



CLACKAMAS COUNTY SHERIFF

Sheriff Angela Brandenburg

Jesse Ashby, Undersheriff

Lee Eby, Undersheriff

Brad O'Neil, Undersheriff

To submit this report you can: Mail it to 2223 Kaen Rd., Oregon City, OR 97045
OR drop off in person at 9101 SE Sunnybrook Blvd., Clackamas, OR 97015 OR fax to 503-785-5190
OR call 503-785-5000 OR e-mail it to ccsopsu@clackamas.us

CCSO COMPLAINT REPORT

DATE OF THIS REPORT: _____

FACTS ABOUT THE INCIDENT:

Incident Date & Time: _____

Incident Location: _____

Incident Case Number: _____

Sheriff's Office Employee Involved: _____

CITIZEN INFORMATION:

I am filing this complaint on behalf of myself: Yes No

If you answered NO, and you are making a complaint on behalf of another citizen, what is your name, relationship and contact number? _____

Contact information for the citizen with a complaint:

Name: _____

Date of birth: _____

Street Address: _____

City, State & Zip Code: _____

Phone Number (s): _____

Does the citizen with the complaint wish to remain anonymous? Yes No

Can we contact the citizen with the complaint? Yes No

WITNESS(ES) TO THE INCIDENT:

Name: _____

Name: _____

Date of birth: _____

Date of birth: _____

Address: _____

Address: _____

City, State & Zip: _____

City, State & Zip: _____

Phone Number (s): _____

Phone Number (s): _____

A Tradition of Service Since 1845

Office: 9101 SE Sunnybrook Boulevard, Clackamas, Oregon 97015

Mailing: 2223 Kaen Road, Oregon City, Oregon 97045

Phone: 503-785-5000 Fax: 503-785-5190 www.ClackCoSheriff.us

SUMMARY OF COMPLAINT: Use this area to document the complaint in as much detail as possible. Use additional pages as needed. (Please also attach other information you would like us to review including any documents, photographs, recordings, etc.)

TO BE COMPLETED BY SHERIFF'S OFFICE PERSONNEL:

CCSO Member Receiving Complaint: _____

Date & Time Complaint Received: _____

Complaint forwarded to: PSU ADA Coordinator Supervisor