

Certificate of Record CDFRM

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

I \_\_\_\_\_, hereby certify and attest that I am the  
CASE MANAGEMENT COORDINATOR and as such that I am the official custodian of the  
records of this Institution whose official name and address is:

and that the following and attached records are true and correct copies of  
records of said institution pertaining to:

Name: \_\_\_\_\_ Register No. \_\_\_\_\_

and consisting of: (1) Photograph (2) Fingerprint card (3) Commitment  
(4) Other:

IN WITNESS WHEREOF, I have hereunto set my hand at

\_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Custodian of Records

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Officer Authorized to  
Administer Oaths (18 U.S.C. 4004)

Record Copy - Requester; Copy - Central File