ESCAPE CHECKLIST

INMATE NAME		ODOC NUMBER	ALIAS(S)	
CHECK THE BELOW LISTED ITE	MS FOR POSSIBLE	LEADS TO INMATE'S L	OCATION:	
VISITING CARD FIELD CLASSIFICATION FILE PASS REQUESTS (CCC) ROOMMATES/FRIENDS QUESTIONED OTHER: CONTACT LOCAL JAILS		TELEPHONE LOG (CCC) TELEPHONE CARD (INSTITUION) SEARCH OF BELONGINGS/LIVING AREA EMPLOYER NOTIFIED/QUESTIONED (CCC) CONTACT FORMER ODOC FACILITY FOR ANY AVAILABLE INFORMATION CONTACT LOCAL HOSPITALS		
CONTACT THE BELOW LISTED PE LOCATION AND ASK THEM TO CO SIGHTED.				
NAME/RELATIONSHIP TO ESCAPEE	ADDRESS	PHONE	DATE/TIME/STAFF	
			INT IF LEADS DEVELOP	
PROVIDE THE BELOW LISTED IN COPY OF ESCAPE CHECKLI COPY OF ESCAPEE'S CONS	ST	PICTURE	OF ESCAPEE	
COPY OF ESCAPE CHECKLI COPY OF ESCAPEE'S CONS	ST SOLIDATED RECORE	PICTURE D CARD	OF ESCAPEE	
	ST SOLIDATED RECORE	PICTURE D CARD	OF ESCAPEE	
COPY OF ESCAPE CHECKLI COPY OF ESCAPEE'S CONS WRITE INCIDENT/MISCONDUCT	ST SOLIDATED RECORD REPORT AND PLAC	PICTURE D CARD CE IT WITH THE ESCAP DATE	OF ESCAPEE PE CHECKLIST TIME	

	FBI NUMBER	SOCIAL SECUR	_SOCIAL SECURITY NUMBER	
RACEGENDER	DOBHEIGHT	WEIGHT	HAIR	EYES
SCARS, MARKS, OR TA	ATTOOS			
CRIME	SENTENCE	ENCECRF#CC		JNTY
DATE/TIME LAST SEEN	NPLACE L/	AST SEEN	BY WH	HOM
CLOTHING DESCRIPTION	ON			
VEHICLE: YEAR	COLORMAKE		MODEL	
TAG #	_ DRIVER'S LICENSE #	D	L STATE	
PROBABLE DIRECTION	OF TRAVEL			
MISCELLANEOUS INFO)			
ENTER NAME OF NOTI	FYING OFFICER, DATE AN	ID TIME OF NOTIFI		ISION
FACILITY/UNIT HEAD/P	PRIVATE PRISON CONTRA	CT MONITOR		
	ER 425-2698 OR TOLL FREE <i>F</i> LL FREE AT 866-363-1119	T 866-363-1119 (af	ter 5 pm, wee	kends and holidays)
IF MINIMUM OR ABOVE	E, CONTACT THE INSPECT	OR GENERAL 1-40	5-203-8127 (Facility Head or Designee)
VINE EMERGENCY OV	ERRIDE LINE 1-866-647-74	09		
COUNTY SHERIFF				
LOCAL BOLICE				
	V ENFORCEMENT AGEN			SUSPECTED LOCATION
	TAFF MEMBER DESIGNAT "ESCAPE FROM STATE PI		EAD MUST O	BTAIN A FELONY ARRES
WARRANT INFORMATI	ON:			
COUNTY	CRF NUMBER	ISSUING J	UDGE	
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