GRAND HAVEN DEPARTMENT OF PUBLIC SAFETY
Citizen Compliment Form

Name		Telephone
Address		
Officer(s) Name		
Nature of Incident		**AWARDS COMMITTEE** ○ Departmental Citation ○ Certificate of Merit ○ Life Saving Award ○ Police Heart Award ○ Unit Commendation ○ Individual Commendation
Location of Incident		
Date of Incident	Time of Incident	

Please provide detailed information regarding your compliment:

Return completed form to Nichole Hudson, Director of Public Safety
Grand Haven Department of Public Safety | 525 Washington Avenue | Grand Haven | MI | 49417

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