

REQUEST FOR INMATE-TO-INMATE CORRESPONDENCE

Date: _____

To: Superintendent/Sheriff _____

Institution

From: Superintendent/Sheriff _____

Institution

Re: Our Inmate: _____ **Commitment #:** _____

Your Inmate: _____ **Commitment #:** _____

I have approved our inmate's request dated _____, to correspond with an inmate from your facility for the following reason, and I am forwarding this request to you for your consideration:

_____ Immediate Family Member (Circle appropriate relationship):

Husband, Wife, Mother, Father, Sister, Brother, Son, Daughter

_____ Pro Se Legal Action (inmates are co-plaintiffs or co-defendants in legal action in which both inmates are representing themselves)

Court and case no.: _____

TO BE COMPLETED BY RECEIVING FACILITY SUPERINTENDENT/SHERIFF

_____ Request Approved

_____ Request Denied for the Following Reason(s): _____

Superintendent/Sheriff Date

Institution

DEPARTMENT OF CORRECTION

DISAPPROVED CORRESPONDENCE/PUBLICATION AND CONTRABAND NOTICE

Intended Recipient

Name of Recipient	Inmate Number (if applicable)	Institution
Address – Street or P.O. Box	City	State and Zip Code

Sender

Name of Sender	Material Sent (name and date of correspondence/publication)	Institution (if applicable)
Address – Street or P.O. Box	City	State and Zip Code

Non-Delivery Information

Date Item Postmarked or Date Item Received	Item Rejected for Delivery (letter, package, magazine, book, etc.)
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Reason(s) for Disapproval/Non-Delivery

Item(s) fall as a whole or in significant part into any one of the following categories:

- _____ Transmittal of plans for, or the introduction of, contraband into the prison
- _____ Plans for criminal activity or any activity which violates any departmental or institutional rule, regulation, order or policy
- _____ Written in code
- _____ Threatening or harassing correspondence including the sending of sexually explicit material to unwilling recipients
- _____ Correspondence containing unsanitary or hazardous material (i.e., feces, insects, dirt, debris)
- _____ Extortion demands
- _____ Sending cash, drugs, jewelry or other contraband outside the prison
- _____ The recipient has previously requested not to receive correspondence from the inmate pursuant to 103 CMR 481
- _____ Improper or no return address
- _____ Depicts or describes procedures for the construction of weapons, ammunition, bombs, or incendiary devices
- _____ Depicts, describes or encourages methods of escape from correctional facilities or contains blueprints, drawings or similar descriptions of any correctional institution within the Commonwealth.
- _____ Depicts or describes procedures for the brewing of alcoholic beverage(s), or the manufacture of drugs
- _____ Depicts, describes or encourages activities that may lead to the use of physical violence or group disruption
- _____ Encourages or instructs in the commission of criminal activity
- _____ Sexually explicit pictorial material or material that features nudity. * Per 103 CMR 481.13(3)(c) it is the Deputy Superintendent's decision as to whether or not a publication should be excluded.
- _____ Per 103 CMR 481.13(3)(b) The Deputy Superintendent of the Treatment Center, with the approval of the Commissioner, may exclude additional types of material that may interfere with the treatment and rehabilitation process at that institution.
- _____ Item(s) not authorized by 103 CMR 403, *Inmate Property Policy*.

Signature of Institution Staff Member	Date Signed
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**** IMPORTANT** PLEASE NOTE: IF YOU DISPUTE THIS DECISION, YOU HAVE THE RIGHT TO APPEAL TO THE SUPERINTENDENT BY SUBMISSION OF A WRITTEN APPEAL WITHIN 7 DAYS OF RECEIPT OF THIS NOTICE.**

THIS ALSO SERVES AS YOUR INITIAL CONTRABAND NOTIFICATION UNDER 103 CMR 403.15 FOR THE ABOVE REFERENCED ITEM(S).

Distribution: Original – Deputy Superintendent

Copy – Property Officer

Copy – Inmate