



# Lake County Office of Transit Services Compliment Form

We truly appreciate you taking the time out of your busy day to let us know how pleased you are with the transportation services.

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Other Telephone: \_\_\_\_\_

Date of Service: \_\_\_\_\_ Approximate Time: \_\_\_\_\_

Statement: \_\_\_\_\_

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