaint; or
  - c. Write your complaint and mail it to the Sheriff; or
  - d. Visits our website @ [Merrimackcounty.net](http://Merrimackcounty.net) and go to Sheriff's Office page.
  - e. If your complaint involves the Sheriff, you may contact the appropriate authority i.e. Board of Commissioners and/or Delegation.
2. A deputy will assist you in filling out a report of complaint against law enforcement personnel on the appropriate form. This form asks you to identify yourself and then to give specific details about your complaint.
3. Your complaint will then be investigated. You may be contacted and asked additional questions about your complaint.
4. You will be contacted by the Sheriff, or his designee, when the investigation has been completed.



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## REPORT OF COMPLAINT AGAINST POLICE PERSONNEL

### CONFIDENTIAL

Name of complainant: \_\_\_\_\_

At what address can you be contacted? \_\_\_\_\_

What phone number: Residence: \_\_\_\_\_ Cell: \_\_\_\_\_

Date and time of incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

**Name of deputy(s) against whom complaint is being filed or other identifying marks  
(plate number, badge number, etc.)**

Rank: \_\_\_\_\_ Name: \_\_\_\_\_

I.D. # \_\_\_\_\_ Badge \_\_\_\_\_

Vehicle: \_\_\_\_\_

Name(s) address/phone number or other identifying information concerning witness: \_\_\_\_\_

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

Statement of allegation: \_\_\_\_\_

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\_\_\_\_\_

(If further space is needed use reverse side of sheet)



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I understand that this statement of complaint will be submitted to the MCSO and may be the basis for an investigation.

Further, I sincerely and truly declare and affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Further, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion, or promises of any kind.

I understand that, under the regulations of the Merrimack County Sheriff's Office, the Deputy against whom this complaint is filed may be entitled to request a hearing before the appointing authority. By signing and filing this complaint, I hereby agree to appear before the appointing authority, if a hearing is requested by the deputy, and to testify under oath concerning all matters relevant to this complaint.

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person Receiving Complaint

\_\_\_\_\_  
Date and Time Received

- Check if complainant refused to sign
- Signature not requested