



OKLAHOMA DEPARTMENT OF CORRECTIONS

CERTIFICATE OF RELEASE

THIS IS TO VERIFY THAT _____, ODOC # _____

WAS RELEASED FROM CONFINEMENT AT _____

ON THE _____ DAY OF _____, 20_____, AS A RESULT OF:

- DISCHARGE, SENTENCE COMPLETED PAROLE
 DISCHARGE, COMMUTATION DISCHARGE WITH PROBATION
 DISCHARGE, COURT ORDERED APPEAL BOND/REVERSED AND REMANDED
 DISCHARGE TO POST-IMPRISONMENT SUPERVISION

Furthermore, that all applicable credits have been applied in conformity with statutes of the state of Oklahoma and established procedures of the Oklahoma Department of Corrections pursuant to case(s): _____.

Your field file reveals no required period of supervision with the Oklahoma Department of Corrections.

Documentation in your field file reveals that you are under a term of (supervised) (unsupervised) probation/parole/post-imprisonment supervision pursuant to case(s) _____ until _____. You are required to report for supervision within 24 hours (excluding holidays/weekends) to:

SIGNED THIS _____ DAY OF _____, 20_____.

Facility Head/ Administrator/Designee

Witness

I HEREBY ACKNOWLEDGE RECEIPT:

Inmate's Name and ODOC #

Inmate's Forwarding Address:

Street

City

State

Zip