

**City of Oak Forest Police Department**  
15440 S. Central Avenue  
Oak Forest, Illinois 60452-2104

**CITIZEN COMMENDATION / COMPLAINT FORM**

COMMENDATION  COMPLAINT  I. A. # \_\_\_\_\_  
(Official Use)

**CITIZEN'S NAME:** \_\_\_\_\_ DAY TEL. #: (\_\_\_\_) \_\_\_\_\_  
(PRINT)

**ADDRESS:** \_\_\_\_\_  
- STREET CITY STATE ZIP CODE

**WITNESS'S NAME:** \_\_\_\_\_ DAY TEL. #: (\_\_\_\_) \_\_\_\_\_  
(LIST ADDL IN NARR.) (PRINT)

**ADDRESS:** \_\_\_\_\_  
- STREET CITY STATE ZIP CODE

**OFFICER(s) INVOLVED:**  
1. \_\_\_\_\_

**NATURE OF INCIDENT:**  
\_\_\_\_\_

2. \_\_\_\_\_

**INCIDENT OCCURED:**

3. \_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ TIME: \_\_\_\_\_

4. \_\_\_\_\_

LOCATION: \_\_\_\_\_

PLEASE READ BEFORE SIGNING:

I understand that it is a violation of 720 Illinois Compiled Statutes, Article 26, Section 5/26-1 (a) (4) for any person to "Transmit in any manner to any peace officer, public officer or public employee a report to the effect that an offense has been committed, knowing at the time of such transmission that there is no reasonable ground for believing that such an offense has been committed". In the event the report is proven to be false, the information may be submitted to the State's Attorney for possible prosecution.

\_\_\_\_\_ (Initials)

**Narrative:** (Please be as brief as possible, narrative may be continued on reverse side)

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person Receiving Commendation/Complaint

Star #

Date

Time



Notary Public: \_\_\_\_\_