

North Carolina Governor's Highway Safety Program Monthly Enforcement Data Report - Form GHSP-11

Project Number: _____ Officer Name: _____ Month: _____ Year: 20 _____
 Agency: _____

(Please use minimum size 9 Bold Font for stats)

Project Traffic Offenses and Criminal Charges															
Driving While Impaired		Occupant Restraint		Other Traffic Offenses								Criminal Charges			Total Charges
Total DWI Charges	Test Refusal	Seat Belt	Child Safety Restraint	Speed	DWLR	NOL	GDL	Motorcycle / Moped No Permit or Endorsement	Other Violations Not Listed	Total Warning Citations	Total Traffic Offenses	Total Drug Charges	Criminal Charges Not Listed	Total Criminal Charges	Traffic and Criminal

Fugitives Arrested

Stolen Vehicles Recovered

Number of Officers on Project

Enforcement Initiative	Day	Night
DWI Checking Station		
Seat Belt Initiative		
License Checks		

Public Information Data	
Number of Presentations	
Number of Displays	
Number of People Reached	

Project Hrs Worked	
Enforcement	
Training	
Court	
Crashes	
Public Info	
Other	
TOTAL	

Total Number Traffic Stops	
TOTAL	

Crash Data	
Injury Crashes	
A/R Injury Crashes	
Fatal Crashes	
A/R Fatal Crashes	
PDO Crashes	
A/R PDO Crashes	
Total Crashes	



Certification	
Printed Name:	_____
Signature:	_____
Date Submitted:	_____