

**United States Police Canine Association
Region 2**

Patrol / Detector Case Of The Quarter

Officer's Name _____

Department _____

Department Address _____

City _____ State _____

Canine's Name _____

Type of Case being submitted: Patrol _____ Detector _____

Date of case being submitted: _____

Submitted by: _____

Email Address: _____

Date: _____

Contact number: _____

Please type your case using double-space on a separate sheet. Attach it along with your departmental documentation to this application. It must be submitted to the Region 2 awards committee by the deadlines below to be considered.

**Deadline for case of the quarter: First Quarter April 5
 Second Quarter July 5
 Third Quarter October 5
 Fourth Quarter January 5**

Submit to: Randy Jenkins
 210 Rickman Ridge
 Canton, NC 28716
 kjenkins@haywoodnc.net