

COURT OF APPEALS OF GEORGIA

RETURN NOTICE

August 25, 2015

To: Mr. Rodney Jean Hopkins, GDC1000724832 G-2/142T, Calhoun State Prison, Post Office Box 249, Morgan, Georgia 39866

Case Number: _____ Lower Court: _____ County Superior Court

Court of Appeals Case Number and Style: _____

Your document(s) is (are) being returned for the following reason(s).

- There is no case pending in the Court of Appeals of Georgia under your name. I am returning all of your documents to you.**
- A Notice of Appeal is filed with the clerk of the trial court and not with the Court of Appeals of Georgia. See OCGA §5-6-37.** Once the trial court clerk has received and filed the Notice of Appeal, the trial court clerk will prepare a copy of the record and transcripts as designated by the Notice of Appeal and transmit them to this Court. Once the Notice of Appeal is docketed in the Court of Appeals of Georgia, a Docketing Notice with the Briefing Schedule and other important information is mailed to counsel for the parties or directly to the parties, if the parties are representing themselves. You do not need to provide this Court with a copy of the Notice of Appeal you filed with the superior court.
- The Notice of Appeal must include a proper Certificate of Service.** A Certificate of Service must show service to the opposing counsel and contain the counsel's full name and complete mailing address. The opposing counsel must actually be served with a copy of your filing.
- An Application for Writ of Habeas Corpus should be filed in the superior court of the county in which you claim you are illegally detained.** An appeal from a denial of an Application for Writ of Habeas Corpus is to the Supreme Court and not the Court of Appeals.
- An Application for Writ of Mandamus should be filed in the superior court of the county official whose conduct you intend to mandate.** An appeal from a denial of an Application for Writ of Mandamus is to the Supreme Court and not the Court of Appeals.
- Your appeal was disposed by opinion (order) on _____.** The Court of Appeals _____ . The remittitur issued on _____ divesting this Court of jurisdiction. The case decision is therefore final.
- Your mailing/documents indicate that you intended to file your papers in another court rather than the Court of Appeals of Georgia.** The address of the Clerk of the _____ is:
- If an attorney has been appointed for you and you are concerned with the representation provided by that attorney, you should address that issue to the trial court.** As long as you are represented by an attorney, you cannot file pleadings on your own behalf. Your attorney must file a Motion to Withdraw as Counsel and it must be granted, before you can file your own pleadings in this Court.
- A request for an out-of-time appeal should be made to the trial court from which you are appealing.** If your motion is denied by the trial court, you can file an appeal of that decision by filing a Notice of Appeal with the clerk of the superior court.

To Business Case #

Office

751495

FBI# 692733NC1

SAC# 425-519610

Rodney Gene Hopkins

Gdc# 1000724832

SAC# 425-519610

Rodney Jean Hopkins

Gdc# 1001257359

I Need Account Statement
off Both account please
to see how much money I
have or owe the state.

Thank you,

RECEIVED
AUG 17 2015
BUSINESS OFFICE

60 Day Account Statement

HOPKINS, RODNEY

G-2

Printed By:

COOPER, DANIEL

GDC ID: 1000724832

Spendable Amount	Reserved Amount	Receipts On Hold	Funds Balance	Obligations/Court Charges
\$0.00	\$10.00	\$0.00	\$10.00	\$6,771.05

RECEIPTS

No receipts for this offender in the past 60 days.

WITHDRAWALS

No withdrawals for this offender in the past 60 days.

OBLIGATIONS

Paid Status: P = Partially paid; Y = Paid in full; R = Reversed; W = Written off

60 Day Account Statement

HOPKINS, RODNEY

Printed By:

