PLEASE POST IN ALL LIVING UNITS IN M-BLOCK AT TCCF-MS

To: All Inmates Housed at TCCF-MS

From: Rick Byrpe

Date: 12/10/18

Re: Vermont Visiting and Telephone Request Form

Vermont inmates will now be expected to complete a double sided visiting and telephone request form. These forms may be given to the M-Unit Case Manager at Tallahatchie Community Correctional Facility (TCCF), so that they can be scanned to us for approval and put into our Offender Management System in Vermont.

All inmates must submit a new visiting and telephone request form for approval by their Vermont caseworker. Visiting and telephone request information that has been submitted in the past will not be utilized.

Once the visiting and telephone request form has been approved, it will be scanned back to the TCCF Case Manager and a copy will be given to the inmate.

On 1/14/19, Vermont inmates will be restricted from calling any individuals not listed on their visiting and telephone request form. Please submit an updated form prior to this date and be advised that the visiting and telephone request form may only be updated once every 60 days.

Thank you.
INMATE VISITING REQUEST FORM
FOR VERMONT INMATES AT TCCF-MS

Inmate Name: ____________________________ Facility: ________________

1. Visitor Name_________________________ DOB________________
   Relationship______________________________________________
   Home Address____________________________________________
   Mailing Address (if different)_______________________________

2. Visitor Name_________________________ DOB________________
   Relationship______________________________________________
   Home Address____________________________________________
   Mailing Address (if different)_______________________________

3. Visitor Name_________________________ DOB________________
   Relationship______________________________________________
   Home Address____________________________________________
   Mailing Address (if different)_______________________________

4. Visitor Name_________________________ DOB________________
   Relationship______________________________________________
   Home Address____________________________________________
   Mailing Address (if different)_______________________________

5. Visitor Name_________________________ DOB________________
   Relationship______________________________________________
   Home Address____________________________________________
   Mailing Address (if different)_______________________________

See back for 5 more names and addresses.
A visitor's address on their photo identification card must match the address on the visiting list or the discrepancy be satisfactorily explained.

Changes to an inmate's visiting list may be made every sixty (60) days.
INMATE TELEPHONE SYSTEM REQUEST FORM
FOR VERMONT INMATES AT TCCF-MS

(PLEASE PRINT NEATLY)

<table>
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<tr>
<th>Inmate Name:</th>
<th>Inmate ID #:</th>
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<tbody>
<tr>
<td>Date of Birth:</td>
<td>Unit:</td>
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<td>Inmate Signature:</td>
<td>Date:</td>
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<tr>
<th>Add (A)</th>
<th>Delete (D)</th>
<th>Name of Called Party</th>
<th>Relationship</th>
<th>Area Code</th>
<th>Telephone Number</th>
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Your acceptance of a PIN and use of the Inmate Telephones shall be deemed as consent to the conditions and restrictions placed upon inmate telephone calls, including call monitoring, recording, and call detail.

Reviewed by Staff Member (Name and Signature)  

Date:

Changes to an inmate's telephone list may be made every sixty (60) days.