

Interstate Agreement on Detainers – Form 3

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*In the case of an Incarcerated Individual/Client's request to disposition under Article III, copies of the form should be attached to all copies of Form II. In the case of a request initiated by a prosecutor under Article IV, a copy of this form should be sent to the prosecutor upon receipt by the Warden of Form V. Copies of this form should be sent to all other prosecutors in the same state who have lodged detainers against the Incarcerated Individual/Client. A copy may be given to the Incarcerated Individual/Client.*  
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CERTIFICATE OF INCARCERATED INDIVIDUAL/CLIENT STATUS

RE: _____
(Incarcerated Individual/Client) (Number) (Institution) (Location)

The (custodial authority) hereby certifies:

1. The Incarcerated Individual/Client's commitment offense(s): _____
2. The term of commitment under which the incarcerated individual/client is being held: _____
3. Time already served: _____
4. Time remaining to be served on the sentence: _____
5. Good time earned/good time release date: _____
6. The date of parole eligibility of the Incarcerated Individual/Client : _____
7. The decisions of the state parole agency relating to the Incarcerated Individual/Client: (If additional space is needed, use reverse side.) _____
8. Maximum expiration date under present sentence: _____
9. Security level/special security requirements: _____
10. Detainers currently on file against this Incarcerated Individual/Client from your state:

_____ Warden _____ Date

CUSTODIAL AUTHORITY

Name/Title:	
Institution:	
Address:	
City/State	
Telephone:	