

QTRG EQ **** OCTG EQ ****

COUNT AREA	CENSUS	O U T C O U N T S E C T I O N											VERIFY COUNT	COUNT AREA	
		A	F	F	F	F	H	M	R	S	TR	V			OC
B-A	26	.	.	.	.	.	.	.	.	.	.	.	.	26	26 B-A
C-A	10	.	.	.	.	.	.	.	.	.	.	.	.	10	10 C-A
E-N	83	.	.	.	.	2	.	.	.	.	.	2	.	81	81 E-N
E-S	79	.	.	.	.	.	.	.	.	.	.	.	.	79	79 E-S
G-N	78	.	.	.	.	.	.	.	.	.	.	.	.	78	78 G-N
G-S	86	.	.	.	.	.	.	.	.	.	.	.	.	86	86 G-S
H-A	4	.	.	.	.	.	.	.	.	.	.	.	.	4	4 H-A
I-N	86	.	.	.	.	.	.	.	.	.	.	.	.	86	86 I-N
K-N	89	.	.	.	.	.	.	.	.	.	.	.	.	89	89 K-N
K-S	137	.	.	.	10	2	.	.	.	.	.	12	.	125	125 K-S
R-A	1	.	.	.	.	.	.	.	.	.	.	.	.	1	1 R-A
Z-A	71	.	.	.	.	.	.	.	.	.	.	.	.	71	71 Z-A
Z-B	5	.	.	.	.	.	.	.	.	.	.	.	.	5	5 Z-B
TOTAL	755	.	.	.	10	4	.	.	.	.	.	14	.		741

COUNT
VERIFY

OFFICIAL PREPARING COUNT: *[Signature]*
OFFICIAL TAKING COUNT: *[Signature]*
COUNT CLEARED TIME: *1124A*

GV 1122A

CATEGORY: OCT GROUP CODE:
ASSIGNMENT: FS FACILITY: NYM
OPER CATG ASSIGNMENT OPER CATG ASSIGNMENT OPER CATG ASSIGNMENT

NUM	ASSIGNMENT	REG NO	NAME	OCT DATE	QTR	WRK
0001	FS	61876-054	JOHNSON	08-10-2019	K11-053U	FS AM
0002		79196-054	KOURANI	08-10-2019	K07-008L	FS AM
0003		85771-054	MILLER	08-10-2019	K11-054L	FS AM
						SUICIDE OR
0004		86074-054	OCHOA	08-10-2019	K08-020L	FS AM
0005		76149-054	PRICE	08-10-2019	K08-014L	FS AM
0006		06303-082	RIVERA	08-10-2019	K11-055U	FS AM
0007		79752-054	RIVERO	08-10-2019	K08-019U	FS AM
0008		85571-054	SALEH	08-10-2019	K08-020U	FS AM
0009		01735-007	SATTAN	08-10-2019	K07-001L	FS AM
0010		11714-052	TABOADA	08-10-2019	K11-052L	FS AM

REG NO	NAME	UNIT	REG NO	NAME	UNIT
0001	JOHNSON	5A			
0002	KOURANI	5A			
0003	MILLER	5A			
0004	OCHOA	5A			
0005	PRICE	5A			
0006	RIVERA	5A			
0007	RIVERO	5A			
0008	SALEH	5A			
0009	SATTAN	5A			
0010	TABOADA	5A			

DEBIT CREDIT BY UNIT
BA CA DA EA FA GA HA IA JA KA LA MA NA OA PA QA RA SA TA UA VA WA XA YA ZA

G0000 TRANSACTION SUCCESSFULLY COMPLETED

**METROPOLITAN CORRECTIONAL CENTER
NEW YORK, NY**

OFFICIAL OUT COUNT

DATE: August 10 2019 COUNT TIME: 10 AM

FROM: R Chimning LOCATION: Hosp
(Staff Member Preparing Out Count)

APPROVED: [Signature]
(Operations Lieutenant)

REG #	NAME	UNIT	REG #	NAME	UNIT
1. 86409054	Bullock	5N	13.		
2. 86900054	walker	5N	14.		
3. 85369054	woolaston	11S	15.		
4. 48816064	santana	11S	16.		
5.			17.		
6.			18.		
7.			19.		
8.			20.		
9.			21.		
10.			22.		
11.			23.		
12.			24.		

