

COUNT AREA	CENSUS	OUTCOUNT SECTION												VERIFY COUNT AREA					
		A	F	F	F	F	H	M	S	R	A	S	T		R	V	O	C	
		T	N	N	Y	Y	S	O	S	D	E	A	N	W	S	I	T	N	TU
		Y	J	Y	Y	S	P	S	D	I	N	D	I	V	I	I	T	T	F
B-A	26	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
C-A	10	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
E-N	83	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
E-S	79	.	.	.	.	.	1	.	.	.	.	.	.	.	.	.	.	1	.
G-N	78	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
G-S	88	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
H-A	4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
I-N	86	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
K-N	89	.	.	.	.	.	1	.	.	.	.	.	.	.	.	.	.	1	.
K-S	137	.	.	.	.	.	2	.	.	.	.	.	.	.	.	.	.	2	.
R-A	0	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
2-A	73	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
2-B	5	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
TOTAL	758	.	.	.	.	.	4	.	.	.	.	.	.	.	.	.	.	4	.
COUNT VERIFY																			

OFFICIAL PREPARING COUNT: XXXXXXXXXX
 OFFICIAL TAKING COUNT: XXXXXXXXXX
 COUNT CLEARED TIME: 10:36 pm

9/1/10 3:30 PM

9/23/21

METROPOLITAN CORRECTIONAL CENTER
NEW YORK, NY

OFFICIAL OUT COUNT

DATE: 08-09-19 COUNT TIME: 1000 pm

FROM: Thomas (Staff Member Preparing Out Count) LOCATION: Hosp

APPROVED: [Signature] (Operations Lieutenant)

REG #	NAME	UNIT	REG #	NAME	UNIT
1.	89673-053	Mersey KS	13.		
2.	91349-033	Noboa KS	14.		
3.	85377-054	Weber KS	15.		
4.	86772-054	Montas KN	16.		
5.			17.		
6.			18.		
7.			19.		
8.			20.		
9.			21.		
10.			22.		
11.			23.		
12.			24.		

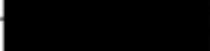
OUT-COUNT BY UNIT

B-A	C-A	E-N	E-S	G-N	G-S	H-A
I-N	K-N	K-S	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.

Metropolitan Correctional Center
Official Count Slip

Unit: ~~TN~~ Date: ~~8/9/2019~~
Count: ~~86~~ Time: ~~10:00pm~~
Print Name: 
Signature: 
Print Name: 
Signature: 

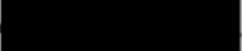
Metropolitan Correctional Center
New York, New York
Official Count Slip

95 + 1
Unit: ~~hED~~ Date: ~~8/9/2019~~
Count: ~~1~~ Time: ~~10:00pm~~
1. Print Name: 
1. Signature: 
2. Print Name: _____
2. Signature: _____

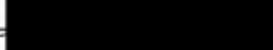
Metropolitan Correctional Center
Official Count Slip

Unit: ~~ZA~~ Date: ~~8-9-19~~
Count: ~~43 + 1~~ Time: ~~10:00pm~~
Print Name: 
Signature: 
Print Name: ~~James~~
Signature: ~~[Signature]~~

Metropolitan Correctional Center
Official Count Slip

Unit: ~~GN~~ Date: ~~8-9-19~~
Count: ~~78~~ Time: ~~10:00pm~~
Print Name: 
Signature: 
Print Name: _____
Signature: _____

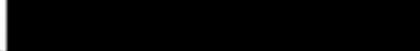
Metropolitan Correctional Center
Official Count Slip

Unit: ~~CS~~ Date: ~~8/9/19~~
Count: ~~23~~ Time: ~~10:00pm~~
Print Name: 
Signature: 
Print Name: _____
Signature: _____

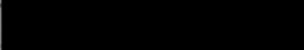
Metropolitan Correctional Center
New York, New York
Official Count Slip

Unit: ~~ZB~~ Date: ~~8-9-19~~
Count: ~~5~~ Time: ~~10:00pm~~
1. Print Name: 
1. Signature: 
2. Print Name: ~~James~~
2. Signature: ~~[Signature]~~

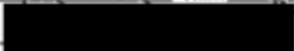
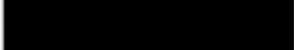
Metropolitan Correctional Center
Official Count Slip

Unit: ~~KN~~ Date: ~~8-9-19~~
Count: ~~88~~ Time: ~~10pm~~
Print Name: 
Signature: 
Print Name: _____
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: ~~ES~~ Date: ~~08-09-19~~
Count: ~~73~~ Time: ~~1000 pm~~
Print Name: ~~Thomas~~
Signature: 
Print Name: 
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: ~~EA~~ Date: ~~08-09-19~~
Count: ~~92~~ Time: ~~10pm~~
Print Name: 
Signature: 
Print Name: _____
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: BA Date: 8/9/19
Count: 26 Time: 10:00 PM
Print Name: _____
Signature: _____
Print Name: _____
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: HA Date: 8/9/19
Count: 6 Time: 10:00 PM
Print Name: _____
Signature: _____
Print Name: _____
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: HOSP Date: 8/9/19
Count: 4 Time: 10:00 PM
Print Name: _____
Signature: _____
Print Name: _____
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: HS Date: 8/9/19
Count: 125 Time: 10:00 PM
Print Name: _____
Signature: _____
Print Name: _____
Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: CA Date: 8/9/19
Count: 10 Time: 10:00 PM
Print Name: _____
Signature: _____
Print Name: _____
Signature: _____