ATTACHMENT 1 - SAMPLE

INMATE VISITOR LIST

	Inma	nte Name:	Facility:	
	1.	Visitor Name	DOB	
		Relationship_		
		Home Address_		
		Mailing Address (if different)		
	2.	Visitor Name	DOB	
		Relationship		
		Home Address		
		Mailing Address (if different)		
	3.	Visitor Name	DOB	
		Relationship		
		Home Address		
		Mailing Address (if different)		
	4.	Visitor Name	DOB	
		Relationship		
		Home Address_		
		Mailing Address (if different)		
	5.	Visitor Name	DOB	
		Relationship		
		Home Address_		
		Mailing Address (if different)		

See back for 5 more names and addresses.

A visitor's address on their photo identification card must match the address on the visiting list or the discrepancy be satisfactorily explained.

Changes to an inmate's visiting list may be made every ninety (90) days. 6/06