

COPS IN SHOPS

SUMMARY OF ARRESTS
GRANT # AL-19-45-05-01

LAW ENFORCEMENT AGENCY: _____

DATE OF DETAIL: _____

TOTAL NUMBER OF ARRESTS:

(1) 0-17 YEARS OLD

(2) 18-20 YEARS OLD

(3) 21 AND OVER

BY: _____ DATE: _____
OFFICER'S NAME

PLEASE NOTE:

1. Submit this form to Lisa Lowe via fax or e-mail within 3 days of the detail, whether or not arrests were made;
2. Submit only ONE Summary of Arrests form per detail;
3. Retain the original;
4. Do not send duplicates;
5. If arrests were made, complete and submit the Arrest/Citation form for each arrest.

E-mail: Lisa.Lowe@njoag.gov

Fax: (609) 633-9150