“CITIZEN COMPLAINT FORM”

Complainant’s Name: ____________________________________________

Address: _________________________________________________________

Telephone Number: Home ___________________________ Cell __________

Date of Birth: ___/___/___

Witness Names: __________________________________________________

Address: _________________________________________________________

Telephone: _______________________________________________________

Officer(s) Name: _________________________________________________

Badge Number: ___________________________________________________

Nature of complaint (describe what occurred / use back of form if necessary):

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

(over)

Location of Incident: _________________________

Date and Time of Incident: _________________________ Police Report Number: __________

The Randolph County Sheriff’s Office recognizes the need for the filing of legitimate complaints against officers as a means by which they can be held accountable to the public; however, the Department will also seek to hold members of the public responsible for the filing of false allegations against police officers. In keeping with State Law (50 ILCS 725/3.8) “anyone filing a complaint against a sworn peace officer must have the complaint supported by a sworn affidavit”.

Complainant’s Signature: _________________________ Date: ________ Time: ________
Parent/Guardian of Juvenile: _____________________ Date: _______ Time: _______

Witness Signature: ___________________________ Date: _______ Time: _______

Receiving Officer: _____________________________ Date: _______ Time: _______

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(narrative continued)

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Complainant’s Signature ____________________________ Date ____________