

**NEIGHBORHOOD POLICING PROGRAM – PROBLEM SOLVING REPORT – FOLLOW UP**  
**CHICAGO POLICE DEPARTMENT**

<b>DCO NAME</b>		<b>DCO NAME</b>	
<b>EVENT ID</b>		<b>DATE</b>	
<b>LOCATION</b>		<b>RD NO. IF APPLICABLE</b>	

<b>ADDITIONAL INFORMATION/FOLLOW UP DETAILS</b>	
<b>RESOURCES USED TO REMEDY ISSUE</b>	<b>RESOURCE CONTACT INFORMATION</b>

<b>APPROVED BY</b> <i>SIGNATURES REQUIRED</i>			
<b>DCO</b>		<b>DATE</b>	
<b>DCO</b>		<b>DATE</b>	
<b>DCO SERGEANT</b>		<b>DATE</b>	
<b>DCO LIEUTENANT</b>		<b>DATE</b>	