

OKLAHOMA DEPARTMENT OF CORRECTIONS

Date: _____

-CASE REPORT-

TO: _____ District Attorney _____ County _____
_____ District Judge _____ County _____
_____ Compact Administrator _____ State _____

CC: _____ District Supervisor _____ Restitution & Accounting _____ File

Name _____ DOC# _____ Race/Sex _____ DOB _____

Case# _____ Date Sentenced _____ Date Released _____

Crime _____

Sentence Length _____ Type Case _____ Date Discharge _____