



Madison County Detention Facility
REQUEST FOR THE RELEASE OF FUNDS

The Madison County Detention Facility understands that on occasion those persons committed to the facility may have a need to release funds being held in their name in a commissary fund. As such, inmates being held in the Madison County Detention Facility may submit this form to facilitate the release of held funds. This action is authorized one time and within the first 60 days of detention.

The inmate whose name appears at the bottom of this form is requesting the release of funds currently being held in the inmate's commissary account. The inmate's signature indicates that (s)he has read and understands the conditions outlined below concerning the release of these funds.

1. I understand that once I have released funds held in my name I will not be considered indigent for the purpose of receipt of items normally reserved for indigent persons until such time that my commissary balance is zero for 30 days.
2. I understand that this form is valid for 5 business days from the date of my signature.
3. I understand that the funds held in my account will not be available for my use until the release of funds is complete or the expiration of 5 business days from the date of my signature.
4. The person I have designated below must sign for the released funds at the Kimble's Commissary office between the hours of 4:00 and 6:00 pm Monday through Friday excluding holidays.
5. It is my responsibility to notify the person I have designated below of the days and times the funds must be signed for. (4 pm – 6 pm Mon-Fri excluding holidays)
6. It is my responsibility to notify the person I have designated below that they must present a government issued photo identification card.

Amount to be released: _____ Dollars _____ Cents

Inmate's Printed Name

Designated Recipient Name

Inmate's I.D. Number

Recipient Signature

Date

Inmate's Signature

Date

Witnessing Officer's Signature