

COMMENDATION OR COMPLAINT MEMORANDUM FORM

Marshal's Department 160 Pryor Street, SW, Suite J-102 Atlanta, Georgia 30303 Office: 404-612-4451

Email: FCMD. Complaint Commendations @fulton county ga.gov

This is a C	Commenda	tion 🗌 / Complai	int ☐ (please che	ck only one optior	n) pertaining to the follo	wing:	
Date of Re	eport	Time:					
Your Nam Home Add					Telephone (home)		
Telephon	e (work):			Email			
ocation of Incident:		Date of Incident		Time of Incident			
Complain	t Type:	Use of Force	Service	Property	Misconduct		
How Rece	eived:	In Person	Letter	Telephone	Other		
NARRAT	IVE:						
Deputy's I	Name:						
Witness:	Name:	Name:			Telephone (home):		
	Address:			Tel	ephone (work):		
Witness:	Name:			Tel	ephone (home):		
	Address:			Tel	ephone (work):		
Your Signa	ature:			Da	ate:		
Form Rece	eived By:			Er	nployee # :		

FULTON COUNTY MARSHAL'S DEPARTMENT

Personnel Commendation or Complaint Memorandum

Continuation of Narrative