

**Town of Lunenburg, Massachusetts
POLICE DEPARTMENT**

INTERIM CHIEF

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COMPLIMENT FORM

Who doesn't like a compliment! We all like to hear when we have done a good job. If you would like to commend an officer or department staff member, please fill out this form. We will be sure to share it with the Officer.

Date of Incident:	Time of Incident:	Date Reported:	Time Reported:
Officer/Staff Name or description if name unknown:			
Location of Incident:			
Name:	Phone #:	Email Address:	

Details of the Incident: Please provide a description of the circumstances:

Signature

Date and Time Signed

Departmental Use Only

Received By: Rank/ Name/ ID Number

Date

Time Received