

OKLAHOMA DEPARTMENT OF CORRECTIONS OFFENSE REPORT

Name of Facility

Facility Computer Code

Section I

Inmate Name:

ODOC#:

Date of Offense:

Time:

Place of Offense:

Housing Assignment:

Offense: (5-ACI-3C-08, b#1, b#2)

Offense Computer Code:

Class of Offense:

Description of Incident (to include any unusual inmate behavior): (5-ACI-3C-08, b#3)

Staff Witness (if any) (5-ACI-3C-08, b#4)

Disposition of Physical Evidence (if any) (5-ACI-3C-08, b#5)

Immediate Action Taken (to include the use of force and prehearing detention) (5-ACI-3C-08, b#6)

Printed Name and Title of Reporting Employee (5-ACI-3C-08, b#7)

Signature of Reporting Employee

Name

Title Date / / Time

Section II

To be reviewed within 24 hours from the time the violation is reported.

Informal Resolution

Dismissed

Name

Title

Date / / Time:

Within 24 hours of affirming a rule violation has occurred:

Referred for investigation

Section III Inmate should initial appropriate response

I have received a copy of the written charge against me. I realize that I have a right to remain silent.

I plead guilty and waive my right to a hearing and an appeal.

I plead not guilty.

I plead not guilty and waive my right to 24 hours preparation time.

Inmate's Signature ODOC # Date / / Time

Inmate chose not to sign for a copy of the offense report at this time.

Offense Report Delivered to above inmate by (Print and Sign)
(5-ACI-3C-11, 5-ACI-3C-13)

Date Delivered

Time Delivered

ORIGINAL: Commitment Document Folder

FIRST COPY: Field File

SECOND COPY: Inmate

DOC 060125A (R 10/23)