COOPER, DANIEL

GDC ID: 1000724832

Date	Location Incurred	Obligation Type	Payable To	Obligation Detail	Amount	Paid
08/06/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19710652. 8/6/15-2N	\$0.98	
08/05/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19707174. 8/5/15-13L	\$6.37	
08/01/2015	CENTRAL ACCT-OFFENDER TRUST	MONTHLY PROCESSING FEE	GEORGIA DEPARTMENT OF CORRECTIONS	Monthly Processing Fee for 08/2015	\$1.00	
07/31/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19599394. INDIGENT SUPPLIES: 7/31/2015	\$0.95	
07/30/2015	CENTRAL ACCT-OFFENDER TRUST	MEDICAL CO-PAY	GEORGIA DEPARTMENT OF CORRECTIONS	RECORD ID = 19596293. 7/29/15-MED	\$5.00	
07/29/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19594392. 7/29/15-1L	\$0.49	
07/28/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19592032. 7/28/15-2N	\$0.98	
07/24/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19585604. INDIGENT LOAN 7/23/2015	\$0.63	
07/20/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19572765. 07/20/2015 INDIGENT SUPPLIES: 07/09/2015	\$1.15	
07/20/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19572740. 07/20/2015 INDIGENT SUPPLIES: 07/06/2015	\$1.15	
07/09/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19555722. 07/09/2015 1N	\$0.49	
07/06/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19546987. 07/06/2015 1N/1L	\$0.98	
07/02/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19542814. 7/2/2015 1L	\$0.49	
07/01/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19541823. 07/01/2015 INDIGENT SUPPLIES: 06/15/2015	\$0.60	
07/01/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19541659. 07/01/2015 1N/1L	\$0.98	
07/01/2015	CENTRAL ACCT-OFFENDER TRUST	MONTHLY PROCESSING FEE	GEORGIA DEPARTMENT OF CORRECTIONS	Monthly Processing Fee for 07/2015	\$1.00	W
06/26/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19432346. 6/26/15 1L	\$0.49	
06/26/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19432345. 6/26/15 2L	\$0.98	
06/24/2015	CENTRAL ACCT-OFFENDER TRUST	MEDICAL CO-PAY	GEORGIA DEPARTMENT OF CORRECTIONS	RECORD ID = 19427721. 6/23/15-DEN	\$5.00	
06/23/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19423502. 06/23/2015 INDIGENT SUPPLIES: 06/18/2015	\$1.05	
06/23/2015	CENTRAL ACCT-OFFENDER TRUST	INDIGENT LOAN	CALHOUN STATE PRISON	RECORD ID = 19423312. 06/23/2015 INDIGENT SUPPLIES: 06/15/2015	\$0.83	

COURT CHARGES

No court charges for this offender in the past 60 days.

COURT CHARGE MODIFICATIONS

No court charges modifications for this offender in the past 60 days.

REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
(10/6/08)

(2) NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(1) LEGAL POSTAGE (Maximum -- five)
AMOUNT

Return to Sender

RECEIVED
AUG 17 2015

() SPECIAL MAILING (Maximum -- one)

BUSINESS OFFICE

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1001257359 6-2
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 8-14-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF

TO BE COMPLETED

NON-LEGAL POSTAGE

DATE

No case

LEGAL POSTAGE US\$

DATE

Nov-1

AMOUNT

SPECIAL MAILING:

DATE

MAILED TO

AMOUNT

TOTAL POSTAGE USED:

SIGNATURE OF MAIL ROOM STAFF

XC: Mail Room

Bookkeeping

Inmate/Probationer File

RETENTION SCHEDULE:

Upon completion, this form will be placed in the inmate/probationer case history file.

REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
(10/6/08)

(1) NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

RECEIVED

() LEGAL POSTAGE (Maximum -- five)
AMOUNT

AUG 17 2010

() SPECIAL MAILING (Maximum -- one)

BUSINESS OFFICE

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Jean Hopkins 1001257359 G-2-142 T
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Jean Hopkins 8-15-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>8/17/10</u>	<u>mail</u>	<u>49</u>
_____	_____	_____
_____	_____	_____

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT
_____	_____	_____

TOTAL POSTAGE USED: 49 scu
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE: _____
_____ placed in the inmate/probationer case history file.

REQUEST FOR INDIGENT POSTAGE

Attachment 3
RECEIVED
SOP IIB04-0001

JUL 26 2:15 (10/6/08)

BUSINESS OFFICE

() NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(2) LEGAL POSTAGE (Maximum -- five)
AMOUNT

Need One Address Only
OD ENvelope

() SPECIAL MAILING (Maximum -- one)

CANNOT MAIL MULTIPLE LOCATIONS

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

G-2

Rodney Hopkins
INMATE/PROBATIONER NAME

1000724832
GDC NUMBER

J-1-208
DORM

Rodney Hopkins
INMATE/PROBATIONER SIGNATURE

7-27-15
DATE

SIGNATURE OF VERIFYING STAFF:

DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT

TOTAL POSTAGE USED: _____

SIGNATURE OF MAIL ROOM STAFF.

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE:

Upon completion, this form will be placed in the inmate/probationer case history file.

REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
RECEIVED
(10/6/08) AUG 13 2015

BUSINESS OFFICE

() NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

3 (~~5~~) LEGAL POSTAGE (Maximum -- five)
AMOUNT

2 Letters are NON LEGAL
Have INVALID NAMES
Have EXTRANEOUS WRITING

() SPECIAL MAILING (Maximum -- one)

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1001257359 G-2
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 8-13-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>8/13/15</u>	<u>COURT OF APPEALS</u>	<u>1.47</u>
_____	_____	_____

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT
_____	_____	_____

TOTAL POSTAGE USED: 1.47

[Signature]
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE:

This form will be placed in the inmate/probationer case history file.

