Monthly Report

Each officer assigned to the Patrol Division will complete this form, sign, and turn in to their supervisor no later than 0600 hrs. on the 2nd day of the month immediately following the month reported. In the event that more than one officer responds to any given call, only the lead officer of that call will report that call on this form, the other officer(s) will list that call as an "Officer Assist", located in the bottom/left section of the report.

Officer (print): Kevin Davis **Month:** Jan **Year:** 2024 **Squad:**___ **Unit #:**____

Beginning Mileage:_____ **Ending Mileage:**_____ **Total Miles:**_____

Type of Call for Service	Monthly Tally Record	Total
10-39 Trespassing	I	
10-40 Fight		
10-50 Vehicle Collision		
10-55 Impaired Driver		
10-56 Impaired Pedestrian		
10-58 Traffic Direction		
10-59 Escort		
10-60P Suspicious Person		
10-60V Suspicious Vehicle		
10-61 Traffic Stop		
10-65 Armed Robbery		
10-72 Person In-Custody		
10-73 Mental Subject		
10-76 Prowler		
10-78 Civil Disturbance	III	
10-79 Domestic Dispute		
10-81 Subject with a Weapon		
10-82 Motorist Assist		
10-87 Security Check	~~IIII~~ ~~IIII~~ I	

Type of Call for Service	Monthly Tally Record	Total
Code 9 Alarm		
Code 10 Dead Body		
Code 11 Shooting		
Code 12 Alcohol Traffic	II	
Code 13 Narcotics Traffic		
Code 15 Larceny		
Code 16 Sexual Assault		
Code 19 Bomb Threat		
Code 22 B & E In Progress		
Code 25 Assault		
Code 26 B & E Not In Progress		
Code 35 Assist EMS	II	
Code 38 Property Damage		
Code 44 Overdose		
Code 70 Suicide		
Assist other Dept	III	
Assist Fire Dept.		

	Monthly Tally Record	Total			Monthly Tally Record	Total
Investigations Completed				WFA/OFA/CS Served		
Investigation Closed/Cleared				Subpoenas Served	I	
Officer Assists				Missing Persons		
Citizen Assists	III			Found Property		
Citations Issued				Welfare Checks	I	
Written Warnings Issued				911 Hang Up Calls		
Exparte's Served						

The information listed above is true and accurate to the best of my knowledge.

_____ _____

Officer's Signature **Date**

Revised: 03/01/2005 (All Previous Reports Are Invalid)