

TN U:22.21

NYMFC 530.03 *
PAGE 001

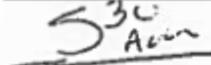
BUREAU OF PRISONS COUNT SHEET
NEW YORK MCC

* 08-10-2019
* 01:20:48

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

COUNT AREA	CENSUS	OUTCOUNT SECTION										OC	TU	VERIFY COUNT	COUNT AREA		
		A	F	F	F	F	H	M	R	S	TR					V	
		T	N	N	N	S	O	S	&	A	N	I	N				
		Y	J	Y	Y	S	P		D	N	W	S	I				
									V	T							
B-A	26	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	26 B-A
C-A	10	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	10 C-A
E-N	83	.	.	.	.	.	2	.	.	.	.	.	.	2	.	X	81 E-N
E-S	79	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	79 E-S
G-N	78	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	78 G-N
G-S	88	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	88 G-S
H-A	4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	4 H-A
I-N	86	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	86 I-N
K-N	89	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	89 K-N
K-S	137	.	.	.	.	.	2	.	.	.	.	.	.	2	.	X	135 K-S
R-A	1	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	1 R-A
Z-A	72	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	72 Z-A
Z-B	5	.	.	.	.	.	.	.	.	.	.	.	.	.	.	X	5 Z-B
TOTAL	758	.	.	.	.	.	4	.	.	.	.	.	.	4	.		754

COUNT VERIFY

OFFICIAL PREPARING COUNT: 
OFFICIAL TAKING COUNT: 
COUNT CLEARED TIME:

5:30
Amm

g/r 5:24
Amm

METROPOLITAN CORRECTIONAL CENTER
NEW YORK, NY

OFFICIAL OUT COUNT

DATE: 08/10/2019

COUNT TIME: 0500 Am

FROM:  (Reporting Out Count)

LOCATION: Hosp

APPROVED:  (Operations Lieutenant)

REG #	NAME	UNIT	REG #	NAME	UNIT
1.	85364-054	Woolston KS	13.		
2.	48816-066	SANTANA KS	14.		
3.	86900-054	WALKER SN	15.		
4.	86409-054	BULLOCK SN	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.

Metropolitan Correctional Center
Official Count Slip

Unit: ZA Date: 8-10-2019

Count: 72 Time: 5:00 am

Print Name: _____

Signature: _____

Print Name: _____

Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: BA Date: 8-10-19

Count: 26 Time: 5:00 AM

Print Name: _____

Signature: _____

Print Name: _____

Signature: _____

**Metropolitan Correctional Center
Official Count Slip**

Unit: CA Date: 8/10/19

Count: 10 Time: 5⁰⁰

Print Name: _____

Signature: _____

Print Name: _____

Signature: _____

**Metropolitan Correctional Center
Official Count Slip**

Unit: HOSP Date: 8/10/19

Count: 4 Time: 5:00am

Print Name: _____

Signature: _____

Print Name: _____

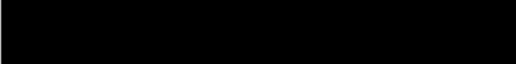
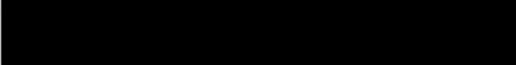
Signature: _____

Metropolitan Correctional Center Official Count Slip	
Unit: <u>EN</u>	Date: <u>08-10-2019</u>
Count: <u>81</u>	Time: <u>5:00AM</u>
Print Name	_____
Signature:	_____
Print Name	_____
Signature	_____

Metropolitan Correctional Center Official Count Slip	
Unit: <u>ES</u>	Date: <u>8/10/19</u>
Count: <u>79</u>	Time: <u>5⁰⁰AM</u>
Print Name	_____
Signature:	_____
Print Name	_____
Signature	_____

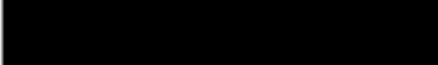
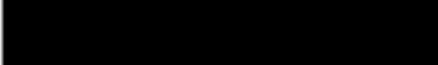
Metropolitan Correctional Center
Official Count Slip

Unit: GN Date: 8/10/19
Count: 78 Time: 5:00am

Print Name: 
Signature: 
Print Name: 
Signature: 

Metropolitan Correctional Center
Official Count Slip

Unit: G-5 Date: 08/10/19
Count: 88 Time: 0500

Print Name: 
Signature: 
Print Name: 
Signature: 

Metropolitan Correctional Center
Official Count Slip

Unit: HA Date: 8-10-19

Count: 4 Time: 5:00AM

Print Name: _____

Signature: _____

Print Name: _____

Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: IN Date: 8/10/19

Count: 26 Time: 5⁰⁰AM

Print Name: _____

Signature: _____

Print Name: _____

Signature: _____

Metropolitan Correctional Center
Official Count Slip

Unit: KN Date 8/10/19
Count: 89 Time: 500AM
Print Name _____
Signature: _____
Print Name _____
Signature _____

Metropolitan Correctional Center
Official Count Slip

Unit: KS Date 8/10/2019
Count: 135 Time: 0500AM
Print Name _____
Signature: _____
Print Name _____
Signature _____

**Metropolitan Correctional Center
New York, New York
Official Count Slip**

Unit: RA Date: 8/10/18
Count: 1 Time: 5:00 AM

1. Print Name: _____
1. Signature: _____
1. Print Name: _____
1. Signature: _____

**Metropolitan Correctional Center
Official Count Slip**

Unit: 2-B Date: 8-10-2019
Count: 5 Time: 5:00 AM

Print Name: _____
Signature: _____
Print Name: _____
Signature: _____