



**GILROY POLICE DEPARTMENT
7301 HANNA STREET GILROY CA 95020
408-846-0300**

COMPLIMENT FORM

YOUR CONTACT INFORMATION

Name:			
Home Address:		E-mail:	
Home Phone:	Cell Phone:	Business Phone:	
Preferred Method of Investigator Contact:	Home: <input type="checkbox"/>	Cell: <input type="checkbox"/>	Work: <input type="checkbox"/>

DETAILS ABOUT THE INCIDENT

Date(s) of Incident:	Approximate Time: <input type="checkbox"/> AM <input type="checkbox"/> PM	Case/Incident No:
Location of Incident:		
Involved Employee(s):	Badge Number(s):	
Involved Employee(s):	Badge Number(s):	
Witness:	Contact:	
Witness:	Contact:	

STATEMENT (USE ADDITIONAL PAPER AS NECESSARY)

Name (Print)	Date	Signature
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*****Return form to 7301 Hanna Street, Gilroy, CA 95020 or e-mail to complaintscompliments@cityofgilroy.org*****

FOR OFFICE USE ONLY	
Compliment Received by: _____	Date/Time Received: _____