

VILLAGE OF SCHAUMBURG

Complaint Receipt Form

Complaint Receipt #: _____ Related RD Number: _____

Date/Time of Incident: _____ Date/Time Reported: _____

Complainant: _____ Telephone Number: _____

Date of Birth: _____

Address: _____

Witness: _____ Telephone Number: _____

Address: _____

Witness: _____ Telephone Number: _____

Address: _____

Witness: _____ Telephone Number: _____

Address: _____

Complaint Description:

Please be as detailed as possible, use a separate page if necessary.

VILLAGE OF SCHAUMBURG

Complaint Receipt Form

Complaint Receipt #: _____

Manner in which Complaint was Received: _____

Location of Occurrence: _____

Employee Name: _____ Date/Time: _____

Employee Name: _____ Date/Time: _____

Employee Name: _____ Date/Time: _____

Bureau Commander/
Section Supervisor Name: _____ Date/Time: _____

OPS Notified by: _____ Date/Time: _____

Investigator Assigned: _____ Date/Time: _____

I understand that upon my submission of this complaint, the facts of the incident will be investigated by the department or legal authorities. I further understand that I am filing an Official Police Report and that knowingly providing false or untrue information can constitute an offense that can result in arrest, pursuant to 720 ILCS 5/26-1(a)(4).

I certify, under the penalties as provided by law pursuant to 735 ILCS 5/1-109 of the code of Civil Procedures that the statement set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief, and as to such matter, I certify as aforesaid that they verily believe the same to be true.

Complainant's Signature

Date/Time

I, being first sworn on oath, deposes and says that I have documented the facts alleged in this Complaint as they were related to me, to the best of my ability.

Officer's Signature

Date/Time

SUBSCRIBED and SWORN to before me as a notary public of Cook County, Illinois this ____ day of _____, 20____

Notary