NORTHLAKE POLICE DEPARTMENT

CITIZEN COMPLIMENT

DATE:_____

CITIZEN'S NAME:_____
(First) (Last) (Middle Initial)

ADDRESS, CITY/ZIP CODE:_____

_____

HOME PHONE:_____ BUSINESS PHONE:_____

LOCATION OF EVENT: _____

DATE OF EVENT:_____ TIME OF EVENT:_____ AM PM

EMPLOYEE(S) TO BE COMPLIMENTED OR COMMMENDED:

NAME:_____ RANK:_____ BADGE:_____

NAME:_____ RANK:_____ BADGE:_____

NAME:_____ RANK:_____ BADGE:_____

EXPLANATION OF EVENT:

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(Continued on Reverse Side)

(Continued from Reverse Side) _____

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Signature of Person Making Compliment

This form may be dropped off or mailed to:
Northlake police Department
55 E. north Ave.
Northlake, IL 60164