

Citizen Complaint Form

Please take a moment to complete the following information which will be needed in reviewing the facts surrounding your complaint. Please include as much detail as possible. **PLEASE PRINT EXCEPT FOR SIGNATURE.**

NAME: _____ BIRTH DATE: _____
(first, middle, last)

ADDRESS: _____ HOME PHONE: (_____) _____
WORK PHONE: (_____) _____

MY COMPLAINT IS ABOUT: (if known)

OFFICER/EMPLOYEE(S): _____

BADGE NUMBER(S): _____

CAR NUMBER(S): _____

I wish to make a formal complaint regarding the conduct or actions of the above officer(s)/employee(s) as a result of an incident which occurred:

DATE: _____ TIME: _____ LOCATION: _____

Please explain in detail what happened and what the officer(s)/employee(s) did that you are filing this complaint about. Please use the back of this form or additional sheets of paper if necessary.

You have the right to make a complaint against any employee for improper conduct. The Coal Valley Police Department will conduct a thorough investigation and you will be notified when the investigation has been completed. If allegations against the officer(s)/employees(s) are sustained, the Coal Valley Police Department cannot release to you any type of disciplinary action taken. The investigation may also conclude that the officer(s)/employee(s) acted properly or that there is not enough information to prove or disprove the allegations.

I understand that this statement of complaint will be submitted to the Coal Valley Police Department and will serve as a basis for an internal investigation. I declare and affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Furthermore, I agree to fully cooperate with any investigation and agree to appear at any civil or criminal proceeding if necessary. I also understand that any intentional false statements herein attested to by me, may be cause for criminal and/or civil proceedings against me.

Date: _____ Signature (optional): _____

Parent or Guardian if under 18 years of age: _____

**Please return this form to
Coal Valley Police Department
900 1st Street
Coal Valley, IL 61240**