

NOTICE OF RELEASE REQUEST

If you wish to be notified upon the expiration of an inmate's sentence, please complete the following form.

INMATE INFORMATION	
Inmate Name:	Institutional Number:

VICTIM CONTACT INFORMATION*		
Name:	Phone #:	
Address:		
City:	State:	Zip:
Name:	Phone #:	
Address:		
City:	State:	Zip:
Name:	Phone #:	
Address:		
City:	State:	Zip:

*KRS 421.500 defines a victim as an individual who suffers direct or threatened physical, financial, or emotional harm as a result of the commission of a crime classified as stalking, unlawful imprisonment, use of a minor in a sexual performance, unlawful transaction with a minor in the first degree, terroristic threatening, menacing, harassing communications, intimidating a witness, criminal homicide, robbery, rape, assault, sodomy, kidnapping, burglary in the first or second degree, sexual abuse, wanton endangerment, criminal abuse, or incest.

For a complete listing of Kentucky statues related to victims and victim rights as well as a listing of services provided by the Office of Victim Services visit our website at www.corrections.com/VictimServices

Please send the completed form to:
Kentucky Department of Corrections
Victim Services Branch
P.O. Box 2400—Rm G-46
Frankfort, KY 40602-2400
Phone #: 502-564-5061