

CITY OF LAVON MUNICIPAL COURT CITIZEN COMPLAINT

TO: CITIZEN COMPLAINANT WISHING TO FILE A COMPLAINT AGAINST ANOTHER CITIZEN

THESE SPECIFIC POINTS ARE UNDERSTOOD BY THE UNDERSIGNED:

- 1) The citizen must, in good faith, make full, fair, and honest disclosure of all facts and circumstances known to him/her at the time this application for complaint is filed. The facts, as presented, must be in the form of an affidavit and provided under oath. Said affidavit will form the basis of any further investigation and the charging instrument.
- 2) The citizen-complainant must be sworn and sign both the application for complaint and the complaint (when prepared by the city prosecutor).
- 3) The citizen-complainant must be willing to appear in Court to testify against the defendant if the charges are contested (i.e., the accused pleads not guilty).
- 4) The prosecutor reserves the right to subpoena the presence of the citizen-complainant and enforce the subpoena by ordering a police officer to bring the citizen-complainant to Court.
- 5) The defendant may file a counter-complaint if the citizen-complainant has also been involved in some illegal activity. Please be advised that any statement made at this time or in the future to a police officer, prosecutor, or other city investigative personnel may be used against you should the counter-complaint go forward to trial. Please be advised that when speaking to the prosecutor, the prosecutor represents the State of Texas, and no attorney-client relationship is established by any communications with regard to the application for the complaint or any matters related thereto.
- 6) Once this complaint is accepted by the prosecutor and filed with the court, only the judge, upon recommendation of the prosecutor, has the authority to dismiss a complaint.

Citizen-Complainant (Print Full Name)

Citizen-Complainant (Signature)

Date

Witness to Signature (Print Full Name)

Witness to Signature (Signature)

Date

CITY OF LAVON MUNICIPAL COURT CITIZEN COMPLAINT

APPLICATION FOR COMPLAINT

DATE: _____ COMPLAINANT'S NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ CELL: _____ WORK: _____

DEFENDANT

NAME OF DEFENDANT: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ CELL: _____ WORK: _____

PLACE OF EMPLOYMENT: _____

RACE: _____ SEX: _____ DATE OF BIRTH: _____

WEIGHT: _____ AGE: _____ BODY STYLE: _____

VEHICLE INFORMATION (if applicable)

MODEL: _____ MAKE: _____ YEAR: _____

COLOR: _____ BODY STYLE: _____ SPECIAL FEATURES: _____

LICENSE PLATE: _____ STATE OF REGISTRATION: _____

OFFENSE

ALLEGED OFFENSE: _____

DATE OF OFFENSE: _____ to _____ TIME OF OFFENSE: _____ to _____

LOCATION OF OFFENSE: _____

TYPE OF PREMISES: _____

LIST OF ALL WITNESSES (use additional pages if necessary)

WITNESS 1 NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ CELL: _____ WORK: _____

WITNESS 2 NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE (HOME): _____ CELL: _____ WORK: _____

