**TELEPHONE ACTION**

***ACCION TELEFONICA***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name/*Nombre* | DOC number/*Núm. DOC* | | Call date/*Fecha* | Call time/*Hora* |
| Name of person called/*Nombre de la persona a quien llamó* | | Number called/*Número marcado* | | |
| Facility/*Institución* | | Unit/*Unidad* | | |
| Date difficulty reported/ *Fecha problema reportado* | | Time difficulty reported/*Hora problema report* | | |
| Physical location of phone/*Ubicación del teléfono* | | Phone identification/*Identificación del teléfono* | | |

|  |
| --- |
| **DESCRIBE DIFFICULTY/DESCRIBA EL PROBLEMA** |
| No dial tone/*No tono de marcar*  Physical damage/*Daño físico*  IPIN  Cannot dial out/*Llamada no entra*  Other/*Otro* |
| Description/*Descripción*: |

|  |
| --- |
| Operator exact message/*Mensaje Exacto del Operador*: |
| This number does not accept collect calls.  Your call cannot be completed as dialed.  Este número no acepta llamadas por cobrar.  No entrará su llamada tal como usted la marcó. |
| Description/*Descripción*: |

Submitted by/*Enviado por* Signature/*Firma* Date/*Fecha*

|  |
| --- |
| **REPAIR EMPLOYEE COMPLETES** |

Received by Date received Response date

|  |
| --- |
| Action taken/*Response*: |

Completed by Signature Phone number

**The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.**

Distribution: **WHITE** - HQ IPIN Admin. Office **CANARY** - Incarcerated individual **PINK** - Facility Phone Administrator