RECORDS MANAGEMENT AUDIT REPORT

Facility/Probation and Parole Region Audited _____

Starting Audit Date _____ Ending Audit Date _____

Number of Audits _____ Number of Corrections _____

Number of Files with Corrections: _____

Type of Corrections: Time Served _____

Jail Time _____

Earned Credit _____

Emergency Time Credit _____

Achievement Credit _____

Deferred Reception Credit _____

Restored Credit _____

Lost Credit _____

Non-Creditable Time _____

Sentencing/Legal _____

Comments:

Auditor: _____

For questions concerning this audit, sentence, and time calculation matters in general, or requests for training or assistance, contact the manager of Sentence Administration.