

Publication Review Determination and Course of Action

MENARD CORRECTIONAL CENTER

Approved
Sent to inmate

JUL 16 2009

Offender Name: _____ Facility _____ ID# _____ Housing Unit: _____

Section I: Publication Review Determination

Pursuant to 20 Ill. Admin. Code 525, the following publication has been reviewed:

Publication Name and Volume/Issue Number or Date

UNDER LOCK & KEY MAY 2009 #8

Based upon this review, the following action is recommended:

- Approval and placement on the Department's Approved Publication List
- Conditional approval with the following pages removed: _____ (NOTE: Offender must complete Section II.)
- Denial - The publication is listed on the Disapproved Publication List.
- Denial - The publication be disapproved as it contains material determined to:
 - Be obscene per 720 ILCS 5/11-20(b).
 - Be written in code or facilitates communication between offenders.
 - Depict, describe, or encourage activities that may lead to the use of physical violence or group disruption or it facilitates organizational activity without approval of the Chief Administrative Officer.
 - Advocate or encourage violence, hatred, or group disruption or it poses an intolerable risk of violence or disruption.
 - Encourage or instruct the commission of criminal activity
 - Include sexually explicit material that by its nature or content poses a threat to security, good order, or discipline or it facilitates criminal activity.
 - Be otherwise detrimental to security, good order, rehabilitation, or discipline, or it might facilitate criminal activity or be detrimental to mental health.
 - Other (Specify): _____

Comments: THREAT TO SAFETY AND SECURITY AND GOOD ORDER OF THE INSTITUTION

NOTE: If the publication(s) have been disapproved, Section II of this form must be completed by the offender.

Reviewed by: L. SHEMONIC _____ Signature of Publication Review Officer _____ Date: 7-1-09

Concur Do Not Concur (Specify Rationale): _____
D. GAETZ _____ Signature of Chief Administrative Officer _____ Date _____

Central Publication Review Committee (Recommended disapprovals only.)

Concur Do Not Concur (Specify Rationale): Approve _____ Signature of Committee Member _____ Date: 7/14/09

Concur Do Not Concur (Specify Rationale): _____

Signature of Chief Administrative Officer _____ Date _____

Section II: Disposal or Course of Action for Publications

Date of Notice: _____

I authorize the removal of the pages referenced above. (If you do not authorize removal, the entire publication will be disapproved and disposed of accordingly.)

If the publication has been disapproved, you have 30 days to have the contraband items disposed of by one of the following methods. These items will be disposed of in accordance with 20 Ill. Admin. Code 501.230 after the 30 day notice due date. Please select a method of disposal.

- I authorize the facility to dispose of the publication(s).
- Mail the publication(s) to the following address at my expense (indicate mailing address on voucher).

Name: _____
Address: _____

Publication(s) will be picked up at the facility on _____ by _____

I have filed a grievance in accordance with 20 Ill. Admin. Code 504.

Offender Signature _____ Date _____