

WILL COUNTY SHERIFF'S OFFICE NOTICE TO THE PUBLIC

THIS NOTICE EXPLAINS HOW TO REGISTER A COMPLAINT AGAINST THE
DEPARTMENT OR ANY OF ITS MEMBERS.

“ALL COMPLAINTS MADE AGAINST THE DEPARTMENT OR ITS MEMBERS SHALL
BE INVESTIGATED, INCLUDING ANONYMOUS COMPLAINTS.”

(General Order No. 26.3 Administrative Complaint Review/Internal Affairs)

PROCEDURE:

1. Attempt to meet with or make arrangements to meet with the department member's immediate supervisor. If the complaint does not concern any individual member however, instead pertains to a particular Department Policy or Procedure, request to see the Watch Commander:

Enforcement:	Laraway Road Station	815-727-8573
Detention:	Adult Detention Facility	815-740-1250

2. If the complaint cannot be resolved by the member's immediate supervisor, you will be asked to complete a form which, when completed, should identify the circumstances, nature, and the extent of the complaint. The "Verified Complaint Against the Department/Member" Form requests specific information which the department needs in order to make a thorough investigation.
3. Complaints cannot be made on behalf of someone 18 or older. They must submit the complaint themselves, unless exigent circumstances exist.
4. Anyone filing a complaint against the department or member must have the complaint supported by a sworn affidavit. This requires the complainant, once the form is completed, to sign the form in the presence of a notary public. However, refusal to do so will not automatically invalidate any such complaint or investigation.
5. Persons who initiate written complaints shall receive written acknowledgement from the Sheriff's Office.
6. The status of the investigation shall be communicated to the complainant periodically and at its conclusion.
7. All investigations shall be completed within forty-five (45) days from the time the written complain is registered. Exceptions shall only be granted by the Sheriff when extenuating circumstances are present.

Page ____ of ____

ATTACHMENT A

Complainant Initials _____

COUNTY OF WILL)
) SS
STATE OF ILLINOIS)

WILL COUNTY SHERIFF

VERIFIED COMPLAINT AGAINST THE DEPARTMENT / MEMBER

This form will serve as a Complaint Supported by a Sworn Affidavit.

PLEASE COMPLETE THE INFORMATION REQUESTED ALONG WITH THE NARRATIVE PORTION OF THE FORM. PLEASE INITIAL EACH PAGE AND HAVE YOUR SIGNATURE NOTARIZED BY A NOTARY PUBLIC.

Complainant:

Name: _____

Address: _____

Telephone: _____

Member Against Whom the Complaint is Made: _____

Date of Occurrence: _____

Time of Occurrence: _____

Location of Occurrence: _____

All Witnesses to Occurrence (Names, Addresses, Telephone Numbers - If additional space is needed, place a check here _____ and list additional witnesses in the narrative portion.)

1. _____

2. _____

3. _____

4. _____

Page ____ of ____

ATTACHMENT B (1)

Complainant Initials _____

WILL COUNTY SHERIFF

VERIFIED COMPLAINT AGAINST THE DEPARTMENT / MEMBER (CONTINUED)

Member's Name: _____

AFFIDAVIT

I, the undersigned, a Notary Public, in and for said County and State, DO HEREBY CERTIFY THAT _____, is personally known to me to be the same person whose name is subscribed to the foregoing instrument as his/her free and voluntary act.

Given under my hand and seal, this _____ day of _____, 20_____.

NOTARY PUBLIC

Illinois law (50 ILCS 725/3.8) requires that anyone filing a complaint against a sworn peace officer must have the complaint supported by a sworn affidavit.

It is a violation of ILCS 720-5/26-1(4) to willfully make a false police report. In the event the report is proven to be false, the information may be provided to the Will County State's Attorney for possible prosecution.

Complainant Name (printed)

Complainant Signature

Page ____ of ____

ATTACHMENT B (3)

Complainant Initials _____