



2013/2014 MOBILIZATIONS & MONTHLY SUSTAINED ACTIVITY REPORT (ENFORCEMENT COMPONENT)



INSTRUCTIONS:

This form should be completed by all law enforcement agencies, including those who are not participating in the 2014 Law Enforcement DUI Challenge. The form will be used for collecting data on all enforcement campaigns & Sustained Efforts. Please indicate whether this is a monthly sustained effort report or a campaign (SOS, Buckle-Up, etc) report by checking the appropriate item below (only check one).

REPORTING AGENCY: _____

LEN #: _____

Reporting on Mobilizations (Campaigns) ONLY

___ 2013/2014 Christmas/New Years "SOS" (12/13/2013 – 01/1/2014)

___ BUSC Memorial Day (05/19/2014 - 06/1/2014)

___ 2014 Labor Day "SOS" Blitz (08/15/2014 – 09/1/2014)

OR

Sustained (monthly) SOS DUI Enforcement Effort ONLY

___ October 2013

___ January 2014

___ April 2014

___ July 2014

___ November 2013

___ February 2014

___ May 2014

___ August 2014

___ December 2013

___ March 2014

___ June 2014

___ September 2014

Specific Enforcement Activity this Month

Specific Enforcement Activity this Month

Number of checkpoints conducted by agency:

Number of saturation patrols conducted by agency:

Assisted checkpoints:

Assisted saturation patrols:

Assisted DUI arrests:

Location:

(I.e., highway number, road name, or intersection)

Participating Agencies:

DUI Arrests	Safety Belt Citations	Child Safety Seat Citations	Felony Arrests	Stolen Vehicles Recovered	Fugitives Apprehended	DRE Evaluations

Suspended/ Revoked Licenses	Uninsured Motorists	Speeding	Reckless Driving	Drug Arrests	Other (following too closely, open container, etc.)

(MEDIA COMPONENT)

NOTE: Please submit a separate Media Report for each event/story!!!

INSTRUCTIONS:

Press conferences held this time period: _____

TV news stories aired this time period: _____

Radio news stories aired this time period: _____

Print news stories run this time period: _____ (provide copies of print stories if possible)

Other (specify):

Date(s) and details of media efforts:

Name of person submitting this report: _____ Phone: (____) _____

Email : _____