

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

| COUNT<br>AREA | CENSUS | O U T C O U N T S E C T I O N |             |             |             |        |                  |        |             |                  |                  |                       | VERIFY<br>COUNT | COUNT<br>AREA |                          |         |
|---------------|--------|-------------------------------|-------------|-------------|-------------|--------|------------------|--------|-------------|------------------|------------------|-----------------------|-----------------|---------------|--------------------------|---------|
|               |        | A<br>T<br>T<br>Y              | F<br>N<br>J | F<br>N<br>Y | F<br>N<br>Y | F<br>S | H<br>O<br>S<br>P | M<br>S | R<br>&<br>D | S<br>A<br>N<br>D | T<br>R<br>N<br>W | V<br>I<br>S<br>I<br>T |                 |               | OC<br>UO<br>TU<br>N<br>T |         |
| B-A           | 26     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 26 B-A  |
| C-A           | 10     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 10 C-A  |
| E-N           | 87     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 87 E-N  |
| E-S           | 81     | .                             | .           | .           | .           | .      | 1                | .      | .           | .                | .                | .                     | 1               | .             | <del>1</del>             | 80 E-S  |
| G-N           | 79     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 79 G-N  |
| G-S           | 80     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 80 G-S  |
| H-A           | 4      | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 4 H-A   |
| I-N           | 87     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 87 I-N  |
| K-N           | 88     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 88 K-N  |
| K-S           | 138    | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 138 K-S |
| R-A           | 0      | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 0 R-A   |
| Z-A           | 78     | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 78 Z-A  |
| Z-B           | 5      | .                             | .           | .           | .           | .      | .                | .      | .           | .                | .                | .                     | .               | .             | <del>1</del>             | 5 Z-B   |
| TOTAL         | 763    | .                             | .           | .           | .           | .      | 1                | .      | .           | .                | .                | .                     | 1               | .             |                          | 762     |

COUNT  
VERIFY

OFFICIAL PREPARING COUNT:   
 OFFICIAL TAKING COUNT:   
 COUNT CLEARED TIME: 12:40 am

Good Verbal 12:40 am

METROPOLITAN CORRECTIONAL CENTER  
NEW YORK, NY

OFFICIAL OUT COUNT

DATE: 8/8/19

COUNT TIME: 12:01 Am

FROM: 

LOCATION: HOSP

APPROVED: 

(Operations Lieutenant)

| REG #        | NAME   | UNIT | REG # | NAME | UNIT |
|--------------|--------|------|-------|------|------|
| 1. 85621-054 | Torres | 55   | 13.   |      |      |
| 2.           |        |      | 14.   |      |      |
| 3.           |        |      | 15.   |      |      |
| 4.           |        |      | 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 1 G-N \_\_\_\_\_ G-S \_\_\_\_\_ H-A \_\_\_\_\_  
I-N \_\_\_\_\_ K-N \_\_\_\_\_ K-S \_\_\_\_\_ R-A \_\_\_\_\_ Z-A \_\_\_\_\_ Z-B \_\_\_\_\_

Total Out-Counted: (1) One

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: ~~CA~~ Date: ~~8/8/19~~  
Count: ~~10~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~BA~~ Date: ~~8/8/19~~  
Count: ~~26~~ Time: ~~12:01~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~1105P~~ Date: ~~8/8/19~~  
Count: ~~1~~ Time: ~~12:01~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~GA~~ Date: ~~8/8/19~~  
Count: ~~79~~ Time: ~~0000~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~ES~~ Date: ~~8/8/19~~  
Count: ~~80~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~EV~~ Date: ~~08-08-19~~  
Count: ~~82~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~IN~~ Date: ~~8/8/19~~  
Count: ~~87~~ Time: ~~12:01~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~HA~~ Date: ~~8/8/19~~  
Count: ~~4~~ Time: ~~12:01~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: ~~GS~~ Date: ~~8/8/19~~  
Count: ~~80~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center  
Official Count Slip

Unit: KS Date: 8/8/19  
Count: 138 Time: 12:01 AM  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

Metropolitan Correctional Center  
Official Count Slip

Unit: KN Date: 8/8/19  
Count: 88 Time: 12:01 AM  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

Metropolitan Correctional Center  
Official Count Slip

Unit: ZB Date: 8/8/19  
Count: 5 Time: 12:01 AM  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

Metropolitan Correctional Center  
Official Count Slip

Unit: ZA Date: 8/8/19  
Count: 78 Time: 12:01 AM  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Signature: \_\_\_\_\_