



39604

AET/CAST SATURATION PATROL FORM

Please complete for all saturation patrols conducted in conjunction with AET or CAST efforts. The lead agency involved in multi-jurisdictional efforts should fill out this form. PLEASE WRITE IN CAPS.

REPORTING AGENCY:

COUNTY:

SATURATION PATROL AREA: _____

JUDICIAL CIRCUIT:

PATROL DATE: / /

START TIME: : AM PM END TIME: : AM PM

Participating Agencies (if a multi-jurisdictional effort): _____

Total # of Tickets by Offense

| | | | |
|---|----------------------|------------------------------|----------------------|
| Underage Alcohol Violations: 16 & Under | <input type="text"/> | DUI (Under 21) | <input type="text"/> |
| Underage Alcohol Violations: 17 to 20 | <input type="text"/> | DUI (Adult) | <input type="text"/> |
| Suspended/Revoked Licenses | <input type="text"/> | Uninsured Motorists | <input type="text"/> |
| Underage Tobacco Possession | <input type="text"/> | Speeding | <input type="text"/> |
| Stolen Vehicles Recovered | <input type="text"/> | Drug Possession | <input type="text"/> |
| Fugitives Apprehended | <input type="text"/> | Reckless Driving | <input type="text"/> |
| Open Container | <input type="text"/> | Felony Arrests | <input type="text"/> |
| Fake ID | <input type="text"/> | Other (Please specify below) | <input type="text"/> |

OF OFFICERS INVOLVED: Other:

Please fill in the demographics of those ticketed. Offenders should be counted as Hispanic or Non-Hispanic in addition to being counted as Black/White/Other/etc. Please enter counts, not percentages.

Male Female Hispanic Non-Hispanic
 Black White Asian American Indian Multi-Racial
 Hawaiian/Pacific Islander Other
 15-17 18-20 21-24 25-44 45-64 65+

Name of person submitting this form: _____

Phone () _____ - _____

E-mail: _____