

MONTHLY SUMMARY OF WEAPONS AND CONTRABAND

Month: \_\_\_\_\_

Date: \_\_\_\_\_

TO: Corrections Division Director

From: \_\_\_\_\_

Field Operations Manager

The following information summarizes the weapons and contraband items found in the facilities/centers located throughout my region or area. Individual facility reports are attached.

<u>Facility/Center</u>	<u># Weapons</u>	<u># Contraband</u>	<u># Disc. Reports</u>	<u># Warrants</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>TOTALS</b>	_____	_____	_____	_____

RETENTION SCHEDULE:

This report, upon completion will be kept on file for one year and then destroyed.