

This record must accompany the incarcerated individual's records when they are transferred.

NON-FOOD PACKAGE RECORD

_____ Correctional Facility

Name		DIN	Cell	Shop
Date Received	Transferred To:		Date	Sheet/Page #

**NOTICE TO
INCARCERATED
INDIVIDUAL**
By signing below, you must affirm that:
- **These articles are for my personal use only, and**
- **I am not exceeding property limits per Dir. #4913**

AMT.	ARTICLE	DATE	FROM WHOM RECEIVED	VIA	REC'D BY	ISSUED BY	INCARCERATED INDIVIDUAL'S SIGNATURE	DATE

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