

ROCK FALLS POLICE

1013 7th Avenue, Rock Falls IL 61071

815-622-1140

rfpolice@rockfalls61071.com



May 9, 2023

RE: Citizen Complaints

The Rock Falls Police Department takes seriously all complaints regarding the service provided by the Department and the conduct of its members. The Department will accept and address all complaints of misconduct in accordance with this policy and applicable federal, state, and local law. It is the policy of this Department to ensure that the community can report alleged misconduct without concern for reprisal or retaliation.

Complaints may be submitted in person to supervisory staff, over the phone, or in writing.

Complaints can be made anonymously. Please understand the investigation process may be hampered by lack of information if done anonymously or without the ability to follow-up.

A copy of the completed complaint will be provided to the complainant.

If the results of the investigation reveal that you knowingly provided false information regarding the complaint, you may be subject to prosecution as provided under Illinois law.

Complaint forms are available:

- In person at the Rock Falls Police Department
- Online at www.rockfalls61071.net/departments/police-department
- Electronically via email request at police@rockfallsil.gov



David Pilgrim
Chief of Police

Mark Davis
Deputy Chief

Rodney Kleckler
Mayor

Robbin Blackert
City Administrator

CITIZEN COMPLAINT FORM

Complaint tracking number: _____ - _____ (FOR OFFICE USE ONLY)

Complainant’s Information (optional)

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ ZIP: _____

Date of Incident: _____ Time: _____ Incident Number (if known): _____

Location of Incident: _____

Witness Information: _____

Officer(s) involved: _____

Incident description (be as specific as possible): _____

*if you need more space, attach an extra pages

Signature (optional): _____ Date: _____

OFFICE USE ONLY:

RFPD Staff receiving complaint: _____ ID#: _____

Date/Time received: _____

Complaint able to be resolved at time of submission: YES _____ NO _____

Complaint requires additional follow-up investigation: YES _____ NO _____

Chief's Office Use Only:

Complaint reviewed by: _____ Date: _____

Recommendation: _____

Further investigation assigned to: _____

Date investigation completed: _____

Investigation results:

Unfounded _____ Exonerated _____ Not Sustained _____ Sustained _____

Investigative results sent to complaint by: _____

Date: _____