ABSTRACT

SUPERVISING OFFICER: _		REGION:	PHONE NO:
TO:		ORI#:	
RE:	AKA:		
ODOC NO:	DOB:	RACE/GENDER:	
			epartment of Corrections on, for the following crime(s)
CRF NUMBER(S)	COUNT	Υ	CRIME(S)
Parolee paroled on was iss			of Corrections Warrant No.
7	HIS IS A NO-BOND	WARRANT.	
			n accordance with 22 O.S. § hapter 209-Extradition), will
Please advise if there are a numbers.	any local charge(s) p	pending and your	address, telephone, and fax

THANK YOU

DOC 050103A (R 01/22)