

McLENNAN COUNTY SHERIFF'S OFFICE

**COMPLAINT PROCEDURE
FOR
PROHIBITED RACIAL PROFILING**

Any person who believes that a Deputy/Officer has engaged in racial profiling with respect to that person shall be provided with a complaint form, which shall be available at the Sheriff's Department. The following format has been adopted for addressing an alleged violation of Chapter 10 – Prohibited Racial Profiling in the Policy/ Procedures of the McLennan County Sheriff's Office.

- 1. The Complaint should be in writing.***
- 2. The complaint must be signed before a Notary Public. If the Complainant does not have access to a Notary Public, he or she may sign the form before an employee of the Department who is a Notary Public.***
- 3. The complaint must be filed with the Department Coordinator (Chief Deputy) of the McLennan County Sheriff's Office.***
- 4. The completed form may be brought to the McLennan County Sheriff's Office located at 901 Washington Ave. Waco, Texas or mailed to the following address:***

***McLennan County Sheriff's Department
Chief Deputy / Department Coordinator
901 Washington Ave.
Waco, Texas 76701.***

- 5. All Complaints will be investigated.***

McLENNAN COUNTY SHERIFF'S OFFICE

**COMPLAINT / WITNESS FORM
FOR
PROHIBITED RACIAL PROFILING**

Instructions

- 1. Complete all blanks in writing***
- 2. Must be signed before a Notary Public. If the complainant does not have access to a Notary Public, he or she may sign the form before an employee of the Department who is a Notary Public.***
- 3. The complaint must be filed with the Department Coordinator (Chief Deputy) of the McLennan County Sheriff's Office***
- 4. The completed form may be brought to the McLennan County Sheriff's Office located at 901 Washington Ave. Waco, Texas or mailed to the following address:***

***McLennan County Sheriff's Office
Chief Deputy / Department Coordinator
901 Washington Ave.
Waco, Texas 76701***

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**COMPLAINT / WITNESS FORM
FOR
PROHIBITED RACIAL PROFILING**

Today's Date: _____

Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Home Phone: _____
Work Phone: _____
Cell/Pager: _____

Date of incident: _____
Time of incident: _____
Location of incident: _____
Did you receive a citation or warning? _____
Did the other passengers or witnesses receive a citation or
warning? _____
If yes, who? _____

Vehicle Information:

Make: _____ Model: _____ Year: _____
License Plate # _____ State: _____

Passengers in vehicle / other witnesses:

Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____

Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____

Do you know the name of the Deputy or other officers that made contact with you? _____

If yes, who? Name: _____

Agency: _____

Name: _____

Agency: _____

Name: _____

Agency: _____

Have you ever had contact with this Deputy or other Officer before this event? _____

If yes, --Name of Deputy or Officer: _____

Month: _____ Year: _____

Citation or Warning issued: _____

Please describe in detail the words, actions and events as they occurred upon which you base your complaint of racial profiling. Please include date, time, location and names of witnesses in your statement.
