



# ROBBINS POLICE DEPARTMENT



3323 W 137<sup>th</sup> Street, Robbins, IL 60472

Phone (708) 385-4121

## CITIZEN COMPLAINT

Date: \_\_\_\_\_

Time: \_\_\_\_\_

In order to conduct a complete and thorough investigation of your citizen complaint, the Robbins Police Department Internal Affairs Division, request the complainant answer the following questions.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

- Date of incident: \_\_\_\_\_ Time of incident: \_\_\_\_\_
- Location of incident: (Address) \_\_\_\_\_
- Number of officer(s)/employee(s) involved: \_\_\_\_\_

List any names, badge numbers, vehicle numbers and or license plate numbers and/or provide physical descriptions of the officer(s)/employee(s) involved:

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- Number of witnesses who observed the incident \_\_\_\_\_

Provide full names, addresses, phone numbers, and any other information that will assist in this investigation. If there are no witnesses, please write the word "NONE".

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- Were injuries sustained? \_\_\_\_\_ If yes, please list the injuries which were a result of this particular incident.

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- Did you receive any medical attention? \_\_\_\_\_ If yes, provide the name, address and telephone number(s) of any doctor's office and/or hospital, as well as the date you received treatment.

- \_\_\_\_\_

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