

Continuation of Summary:
Attach additional sheet if necessary and initial at the end of statement

<p>Read Before Signing</p> <p><input type="checkbox"/> I understand, and it is my desire, that this complaint be investigated diligently. I declare that the allegations contained in this complaint are true.</p> <p><input type="checkbox"/> I also understand that it is a violation of 720 ILCS 5/26-1(a)(4) to willfully make a false report. In the event the report is proven to be false, the information may be provided to the Madison County State's Attorney for prosecutorial consideration.</p> <p><input type="checkbox"/> The complainant in this matter is either unknown, unable, or is unwilling to swear out the affidavit. The information contained in this form is a true and accurate summary of the incidents as related to me by the complainant.</p>

Signature of Complainant: _____

Notary Signature: _____ Seal

The signature of _____, was subscribed and sworn before me, this _____ day of _____, 20 ____ .

Person Receiving Complaint	ID No.	Place Taken	Date	Time
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- Distribution:
- Original to Chief of Police
 - Copy Chain of Command
 - Copy File

Receipt Acknowledged
Supervisor:
Lieutenant:
Deputy Chief:
Chief: