



**NOTICE TO INMATE, ADDRESSEE/SENDER OF MAIL  
CENSORSHIP & APPEAL/WAIVER FORM**

(This notice should be used when mail or contents contained with mail is censored by the facility)

TO: Inmate: \_\_\_\_\_ Opus # \_\_\_\_\_

DATE: 28-Jul-09

Sender: MIM Distributors

FROM: *[Signature]* Pete Buchholtz, Asst. Superintendent

Date: \_\_\_\_\_

RE: Disapproval of Correspondence and/or Contents

Correspondence and or its contents you addressed to \_\_\_\_\_ sent to you by Mim Distributors  
PO Box 40799 San, Francisco Ca 94140 have been withheld. I have reviewed the correspondence and any contents and  
determined that the correspondence and or its' contents violates Division of Prisons policy section D.0310 (c) and is disapproved for  
the reason listed. Therefore, I am disapproving possession of this correspondence and/or its contents.

(Check only one) Correspondence Withheld Only? \_\_\_\_\_ Contents Withheld Only? \_\_\_\_\_  
Correspondence and Contents Withheld?   
Describe Contents Only: Prisoner Newsletter with a letter from a crip leader

You may choose to appeal this decision to the Director's Correspondence Review Committee within 10 days of receipt of this written  
notice. Or you may choose to waive your appeal and have the correspondence and or its contents disposed of in accordance with  
Division of Prisons policy F.0500, Inmate Personal Property.

Listed below are the options available to you in this matter.

1. Do you choose to appeal? Yes \_\_\_\_\_ No \_\_\_\_\_  
If you select this option, the items(s) described above will be forwarded to the Director's Correspondence Review Committee for final  
review. You may attach additional sheets to explain your appeal or you can use the space below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. If your appeal is denied, or if you do not choose to appeal:

\_\_\_\_\_ Do you choose to have the disapproved correspondence and/or its contents mailed (at your expense) to another  
Address? Yes \_\_\_\_\_ (name and address) \_\_\_\_\_ Cost to Return: \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_ I have provided an envelope and stamps for postage to return the item.  
\_\_\_\_\_ I have provided an envelope to return the item and would like to have the cost of postage withdrawn from my trust fund  
account.

\_\_\_\_\_ Do you choose to have the disapproved correspondence and/or its contents destroyed? Yes \_\_\_\_\_ No \_\_\_\_\_

**The Facility Head has an obligation to report to local law enforcement any correspondence and or its contents that may  
reference or be linked to criminal activity.**

Sender Signature/Date \_\_\_\_\_

Staff Signature/Date \_\_\_\_\_

Item destroyed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Item mailed by: \_\_\_\_\_ Date: \_\_\_\_\_

cc: Inmate Copy  
Facility File  
Correspondence Review Committee File