

Five copies. All copies, with original signatures by the Prosecutor and the Agents, should be sent to the Administrator in the RECEIVING State. After signing all copies, the Administrator should retain one copy for his file, send one copy to the Warden, Superintendent or Director of the Institution in which the prisoner is located and return two copies to the Prosecutor who will give one to the Agents for use in establishing their authority and place one in his file. One copy should also be forwarded to the Agreement Administrator in the sending file.

**Evidence of Agent's Authority to Act for Receiving State**

To: (Administrator and Address)

Inmate (Name and Register No.)	is confined in (Institution and address)
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and will be taken into custody at said Institution on (date) \_\_\_\_\_ for return to the County of \_\_\_\_\_, State of \_\_\_\_\_ for trial. In accordance with Article V(b), of said Agreement, I have designated:

Agent's Name and Department Represented

Agent's Name and Department Represented

Agent's Name and Department Represented

whose signatures appear below as Agents to return the prisoner.  
(Agent's Signature) (Agent's Signature)

_____	_____
_____	_____
_____	_____

Dated

Prosecuting Official's Signature

- a. Title -
- b. County -
- c. Address -
- d. City/State -
- e. Telephone No -

**Evidence of Agent's Authority Continued**

To: (Warden-Superintendent-Director)

In accordance with the above representations and the provisions of the Agreement on Detainers, the persons listed above are hereby designated as Agents for the State of \_\_\_\_\_ to return (Inmate's Name and Register No.) \_\_\_\_\_ to the county of \_\_\_\_\_, State of \_\_\_\_\_, for trial.

At the completion of the trial (Inmate) \_\_\_\_\_ shall be returned to the (Institution and Address):

Dated	Detainer Administrator's Signature
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- a. Name -
- b. Address -
- c. City/State
- d. Telephone No.