

ITASCA POLICE DEPARTMENT

540 W Irving Park Road, Itasca, Illinois 60143-2018
Phone: 630-773-1004 www.itasca.com/police



ITASCA POLICE DEPARTMENT INTERNAL INVESTIGATIONS CITIZEN COMPLAINT

I, _____ of _____
(Print Name) (Address)

allege that _____, a member of the Itasca Police Department, committed an act of misconduct/violation of the law as described below. I affirm the following allegations to be true. 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 5/4-26-1(a)(4).

(narrative continued)

Witness Name _____

Witness Address _____ Telephone _____

Witness Name _____

Witness Address _____ Telephone _____

Witness Name _____

Witness Address _____ Telephone _____

Signature _____ Date/Time _____

Witness _____ Date/Time _____

Signed _____

Complainant

The foregoing Complaint is subscribed and sworn to before me this _____ day of _____, 20____

Signed: _____

Notary Public

IAR# _____