

**GEORGIA DEPARTMENT OF CORRECTIONS**  
***FACILITIES DIVISION***

**(Notification Of Registered Sex Offender Transfer)**

|                              |  |
|------------------------------|--|
| <b>OFFENDER NAME:</b>        |  |
| <b>GDC NUMBER:</b>           |  |
| <b>SS#</b>                   |  |
| <b>COUNTY OF CONVICTION:</b> |  |
| <b>FACILITY:</b>             |  |
| <b>CURRENT OFFENSE:</b>      |  |
| <b>REGISTERABLE OFFENSE:</b> |  |
| <b>FBI NUMBER:</b>           |  |

The above Registered Sex Offender has been transferred from \_\_\_\_\_ County to \_\_\_\_\_ County and is currently housed at \_\_\_\_\_. Please make the necessary changes to your Sex Offender Registry. If you have any questions, contact me at \_\_\_\_\_.

Retention Schedule: Upon completion, the form is to be retained on the top left side of the offender's institutional for 99 years or until proof of death is received.