

# Carmine Marceno

## Office of the Sheriff



# State of Florida

## County of Lee

### Community Involvement

| Question: To what extent...  | Not at all | A little | Somewhat | A lot | To a great extent | Unknown |
|--|------------|----------|----------|-------|-------------------|---------|
| 1. Do you believe the Lee County Sheriff's Office develops relationships with community members and organizations?   |            |          |          |       |                   |         |
| 2. Do you believe the Lee County Sheriff's Office regularly communicates with community members (e.g., websites, emails or public meetings)?   |            |          |          |       |                   |         |
| 3. Do you believe the Lee County Sheriff's Office works together with community members to solve local problems?   |            |          |          |       |                   |         |
| 4. Do Lee County Sheriff's Office deputies treat people fairly?  |            |          |          |       |                   |         |
| 5. Is the Lee County Sheriff's Office responsive to the concerns of community members?   |            |          |          |       |                   |         |
| 6. Do you trust the Lee County Sheriff's Office?   |            |          |          |       |                   |         |
| 7. Is the Lee County Sheriff's Office effective at proactively preventing crime?   |            |          |          |       |                   |         |
| 8. Is the Lee County Sheriff's Office addressing problems that really concern you?   |            |          |          |       |                   |         |
| 9. Do you feel safe in your community?   |            |          |          |       |                   |         |
| 10. Are you satisfied with the overall performance of the Lee County Sheriff's Office? (If you are not satisfied, why? Please leave a contact number below if you would like to discuss your issue with an agency member.) |            |          |          |       |                   |         |
| 11. Do you have any recommendations or suggestions to improve this agency's operations? (Please use comments section below for responses.)   |            |          |          |       |                   |         |

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## Contact with LCSO

12. Have you had personal contact, for any reason, with a LCSO deputy within the past 2 months? If yes, please explain your role and continue; if no, go to Question 16

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| Question  | Very Satisfied | Satisfied | Very Dissatisfied | Not Applicable |
|---|----------------|-----------|-------------------|----------------|
| 13. Were you satisfied with the deputy's response time?                     |                |           |                   |                |
| 14. Were you satisfied reporting the incident to the Communications Center? |                |           |                   |                |
| 15. Were you satisfied with the outcome of your involvement with LCSO?      |                |           |                   |                |

## Public Safety

16. Please select the three issues you think are the greatest problems within your community.

- |  |   |   |
|--|---|---|
| <input type="radio"/> Animal abuse                             | <input type="radio"/> Domestic violence                                     | <input type="radio"/> Homicide  |
| <input type="radio"/> Burglaries/thefts (auto)                 | <input type="radio"/> Drug dealers/abuse                                    | <input type="radio"/> School safety (e.g., bullying, fighting or weapons) |
| <input type="radio"/> Burglaries/thefts (residential)          | <input type="radio"/> Fraud / identity theft                                | <input type="radio"/> Sexual assault (adult)                              |
| <input type="radio"/> Child sexual predators / Internet safety | <input type="radio"/> Homeless- or transient-related problems (panhandling) | <input type="radio"/> Traffic issues                                      |

## Demographics

How many years have you lived in your community? \_\_\_\_\_ years

Prefer not to answer

What is your Lee County ZIP Code \_\_\_\_\_

Prefer not to answer

What is your gender and age?

Age: \_\_\_\_\_

Male

Female

Prefer not to answer

What is your ethnicity?

African American

Asian

Hispanic

White

Other

Prefer not to answer

**Click box to submit survey**

Office Use only:

Reviewed:

Distributed if needed: