



# MINERAL COUNTY SHERIFF'S OFFICE

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**Address:** 310 River St. - Superior Montana 59872  
**Phone:** 406-822-3555  
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**Sheriff Email:** [Mtoth@co.mineral.mt.us](mailto:Mtoth@co.mineral.mt.us)  
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**Website:** <https://co.mineral.mt.us/>

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## Personnel Complaint Form

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Name of Complainant (please print) \_\_\_\_\_ Date of Birth \_\_\_\_\_

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Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Home Phone # \_\_\_\_\_

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Date & Time of Incident \_\_\_\_\_ Address where incident occurred \_\_\_\_\_

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Name of Person(s) you are complaining about, if known: (Include Badge number if known.) \_\_\_\_\_

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Have you reported this to anyone previously? yes no Date \_\_\_\_\_ If so, Whom: \_\_\_\_\_

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Names of any witnesses to incident: (Include phone numbers and contact information if known.) \_\_\_\_\_

### Pursuant to § 45-7-203, MCA

(1) A person commits the offense of *Unsworn Falsification to Authorities* if, with the purpose to mislead a public servant in performing an official function, the person:

- (a) makes any written false statement that the person does not believe to be true;
- (b) purposely creates a false impression in a written application for any pecuniary or other benefit by omitting information necessary to prevent statements from being misleading;
- (c) submits or invites reliance on any writing that the person knows to be forged, altered, or otherwise lacking in authenticity; or

(2) A person convicted of an offense under this section shall be fined not to exceed \$500 or be imprisoned in the county jail for any term not to exceed 6 months, or both.

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

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Date \_\_\_\_\_

By signing and submitting this document, you acknowledge you have read and understood all of the information contained herein.

