

**OKLAHOMA DEPARTMENT OF CORRECTIONS
INMATE PROPERTY INVENTORY FORM**

Duffel Bag Security Seal Number _____

Date _____ Facility _____

Inmate's DOC Number _____ Print Inmate's Name (Last) (First) (Middle Initial) _____

Reason for Inventory:

Reception _____ From _____ Release _____ Type _____
 Transfer _____ To _____ Extended Absence _____ To _____
 Escape _____ Segregation _____ Number of Boxes _____

Unauthorized/Excess Property To Be Mailed or Released To:

Name _____ Street _____
 City/State: _____ Zip: _____ Phone: _____

Description of Unauthorized/Excess Property: _____

Allowable Religious Objects/Symbols (as specified in OP-030112) _____

QUANTITY	CONDITION	MAKE	MODEL	COLOR	SERIAL NUMBER
Clock (1)					
Curling Iron, etc**(1)					
Electric Razor or Beard Trimmer (1)					
Fan (1)					
Hair Dryer (1)					
Hot Pot (1)					
MP3 Player (1)					
Radio or Clock Radio (1)					
Reading Light (1)					
Television (1)					
Watch (1)					

OTHER PROPERTY (LIST QUANTITY OF EACH)

- | | | |
|---|--|--|
| _____ Air Mattress (1) or mattress with integrated pillow (1) | _____ Hair Clip** (1) | _____ Sewing Kit (1) |
| _____ Arts/Crafts/Paper | _____ Hair Rollers** (20) | _____ Shower Shoes or Rubber/Plastic Clogs (1) |
| _____ Athletic Shoes (1) | _____ Headsets (2) | _____ Sleepwear** (2) |
| _____ Athletic Supporters (1-2) | _____ Ice Bucket | _____ Slip** (1) |
| _____ Barrettes**(5) | _____ Insulated Underwear (0-2) | _____ Soap Dish (1) |
| _____ Baseball/Stocking Cap (1-2) | _____ Laundry Bag (1) | _____ Socks (7) |
| _____ Bath Towels (3) | _____ Legal Material (1 cubic foot) | _____ Spoon (1) |
| _____ Bathrobe* (1) | _____ Linens (1 set) | _____ State Issue Scrub Pants (3-4) |
| _____ Bowl with Lid (1) | _____ Makeup Bag** (1) | _____ State Issue Scrub Shirt (3-4) |
| _____ Bras** (7) | _____ Medicine (KOP) i.e., Nitroglycerin, inhaler | _____ Sweatsuits (1-2) |
| _____ Briefs/Boxer Shorts*** (7) | _____ Necklace (1) | _____ T-Shirt, Commemorative (1) |
| _____ Brush/Comb/Pick (1-2) | _____ Nicotine Patches (1 Series) | _____ T-Shirt, State Issue (1) |
| _____ Can Opener (1) | _____ Inmate ID (1) | _____ T-Shirt,(5-7)Note: Maximum of 7 T-shirts allowed |
| _____ Coat (1) or (3)**** | _____ Panties ** (7) | _____ Toothbrush Cap (1) |
| _____ Combination Padlocks (2) | _____ Personal hygiene items/cosmetics (base, lipstick, mascara) | _____ Tweezers**(1) |
| _____ Denture Cup (1) | _____ Personal Jeans (5) | _____ Wallet (1) (community corrections only) |
| _____ Disposable Razor (1-5) | _____ Personal Shirts (5) | _____ Washcloths (3) |
| _____ Earrings** (2) | _____ Insulated Underwear (2 sets) | |
| _____ Electrical Power Bar (1) | _____ Photo Album (1) | |
| _____ Electronic Game (1) | _____ Picture Frame (8"x10") (1) | |
| _____ Emery Boards**(2) | _____ Pillow (1) | |
| _____ Fingernail Clippers (1) | _____ Plastic Coffee Cup (1) | |
| _____ Footwear (1) [if no athletic shoes] | _____ Plastic Drinking Cup (1) | |
| _____ Gym/Walking Shorts (1-2) | _____ Playing Cards (1 Set) | |
| _____ Hair Bands (5) | _____ Postage Stamps (20) | |
| | _____ Ring (1 plain wedding band—no stones) | |

*Females and special needs/geriatric only **Females only *** Males Only ****HWH Only

I understand that unauthorized property listed above must be mailed at my own expense within 30 days from today or that property must be picked up by the person I have indicated within 30 days. If the authorized person does not pick it up, I understand that the property will be donated or destroyed by the Oklahoma Department of Corrections.

I acknowledge that I am responsible for all personal property recorded on my property form to include additions and deletions as well as property issued by the state and that the facility will only accept responsibility for items inventoried and secured by facility staff.

I further understand that the property form, including any additions, is considered to be the complete accounting of the personal property in my possession. All other items will be considered contraband and disposed of in accordance with current procedures, OP-040109 entitled "Control of Contraband and Physical Evidence." I am subject to disciplinary action for possession of contraband.

Inmates who are transferred from one prison to another assume the risk of alleged damage to property the inmate packs and/or carries to a transportation vehicle. The agency assumes no liability for the welfare of any inmate's property packed by or placed in a transportation vehicle by any person other than facility staff.

I REALIZE THAT I BRING ANY (AUTHORIZED) PERSONAL PROPERTY INTO THE FACILITY AT MY OWN RISK.

