

WATCH INCIDENT LOG

BUREAU OF PATROL/CHICAGO POLICE DEPARTMENT

DISTRIBUTION: ORIGINAL - DISTRICT COMMANDER

ON DUTY STATION SUPERVISOR	STAR NO.	DISTRICT	WATCH	DAY	MONTH	YEAR
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INSTRUCTIONS: RECORD IMPORTANT INCIDENTS CONSECUTIVELY. SIGN AFTER LAST ENTRY.

<p>A. Police Off. injured, deceased, killed <input type="checkbox"/></p> <p>B. Shots Fired at or by the Police <input type="checkbox"/></p> <p>C. TRR / Resisting Arrest Incident <input type="checkbox"/></p> <p>D. Taser / O.C. Discharge <input type="checkbox"/></p> <p>E. Vehicle Pursuits <input type="checkbox"/></p> <p>F. Complaint Log Number obtained <input type="checkbox"/></p> <p>G. Tactical Team Detailed Out of District <input type="checkbox"/></p> <p>H. Inter-District Police Activities <input type="checkbox"/></p>	<p>N. Unusual Occurrences in Lockup <input type="checkbox"/></p> <p>O. Strip Searches Authorized <input type="checkbox"/></p> <p>P. Livescan (Tenprint) Non-operational <input type="checkbox"/></p> <p>Q. Mugshot system Non-operational <input type="checkbox"/></p>
<p>I. Major / Noteworthy Incidents <input type="checkbox"/></p> <p>J. Incidents involving City Employees <input type="checkbox"/></p> <p>K. Incidents involving Prominent Citizens <input type="checkbox"/></p> <p>L. Demonstrations / Strikes <input type="checkbox"/></p> <p>M. High Risk Missing Person <input type="checkbox"/></p>	<p>R. Radios Issued to Other Units <input type="checkbox"/></p> <p>S. Carbine Issued <input type="checkbox"/></p> <p>T. PCAD System Non-operational <input type="checkbox"/></p> <p>U. Facility Equipment Non-operational <input type="checkbox"/></p>
	<p>V. Other Miscellaneous Incidents <input type="checkbox"/></p> <p>W. Law Enforcement Related Deaths <input type="checkbox"/></p>

TIMES OF DISTRICT FACILITY INSPECTION	TIMES OF LOCKUP INSPECTION	BEATS / UNITS SENT TO TRAINING / OUT OF DISTRICT
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VIDEO INFORMATION BOX

IN-CAR VIDEO SYSTEMS				BODY WORN CAMERAS			
Number of Vehicles Deployed with ICVS _____				Number of Body Worn Cameras assigned _____			
Number of Vehicles Deployed with Non-Operational ICVS _____				Number of Non-Functioning Body Worn Cameras _____			
VEHICLE	HELP DESK TICKET NO.	VEHICLE	HELP DESK TICKET NO.	BWC	HELP DESK TICKET NO.	BWC	HELP DESK TICKET NO.

UNIQUE OR EXCEPTIONAL DIRECTED MISSION, LOCATION AND UNITS ASSIGNED.

NARRATIVE (Explain any of the items checked above. If a computer generated report was completed then only a brief notation is needed.)

CONTINUED ON REVERSE

WATCH INCIDENT LOG *continued*

ON DUTY STATION SUPERVISOR	STAR NO.	DISTRICT	WATCH	DAY	MONTH	YEAR
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