

State of Florida

Department of Corrections

INMATE PARTIAL PROPERTY RETURN RECEIPT

Inmate Name _____ Number _____

Date Property Stored _____

I. The following item(s) has (have) been returned to me from storage:

(Date Returned) (Signature of Inmate)

II. Signature of Property Room Officer who returns property to the inmate.

(Date) (Signature of Officer)

Distribution: White -- Keep with remaining property until **ALL** property is returned to inmate, then to inmate's institutional file.

Canary -- Inmate

Pink -- Inmate's Institutional File

DC6-225 (Revised 11-00) Incorporated by Reference in Rule 33-602.201, F.A.C.

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