

## **COMPLAINT FORM**

To:					
	Director of Compliance Clerk of the Circuit Court of Cook County 69 West Washington, Ste. 2500				
				Chicago, Illinois 60602	
				jllin@cookcountycourt.com	
Name	me:				
Addre	dress:				
Phone	one:				
Email	ail:				
Date	te of Violation:				
TP	<i>.</i>				
If cur	currently employed:				
Curre	rrent Position:				
Depar	partment Involved:				
If pre	previously employed:				
Previ	vious Position:				
Date	te of Separation:				
Depai	partment Involved:				
Rega	garding applications for employment:				
Positi	sition Applied For:				
Date	te of Application:				

Date of Interview:

**Facts Supporting Complaint:** (Provide a narrative description of the facts supporting your claim that you have been politically discriminated against in connection with your employment or application for employment with the Clerk of Court. Include as much detail as possible. The following are examples of the kind of detail you should include where applicable: when you applied for a job or promotion, when you were terminated or demoted, when you were disciplined, or given other unfavorable treatment in employment due to politics, the name of any person who asked you to perform work in exchange for favorable treatment at work, the name of any person who threatened to retaliate against you if you did not perform political work, and conversations you had with people about political sponsorship of the successful applicant. If your claim focuses on a promotion or new hire, state whether you were interviewed for the job, the names of the interviewers, and the date of the interview. Please copy and attach additional pages if necessary.)

**Damages You Have Suffered and Relief You Are Seeking:** (Include as much detail as possible about your damages and the amount you believe you are entitled to recover. For example, the following are examples of the sort of damages that might be applicable: lost wages, lost overtime, increased time and expense caused by being reassigned to a new location, etc.)

**Documents that Support Your Claim:** (Identify any documents you believe support your claim of political discrimination and attach copies if the documents are in your possession.)

Have you filed a grievance or lawsuit about any of the events listed in your Complaint in any court, administrative agency or before any other entity? If yes, please explain, including case number, court or agency. Also, state the status or outcome of the claim, grievance, or lawsuit.

I state, under penalty of perjury, that the above information is true and accurate to the best of my knowledge and belief.

Signature

SUBSCRIBED AND SWORN to

before me this \_\_\_\_\_day of \_\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Notary