

Requesting Agency:

PARDONS & PAROLES

CAM WARD
DIRECTOR

301 SOUTH RIPLEY STREET MONTGOMERY, AL 36104 PAROLES.ALABAMA.GOV | 334.242.8700

Electronic Monitoring Data Request

Requester's Name:

Offender's Name:		Offender's DOB:	
Reason for	Request. (Provide details below	J	
List specific	dates and times you are reques	ting Electronic Monitoring dat	a for:
DATE	START TIME	END TIME	
	□ AM □ PM	☐ AM ☐ PM	-
	□ AM □ PM	□ AM □ PM	-
	☐ AM ☐ PM	□ AM □ PM	
	□ AM □ PM □ AM □ PM	☐ AM ☐ PM	
conducted the Board ι	by the requesting agency. The reupon completion. The requesting	equesting agency agrees to progressing agency further agrees to full	y related to, an active investigation being ovide the results of the related investigation to y cooperate in any parole violation proceeding any other evidence necessary for parole court
 Requester's	s Signature	Title	
 Date			