OFFICE OF THE EXECUTIVE INSPECTOR GENERAL FOR THE OFFICE OF THE ILLINOIS ATTORNEY GENERAL

COMPLAINT FORM

Please type or print clearly below. Mail completed form to: Office of the Executive Inspector General for the Office of the Illinois Attorney General, 100 West Randolph Street, 12th Floor, Chicago, IL 60601. Alternatively, you may E-mail the form to ethics.OEIG@ilag.gov or fax the form to (312) 814-8444. Our toll-free hotline number is (888) 814-4646.

The Office of the Executive Inspector General for the Illinois Attorney General accepts anonymous complaints; however, please note, the ability to contact you to discuss the complaint may enable us to investigate your complaint more thoroughly.

Contact Information: Name: Date: F Date of Birth: Sex: M Address: Street Address Citv State Zip Code Home Phone: _____ Business Phone: _____ Other Phone: E-mail: Preferred method of contact: Are you an employee of the Office of the Illinois Attorney General? Yes No **Complaint Information:** Is your complaint against an employee or vendor of the Office of the Attorney General? Yes No * If not, where does the individual work? * Please note the Office of the Executive Inspector General for the Office of the Illinois Attorney General is only authorized to investigate complaints relating to employees of the Office of the Illinois Attorney General and vendors or others doing business with the Office of the Illinois Attorney General. If you answered "No" to the above question the Office of the Executive Inspector General for the Office of the Illinois Attorney General cannot investigate your complaint. Please provide as much detailed information as possible about the individual(s) your complaint relates to: Phone: Subject of Complaint's Name: Date of Birth: \square M _____Sex: (or approx. age) Subject of Complaint's Place of Employment: Address: Street Address Citv State Zip Code

Subject of Complaint's Name:				Phone:					
Date of Birth: (or approx. age)	Sex:		M		F				
Subject of Complaint's Place of Employment:									
Address:									
Street Address	City				State		Zip Code		
Have you notified any other Federal, State or local age lawsuit or grievance related to these matters?	ency of y	our co	mplair	nt or filed	d a		Yes		No
If yes, with what agency did you file a complaint?									
What is the complaint number?									
Has your complaint been resolved?							Yes		No
If yes, briefly summarize the results:									
Have you previously filed a complaint with the Office of General for the Illinois Attorney General?	of the Exe	ecutive	e Inspe	ctor			Yes		No
If yes, please list any known case numbers:									
Is this complaint related to your previously filed complaint	aint?						Yes		No
May we refer your complaint to the appropriate agency	y if nece	ssary?					Yes		No
If the Office of the Executive Inspector General refers y the Office of the Attorney General, may we provide the information?							Yes		No
If your complaint is referred to an agency other than the General, do you want your name and contact information			Attorn	ey			Yes		No
Other person(s) who could be a witness to the complain	int you h	ave a	leged:						
Name Any identify	ying informa	tion (DO	B, Agency	/, Title, Tele	ephone I	Numbe	r, E-mail .	Address	etc.)
Namo Any identify	ving informa	tion (DC)	D Acon	, Title Tel	anhene !	Munah -	r E mail	Addras -	oto)

documentation in support of your complaint):

Illinois law provides that the identity of any individual providing information to an Executive Inspector General shall be kept confidential and may not be disclosed without the consent of that individual or when disclosure of the individual's identity is otherwise required by law. 5 ILCS 430/20-90(a).

Illinois law states that any person who intentionally makes to an Executive Inspector General a false report alleging misconduct is guilty of a Class A misdemeanor. 5 ILCS 430/50-5(d).