



Everett Police Department Citizen Appreciation Form

| | | | |
|---------------------------|----------------------|------------------------------|----------------------------------|
| Name | | Phone Number | |
| Address | | | |
| Witness Name | | Phone Number | |
| Witness Address | | | |
| Date and Time of Incident | Location of Incident | | Incident or Event No. (If known) |
| Employee Involved | | Additional Employee Involved | |

Describe the incident.

“THANK YOU FOR SUPPORTING YOUR EVERETT POLICE DEPARTMENT”

| | | | | | |
|--------------|--|-----------|-------------------|----------------------|------|
| Signature | | Date | Witness Signature | | Date |
| Accepted By: | | Pers. No. | Date | Route to Alicia Gill | |