

**STATE OF FLORIDA
DEPARTMENT OF CORRECTIONS
HOUSING UNIT LOG**

(INSTITUTION)

HOUSING UNIT _____

DATE _____

TIME	LOG OF EVENTS	INITIALS
Housing Sergeant Signature:		
Housing Officer Signature:		

Each Correctional Officer and Correctional Officer Sergeant will make entry as to the time she/he assumed duties for the housing unit and the time relieved. Signature of the Housing Officer and Sergeant indicates that she/he has relieved the preceding shift, read the previous entries on the Housing Unit Log, and assumes the responsibility for any corrective action or follow-up action required. This log will be forwarded daily to the office of the Chief of Security at the conclusion of the third shift.