How to Commend or Complain about a Member

The Hampshire Police Department is committed to providing the best possible law enforcement services available to all. The Hampshire Police Department believes that good behavior, professionalism, ethics, and principles on the part of every member of the (agency name) are the very foundation of the Hampshire Police Department. However, there are times when the public may be concerned with the actions of a member. As a means of constantly striving to improve police performance and maintain the highest respect from the community, the Hampshire Police Department:

- > Seeks citizen input for improvement in our services.
- Welcomes citizen commendations of our personnel who admirably perform their duties
- > Encourages questions and/or complaints regarding the agency's performance or the actions of its members whenever there is a concern.

Whether you wish to commend a member or file a complaint about the actions of a member, you may do so in the following ways:

Contact the Chief of Police by phone at 847-683-2240

Complete the Citizen's Commendation/Complaint Form. The form may be submitted via email dpann@hampshireil.org, or printed and faxed to the Hampshire Police Department at 847-683-2341. You may also deliver the completed form in person or mail it to the below listed address:

Hampshire Police Department 215 Industrial Dr Unit D Hampshire, IL, 60140 Phone 847-683-2240

Commendations will be forwarded to the Chief of Police to ensure prompt recognition is given to the member. Complaints will be thoroughly and promptly investigated and in most cases completed within 30 days. Depending on the nature of the complaint, the investigation may be conducted by the Chief of Police or forwarded as appropriate.

If you need further assistance, please call.

Douglas Pann Chief of Police

CITIZEN'S COMMENDATION/COMPLAINT FORM

Name:	Date:
Address:	
Home Phone Number:	Other Phone Number:
Email Address:	
	T INFORMATION
Member's Name:	
Member Identification Number (if known):	Vehicle # (if known):
Date of Incident:	Time of Incident:
Location:	I
DESCRIBE NATURE OF	COMMENDATION/COMPLAINT
FOR COMPLAINTS ONLY: (sign below	·)
do hereby swear or affirm the facts stated ab	pove are to the best of my knowledge true and based on
	fact. (Complainant's Signature)

CITIZEN'S COMMENDATION/COMPLAINT FORM (Continued)		
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	(Complainant's	
Signature) Page of		