At the Mt. Zion Police Department, we pride ourselves on our reputation for professionalism and integrity. To this end, it is our policy to accept and investigate citizen complaints pertaining to this agency, our officers, and non-sworn members. Once received, all written complaints are forwarded to the Chief of Police and assigned to a supervisor for a formal investigation. Each person who makes a formal complaint against a member of the Mt. Zion Police Department will be advised, in writing, of the final disposition of that investigation. Complaint forms are available in the police department lobby or our web site at <https://mtzion.com/police-department>. Citizens may also request a blank complaint form be mailed to them directly by calling 217.864.4012.

Complaint forms can be submitted in person, by mail, or email. Complaint forms submitted by mail can be sent to:

Mt. Zion Police Department

c/o Chief of Police

PO Box 49

Mt. Zion, Illinois 62549

Complaints can also be emailed to Chief Adam Skundberg at [adamskundberg@mtzion.com](mailto:adamskundberg@mtzion.com).

*Complainants are not required to provide their contact information. Anyone wishing to submit a complaint anonymously may omit their contact information.*

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**COMPLAINANT INFORMATION**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone: Day phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WITNESS INFORMATION**

Name Address City, State, Zip Phone

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

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**OFFICER(S) INVOLVED** (please include ID# if known)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LOCATION, DATE, AND TIME OF INCIDENT**

Location Date Time

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

**DESCRIPTION OF INCIDENT**

Please write or type a description of the incident. Be as specific and detailed as possible. Use additional paper if necessary.

**Harassment, retaliation, or retribution for filing a complaint or testifying on behalf of a complainant will not be tolerated. If you believe you are the subject of harassment, retaliation, or retribution as a result of the complaint process please contact the Mt. Zion Chief of Police at 217.864.5414 or the Mt. Zion Village Administrator at 217.864.5424**

*For office use only*

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Complaint received by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID#\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complaint submitted by \_\_\_\_\_\_\_\_ Mail\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_ In Person\_\_\_\_\_\_\_\_\_

Complaint forwarded to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Command Officer