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Daily Activity Report (Patrol)

Client Name & Address _____

_____

_____

_____

Day of Week: _____ **Month:** _____ **Day:** _____ **Year:** _____

Time of Report (Shift) _____

Officer(s) Assigned (Full Name) _____

This Paper Work Has a Required Relieving Manager's Signature

Manager (Print) _____ **Manager's Signature** _____

Activity