

LYON COUNTY PUBLIC WORKS CITIZEN COMPLIMENT FORM

Your Information

Name _____

Address _____

Phone (home) _____ (work) _____ (cell) _____

E-mail Address: _____

Details

Please use the space below to provide as much information as possible (i.e. person/event you are complimenting, date occurred). Use a separate sheet or continue on back if needed.

Would you like a response to your compliment? Yes No

Please check the appropriate statement below:

- I grant my permission to discuss my compliment(s) with the involved individual(s), but DO NOT share my name with them.
- I grant my permission to discuss my compliment(s) with the involved individual(s) and to share my name with them.

Signature _____ Date _____

Please return completed form to: Director of Public Works
504 Fairgrounds Road
Marshall, MN 56258

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