**PROPERTY APPEAL**

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| Name      | DOC number      | **COMPLETED BY DEPARTMENT** |
|  Date of notification:        Date appeal filed:        Date response given:        |
| Facility      | Living unit      | Case number      |

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| **COMPLETED BY** **INCARCERATED INDIVIDUAL** |
| Property description    Reason for appeal:             Signature Date |

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| **RESPONSE** |
| Appeal decision: [ ]  Upheld [ ]  ReversedReason(s)                Superintendent/designee Signature Date |

**The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.**

Distribution: **ORIGINAL** - Property file **COPY** - Incarcerated individual