

INDIGENT NON-LEGAL SUPPLIES REQUEST FORM

Offender Name: _____ Date: _____

GDCID I.D. No. _____ Building/Room Assignment No. _____

I am declaring that I am indigent. I am requesting that stationery items be provided in order to maintain community ties. I understand that, if funds are received in my account, I will be charged the current cost for these supplies and authorize the Business Office to deduct funds from my account when such funds are available.

Offender's Signature

Date Supplies are needed

To: Business Office

The above named offender has requested supplies.

Is offender indigent? Yes _____ No _____ Date _____

The above named offender received the following supplies:

<u>WEEKLY AUTHORIZED AMOUNT</u>	<u>AMOUNT RECEIVED</u>	<u>COST</u>
6 Writing Paper, Sheets @ \$0.01 ea.	_____	\$ _____
3 Envelopes, @\$0.02	_____	\$ _____
1 ea. Pen Monthly @ \$0.10	_____	\$ _____
	TOTAL	\$ _____

Offender's Signature

Issued By

Date Received