

BP-A407\_ACKNOWLEDGMENT OF INMATE, PART 1 & 2

# ACKNOWLEDGMENT OF INMATE, PART 1 & 2

# U.S. DEPARTMENT OF JUSTICE FEDERAL BUREAU OF PRISONS

This form is to be completed by each inmate upon initial entry into the custody of the BOP. Staff shall also complete and sign as appropriate. The form is then re-completed only when the inmate desires a change in any section.

Name of Inmate _____	Register Number _____	Institution _____
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### 1. CORRESPONDENCE

The staff of each institution of the Bureau of Prisons has the authority to open all mail addressed to you before it is delivered to you. "Special Mail" (mail from the President and Vice President of the U.S., Attorneys, Members of the U.S. Congress, Embassies and Consulates, the U.S. Department of Justice (excluding the Bureau of Prisons but including U.S. Attorneys)), other Federal Law enforcement officers, State Attorney General, Prosecuting Attorneys, Governors, U.S. Courts, (including U.S. Probation Officers and State Courts) may be opened only in your presence to be checked for contraband. This procedure occurs only if the sender adequately identifies himself or herself on the envelope and the front of the envelope is marked "Special Mail-Open only in the presence of the inmate." Other mail may be open and read by the staff.

If you do not want your general correspondence opened and read, the Bureau will return it to the Postal Service. This means that you will not receive such mail. You may choose whether you want your general correspondence delivered to you subject to the above conditions, or returned to the Postal Service. Whatever your choice, special mail will be delivered to you, after it is opened in your presence and checked for contraband. You can make your choice by signing Part I or Part II.

#### Part I - General Correspondence to be returned to the Postal Service

I have read or had read to me the foregoing notice regarding mail. I do not want my general correspondence opened and read. I REQUEST THAT THE BUREAU OF PRISONS RETURN MY GENERAL CORRESPONDENCE TO THE POSTAL SERVICE. I understand that special mail will be delivered to me, after it is opened in my presence and checked for contraband.

Signature of Inmate \_\_\_\_\_ Register Number \_\_\_\_\_ Date \_\_\_\_\_

#### Part II - General Correspondence to be Opened, Read and Delivered

I have read or had read to me the foregoing notice regarding mail. I WISH TO RECEIVE MY GENERAL CORRESPONDENCE. I understand that the Bureau of Prisons may open and read my general correspondence if I choose to receive same. I also understand that special mail will be delivered to me, after it is opened in my presence and checked for contraband.

Signature of Inmate \_\_\_\_\_ Register Number \_\_\_\_\_ Date \_\_\_\_\_

Inmate refused to sign this form. He (She) was advised by me that the Bureau of Prisons retains the authority to open and read all general correspondence. The inmate was also advised that his (her) refusal to sign this form will be interpreted as an indication that he (she) wishes to receive general correspondence subject to the conditions in Part II above.

Printed Name /Signature of Staff Member \_\_\_\_\_ Date \_\_\_\_\_

### 2. AUTHORIZATION FOR DISPOSITION OF FUNDS

While confined within a prison facility under custody of the U.S. Attorney General or the Attorney General's designee(s), an inmate is prohibited from directly receiving or possessing (unless specifically authorized by the local institution) U.S. currency or checks, or other forms of negotiable instruments. To account for funds received on behalf of the inmate, the Bureau of Prisons establishes for each inmate a Prisoner's Trust Fund Account. The Director, Bureau of Prisons, or the Director's authorized designee(s) serves as the custodian of any and all funds received by an inmate while the inmate is incarcerated in the custody of the U.S. Attorney General.

I hereby  authorize  do not authorize [mark one] the Director, Bureau of Prisons, or the Director's authorized designee(s), and the Warden or the Warden's authorized designee(s) in this or in any other federal institution in which I may later be confined, to sign my name as endorsement on all checks, money orders, or bank drafts, or other forms of negotiable instruments, for deposit to my credit in the Prisoners Trust Fund Account, as long as I am a prisoner in the Bureau of Prisons. I understand that by not providing this authorization, I will I not be able to receive checks, money orders, or bank drafts, or other forms of negotiable instruments while confined.

I further understand that all negotiable instruments sent to me should reference my name and register number in order to provide for proper deposit to my account. If my name and register number are not referenced the institution mail room officer may return the negotiable instrument to the sender.

Signature of Inmate \_\_\_\_\_ Register Number \_\_\_\_\_ Date \_\_\_\_\_

Inmate refused to sign this form. He (she) was advised by me that his (her) refusal to sign this form will be interpreted as an indication that he (she) does not authorize the Bureau of Prisons to endorse on his (her) behalf all checks, money orders, or bank drafts, or other forms of negotiable instruments for deposit to his (her) credit in the Prisoner's Trust Fund Account and that he(she) will not be able to receive such funds while confined.

Printed Name /Signature of Staff Member \_\_\_\_\_ Date \_\_\_\_\_