

# Rockwall County Detention Center



## MR Hall Officer Changeover Checklist

**Date:** \_\_\_\_\_ **Shift:** \_\_\_\_\_ **Officer:** \_\_\_\_\_

ITEMS	CONDITION	OFC. INITIALS/BADGE #	RELIEVING OFC. INITIALS/BADGE #
[REDACTED]			
SHEARS			

### MEDICAL/SUICIDE WATCHES

INMATE'S NAME	CELL	30/15/CONSTANT	OFC. INITIALS BADGE #	RELIEVING OFC. INITIALS BADGE #

### PASS ON LOG

START	END	INFORMATION

START	END	INFORMATION

