

INMATE'S NAME	CDC NUMBER	HOUSING
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MAIL / PACKAGES SECTION (Complete for mail or package cases only)

INCOMING MAIL/PACKAGE OUTGOING MAIL/PACKAGE

LIST ITEM(S) WHICH MEET DISAPPROVAL CRITERIA

DESCRIPTION OF MATERIAL THAT MEETS DISAPPROVAL CRITERIA, INCLUDE CCR, TITLE 15 SECTION

DISPOSITION	SENDER INFORMATION		
<input checked="" type="checkbox"/> HELD PENDING INVESTIGATION/APEAL <input type="checkbox"/> RETURNED TO SENDER (At Inmate's Expense) (Date) <input type="checkbox"/> DESTROYED *(INMATE HAS THIRTY (30) DAYS, AFTER NOTIFICATION OF DISAPPROVAL HAS BEEN FORWARDED TO LET STAFF KNOW THE CHOICE OF DISPOSAL, OTHERWISE MATERIAL WILL BE DESTROYED).	FIRST NAME	MI	LAST NAME
	ADDRESS (NUMBER AND STREET)		
	CITY	STATE	ZIP CODE
	ACKNOWLEDGE RECEIPT OF THIS NOTIFICATION: (INMATE'S SIGNATURE)		DATE SIGNED

AUTHORITY TO DISALLOW (Must be completed in all cases)

PRINTED NAME OF WARDEN'S DESIGNEE	SIGNATURE OF WARDEN'S DESIGNEE	DATE SIGNED	DATE FORWARDED TO INMATE
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PUBLICATIONS SECTION (Complete for publication cases only)

TITLE OF PUBLICATION (Include issue/date)	PUBLISHER	PAGE(S) WHICH MEET DISAPPROVAL CRITERIA
UNDER LOCK & KEY	MIM DISTRIBUTORS	1

DESCRIPTION OF MATERIAL THAT MEETS DISAPPROVAL CRITERIA, INCLUDE CCR, TITLE 15 SECTION

TITLE 15 SECTION 3006 (d): ANYTHING IN POSSESSION OF AN INMATE WHICH IS NOT CONTRABAND BUT WILL, IF RETAINED IN POSSESSION OF AN INMATE, PRESENT A SERIOUS THREAT TO FACILITY SECURITY OR THE SAFETY OF INMATES OR STAFF, SHALL BE CONTROLLED BY STAFF TO THE DEGREE NECESSARY TO ELIMINATE THE THREAT.

DISPOSITION	DESIGNEE INFORMATION		
<input checked="" type="checkbox"/> HELD PENDING INVESTIGATION/APEAL <input type="checkbox"/> DESTROYED <input type="checkbox"/> RETURNED TO OUTSIDE DESIGNEE AT INMATE'S EXPENSE (DATE) ***(INMATE HAS THIRTY (30) DAYS, AFTER NOTIFICATION OF DISAPPROVAL HAS BEEN FORWARDED TO LET STAFF KNOW THE CHOICE OF DISPOSAL, OTHERWISE MATERIAL WILL BE DESTROYED).	FIRST NAME	MI	LAST NAME
	ADDRESS (NUMBER AND STREET)		
	CITY	STATE	ZIP CODE
	ACKNOWLEDGE RECEIPT OF THIS NOTIFICATION: (INMATE'S SIGNATURE)		DATE SIGNED

AUTHORITY TO DISALLOW (Must be completed in all cases)

CAPTAIN'S PRINTED NAME	CAPTAIN'S SIGNATURE	DATE SIGNED	DATE FORWARDED TO INMATE
A. Gibson	<i>A. Gibson</i>	2/1/16	SEP 2 2016

DISTRIBUTION: ORIGINAL - MAILROOM CANARY - INMATE PINK - SENDER / DESIGNEE

*ALL APPEALS REGARDING MAIL/PACKAGES SHALL BE REFERRED TO THE WARDEN'S DESIGNATED STAFF.
 **ALL APPEALS REGARDING PUBLICATIONS SHALL BE REFERRED TO THE CAPTAIN.