IDAHO DEPARTMENT OF CORRECTION

Request to Remove Visitor from Visitor's List

Date:		
Inmate:	IDOC Number:	
This is to notify the Idaho Department of Co visitor(s) from my approved visitor list:	rrection (IDOC) that I wish to	remove the following
(Please print)		
Visitor's name:		
Visitor's name:		
Visitor's name:		
Inmate's Signature:		
Staff Witness:		
Printed Name:		
Signature:		Date: