

INMATE PROPERTY REIMBURSEMENT

TO: _____,
Assistant Attorney General

FROM: _____,
Assistant Commissioner, Security Operations

Attached documentation submitted for inmate property reimbursement has been reviewed and found to support the request. Please review for sufficiency and process in accordance with established procedures.

Institution: _____

Inmate's Name: _____

D.O.C.# _____ Social Security # : _____

Description of Property: _____

Estimate/Actual Value: _____

Reimbursement Request: _____

Attachments

STRAIGHT LINE DEPREVIATION TABLE

ITEM	LIFE EXPECTANCY/ YEARS	DEPRECIATION EACH YEAR %
CLOTHING	5	20
JEWELRY	5	20
CLOCK	8	12
TV and TV ANTENNA	10	10
RADIO and HEADPHONES	10	10
TYPEWRITER	5	20
FAN	10	10
CALCULATOR	10	10
RECREATIONAL MATERIALS	10	10
EYEGLASSES/CONTACT LENSES	10	10
DENTURES	20	5
BOOKS	4	25