



CHAMPAIGN COUNTY SHERIFF'S OFFICE

Sheriff Dustin Heurman
sheriff@co.champaign.il.us

Control Number/Case Number _____

COMPLAINT FORM

Complainant: _____ Home Phone: _____
Address: _____ Business Phone: _____
City: _____ State: _____ Zip Code: _____

Complaint/Allegation made against: _____
(Employee's Name)

Summary of the Complaint/Allegations: _____

Location of occurrence: _____

Date of Occurrence: _____ Time of Occurrence: _____

Witness: _____ Home Phone: _____
Address: _____ Business Phone: _____
City: _____ State: _____ Zip Code: _____

INFORMAL COMPLAINT: Relates to a matter of minor nature for which I do not desire a Formal Investigation. The information contained in this form is a true and accurate summary of the incident(s). (Notarized Signature not required)

FORMAL COMPLAINT: Please Read & Initial Before Signing:

I understand, and it is my desire, that this complaint be investigated formally. I declare that the allegations contained in this complaint are true.

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 forwarded to the State's Attorney for possible prosecution.

Complainants's Signature: _____ Date: _____

Notary Signature:

The signature of _____, was subscribed and sworn before me, this _____ day of _____, 2020.

