



Information Report

Report Number _____

Report Date _____

Page _____

Staff Involved

To	Title	Unit
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From	Title	Unit
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Subject

Employee Name (Last, First M.I.)	Title	Badge Number
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Employee Name (Last, First M.I.)	Title	Badge Number
----------------------------------	-------	--------------

Intel

Intelligence Category 1	Intelligence Category 2
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Source Type	Source's Last Name	Source's ADC Number
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Inmates Involved

Inmate Name (Last, First M.I.)	ADC Number	Unit	HU/BED	Involved As:
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Inmate Name (Last, First M.I.)	ADC Number	Unit	HU/BED	Involved As:
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Time	Date	Location
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Summary

Summary

Action Taken

Employee's Signature	Title
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Comments/Action Taken

Employee's Signature	Title
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Distribution (Check all that apply)

- _____
- _____
- _____

Entered into Database

By _____

Date _____

Information Report Supplemental Sheet

Report Number _____

Report Date _____

Page _____

To	Date
Comments/Action Taken	
Employee's Signature	Job Title

To	Date
Comments/Action Taken	
Employee's Signature	Job Title

To	Date
Comments/Action Taken	
Employee's Signature	Job Title

To	Date
Comments/Action Taken	
Employee's Signature	Job Title

Distribution *(Same as first page)*