OUT-COUNT BY UNIT

B-A _____ C-A _____ E-N 2 E-S _____ G-N _____ G-S _____ H-A _____
 I-N _____ K-N _____ K-S 2 R-A _____ Z-A _____ Z-B _____

Total Out-Counted: 4

This form must be submitted to the Counts and Assignments Officer **FORTY-FIVE MINUTES PRIOR** to the affected count. Prepare this form in ink. Group the inmates according to their respective housing units. This form is to be used only as an Out-Count. No other form will be accepted in lieu of the Out-Count Form.

NYMCO 530*05 *
PAGE 001 OF 001

INMATE ROSTER

* 08-10-2019
10:20:06

CATEGORY: OCT
ASSIGNMENT: HOSP

GROUP CODE:
FACILITY: NYM

OPER CATG ASSIGNMENT OPER CATG ASSIGNMENT OPER CATG ASSIGNMENT

NUM	ASSIGNMENT	REG NO	NAME	OCT DATE	QTR	WRK
0001	HOSP	86409-054	BULLOCK	08-10-2019	E05-535L	SUICIDE OR UNASSG
0002		48816-066	SANTANA	08-10-2019	K09-028U	SUICIDE OR
0003		86900-054	WALKER	08-10-2019	E06-546L	SUICIDE OR UNASSG
0004		85369-054	WOOLASTON	08-10-2019	K11-053L	FS WAREHOU SUICIDE OR

G0000

TRANSACTION SUCCESSFULLY COMPLETED

Metropolitan Correctional Center
Official Count Slip

Unit: I-N Date: 08/10/19
Count: 87 Time: 1004
Print Name: MEDINA
Signature: [Signature]
Print Name: CHIMMING
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: FS Date: 8/10/19
Count: 10 Time: 10:00 am
Print Name: B. Boney
Signature: B. Boney
Print Name: m. Charles
Signature: m. Charles

Metropolitan Correctional Center
Official Count Slip

Unit: ES Date: 08/10/19
Count: 79 Time: 10AM
Print Name: A. Roberts
Signature: [Signature]
Print Name: R. Channing
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: G-N Date: 08-10-19
Count: 78 Time: 10:00 A.M
Print Name: T. Joint
Signature: [Signature]
Print Name: B. Boney
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: KS Date: 8/10/19
Count: 125 Time: 10 AM
Print Name: E. Straker
Signature: [Signature]
Print Name: J. Hodge
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: K-N Date: 8/10/19
Count: 89 Time: 10:00 AM
Print Name: P. JOYNER
Signature: [Signature]
Print Name: J. Hodge
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: EN Date: 8/10/2019
Count: 81 Time: 10:00am
Print Name: M. Arafat
Signature: [Signature]
Print Name: R. Channing
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: GS Date: 8-10-19
Count: 86 Time: 10:00
Print Name: B. Boney
Signature: [Signature]
Print Name: T. Joint
Signature: [Signature]

Metropolitan Correctional Center
New York, New York
Official Count Slip

Unit: R.A Date: 8-10-19

Count: 1 Time: 10:00 AM

1. Print Name: J. Hodge
1. Signature: [Signature]
2. Print Name: [Signature]
2. Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: BA Date: 8-10-19

Count: 26 Time: 10:00 am

Print Name: F. Olivares
Signature: [Signature]
Print Name: R. Chimmy
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: ZB Date: 8-10-19

Count: 5 Time: 10:00 AM

Print Name: Echard
Signature: [Signature]
Print Name: [Signature]
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: ZA Date: 8/10/19

Count: 71 Time: 10:00 AM

Print Name: [Signature]
Signature: [Signature]
Print Name: [Signature]
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: CA Date: 8/10/19

Count: 10 Time: 10:00 AM

Print Name: [Signature]
Signature: [Signature]
Print Name: [Signature]
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: HA Date: 8-10-19

Count: 4 Time: 10:00 am

Print Name: F. Olivares
Signature: [Signature]
Print Name: [Signature]
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: IN Date: 08/10/19

Count: 86 Time: 10:00

Print Name: MEDINA
Signature: [Signature]
Print Name: [Signature]
Signature: [Signature]

Metropolitan Correctional Center
Official Count Slip

Unit: HOSP Date: 8-10-19

Count: 4 Time: 10:00 am

Print Name: F. Olivares
Signature: [Signature]
Print Name: [Signature]
Signature: [Signature]