

Case Number _____

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Monroe County Sheriff's Office

Criminal Complaint

I want to file a criminal complaint against the following person:

Name _____

Address _____

Date of Birth, if known _____

Social Security Number, if known _____

Any other identifying characteristics

WHAT CRIME DO YOU BELIEVE OCCURRED? _____

WHEN DID THIS HAPPEN? _____

WHERE DID THIS HAPPEN? _____

Please explain what happened:

Case Number _____

Complaint Against _____

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Names/Address/Phone# of witnesses or other persons who may have information about this incident.

1. Name: _____ Phone #: _____

Address: _____

2. Name: _____ Phone #: _____

Address: _____

3. Name: _____ Phone #: _____

Address: _____

4. Name: _____ Phone #: _____

Address: _____

5. Name: _____ Phone #: _____

Address: _____

Others please list

I have the following evidence to provide investigating Officers:

I understand that I may be required to testify against the person or persons named in the complaint.

The above information is true, to the best of my knowledge and belief.

Signature _____

Date _____

Print Name _____

SSN _____

Address _____

DOB _____

Home phone number _____

Cell number _____