Shift Commander Summary Report

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| **Officer Assignments:** | | | | **Shift Date:** | | | | **Shift Code:** | |
| ***Name*** | | ***Patrol Assignment*** | | ***Building Checks*** | | ***Vehicle*** | | ***Other Duties/Assignments*** | |
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| **Attendance – List all personnel out sick, on leave, in training, etc. (Include dispatchers and security division personnel)** | | | | | | | | | |
| ***Name*** | | ***Type of Leave*** | | | | | | | ***Shift Covered By:*** |
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| **Directed patrol activities – List watcher orders and other targeted activities to promote safety and crime reduction** | | | | | | | | | |
| ***Location*** | ***Activity*** | | | | | | | | |
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| **Cases/Arrests – List all reported crimes, arrests and other noteworthy cases reported during the shift** | | | | | | | | | |
| ***Offense/Incident*** | | | ***Case #*** | | ***Location*** | | ***Times of Occurrence/Remarks/Case Status*** | | |
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| **Remarks – Include new BOLO’s, Watch Orders, Intelligence Info, Hazards to Officer Safety and/or Public Welfare**  **(attach copies if applicable)** | | | | | | | | | |

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| Report completed by: | (print name) | Signature/ID **#** |
| Received by relief: | (print name) | Signature/ID |
| Date/Time Received: |

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| **UCR Crime? YES**  **NO**  **If yes, Form 1 – 101A MUST BE COMPLETED** |

Original and attachments to relieving shift commander, who will sign and make a copy. Original to Patrol Lieutenant, copy for squad room.