# CELL SEARCH REPORT

**Facility:**_____ **Housing Unit:**_____

**Date:**_____ **Staff Name:**_____

| Room # | Name/Number of Occupants | Type of Search | | Contraband Found | Offense Report Issued (Yes or No) |
|---|---|---|---|---|---|
| | | Suspect | Non-Suspect | | |
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| **Total** | | | | | |

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(7/14)