

7-17-21

NYMFC 530.03 *
PAGE 001 *

BUREAU OF PRISONS COUNT SHEET
NEW YORK MCC
QTRG EQ **** OCTG EQ ****

* 08-10-2019
* 00:35:17

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	T	V			OC
		T	N	N	N	S	O	S	&	A	N	I	UO		
		T	J	Y	Y		S		D	N	W	S	TU		
		Y		E	S		P		I	D	I	N			
									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	.	.	.	.	.	1	.	.	.	.	.	1	X	78 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	.	.	.	.	.	1	.	.	.	.	.	1	X	136 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: 12:49 PM

Good verbal 3/23/20

**METROPOLITAN CORRECTIONAL CENTER
NEW YORK, NY**

OFFICIAL OUT COUNT

DATE: 08-10-19

COUNT TIME: 12⁰¹AM

FROM: [REDACTED]
(Staff Member Preparing Out Count)

LOCATION: HOSP

APPROVED: [REDACTED]
(Operations Lieutenant)

REG #	NAME	UNIT	REG #	NAME	UNIT
1.	[REDACTED]	ES	13.		
2.	[REDACTED]	EN	14.		
3.	[REDACTED]	EN	15.		
4.	[REDACTED]	KS	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 1 G-N _____ G-S _____ H-A _____
I-N _____ K-N _____ K-S 1 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: ~~KN~~ Date: ~~8/10/19~~
Count: ~~69~~ Time: ~~12:01 PM~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~KS~~ Date: ~~8/10/2019~~
Count: ~~136~~ Time: ~~12:01 PM~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~JA~~ Date: ~~8/10/2019~~
Count: ~~86~~ Time: ~~12:01 PM~~

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

Metropolitan Correctional Center
Official Count Slip

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

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~GS~~ Date: ~~8/10/19~~
Count: ~~88~~ Time: ~~00:00~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~GN~~ Date: ~~8/10/19~~
Count: ~~79~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~HWR~~ Date: ~~8/10/19~~
Count: ~~4~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~KS~~ Date: ~~8/10/19~~
Count: ~~81~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: ~~KS~~ Date: ~~8/10/19~~
Count: ~~78~~ Time: ~~12:01 AM~~

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

Metropolitan Correctional Center
Official Count Slip

Unit: HA Date: 8/10/19
Count: 4 Time: 12:1 AM

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

Metropolitan Correctional Center
New York, New York
Official Count Slip

Unit: BA Date: 8/10/19
Count: 1 Time: 12:01 AM

1. Print Name: [REDACTED]
1. Signature: [REDACTED]
2. Print Name: [REDACTED]
2. Signature: [REDACTED]

Metropolitan Correctional Center
Official Count Slip

Unit: ZA Date: 8/10/19
Count: 73 Time: 12:37 AM

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

Metropolitan Correctional Center
New York, New York
Official Count Slip

Unit: ZB Date: 8/10/19
Count: 5 Time: 12:01 AM

1. Print Name: [REDACTED]
1. Signature: [REDACTED]
2. Print Name: [REDACTED]
2. Signature: [REDACTED]

Metropolitan Correctional Center
Official Count Slip

Unit: BA Date: 8/10/19
Count: 26 Time: 12:01 AM

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