REQUEST FOR INDIGENT POSTAGE

(2)
(~~1~~)
AMOUNT

NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)

() LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

RECEIVED
AUG 06 2015
BUSINESS OFFICE

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832 G-2-142 TOP
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 8-5-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>8/6/15</u>	<u>MANTU</u>	<u>98</u>
_____	_____	_____
_____	_____	_____

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT
_____	_____	_____

TOTAL POSTAGE USED: 98 _____
SIGNATURE OF MAIL ROOM STAFF: [Signature]

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE:
Upon completion, this form will be placed in the inmate/probationer case history file.

REQUEST FOR INDIGENT POSTAGE

(1) NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

() LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

RECEIVED
JUL 09 REC'D

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832 G-2
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 7-8-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF

DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>7/9</u>	<u>Dorcoe Charles Martin</u>	<u>49</u>

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT

TOTAL POSTAGE USED: 49 J. Burke
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
(10/6/08)

(1) NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(1) LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

RECEIVED
JUL 06 REC'D

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832 JFN 208
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 7-2-15
INMATE/PROBATIONER SIGNATURE DATE

Gain Warden 7-2-15
SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>7/16</u>	<u>Box Jasmine Stone</u>	<u>49</u>

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>7/16</u>	<u>Law Office/Timothy Lan</u>	<u>49</u>

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT

TOTAL POSTAGE USED: 98 S. Burkes
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE:

Upon completion, this form will be placed in the inmate/probationer case history file.

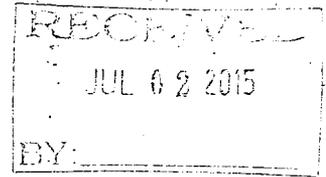
REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
(10/6/08)

() NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(1) LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)



I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832 6-2
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 7-1-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>7-2-15</u>	<u>Circulation Manager</u>	<u>49</u>

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT

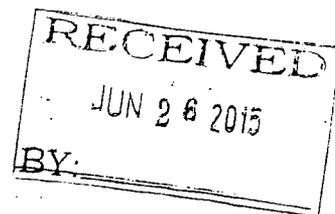
TOTAL POSTAGE USED: 49 Dian
SIGNATURE OF MAIL ROOMS STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE:
Upon completion, this form will be placed in the inmate/probationer case history file.

REQUEST FOR INDIGENT POSTAGE

- () NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT
- () LEGAL POSTAGE (Maximum -- five) 2 stamps
AMOUNT
- () SPECIAL MAILING (Maximum -- one)



I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832 G-2-137-B
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 6-25-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>6-26-15</u>	<u>Law offices Timothy Lam</u>	<u>.98</u>

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT

TOTAL POSTAGE USED: .98 [Signature]
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
(10/6/08)

() NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(/) LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

RECEIVED
JUN 26 2015
BY: _____

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832 G-2-137-B
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 6-25-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>6-26-15</u>	<u>Law Offices Timothy Lam</u>	<u>.49</u>
_____	_____	_____
_____	_____	_____

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT
_____	_____	_____

TOTAL POSTAGE USED: .49 _____
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

RETENTION SCHEDULE:

REQUEST FOR INDIGENT POSTAGE

(0) NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(~~5~~) LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

*It may contain legal material
But it's not legal
This not going to a lawyer
therefore it's not legal*

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Harkins 1000724832 J-1-208
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Harkins
INMATE/PROBATIONER SIGNATURE

DATE

SIGNATURE OF VERIFYING STAFF

DATE

RECEIVED
JUN 10 REC'D

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>6/10</u>	<u>Charlie & Debbie Martin</u>	<u>.49</u>
_____	_____	_____
_____	_____	_____

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT
_____	_____	_____

TOTAL POSTAGE USED: .49 J. Burkes
SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

REQUEST FOR INDIGENT POSTAGE

- (3) NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT
- () LEGAL POSTAGE (Maximum -- five)
AMOUNT
- () SPECIAL MAILING (Maximum -- one)

RECEIVED
JUN 16 REC'D

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Hopkins 1000724832/12938726-2
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Hopkins 6-13-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY INMATE

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
<u>6/16</u>	<u>Van Robins / Brandi Cauty</u>	<u>49</u>
_____	<u>Allie Pruett</u>	<u>49</u>
_____	<u>nor Coleman</u>	<u>49</u>

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT
_____	_____	_____
_____	_____	_____

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT
_____	_____	_____

TOTAL POSTAGE USED: 1.47

J. Burkes
SIGNATURE OF MAIL ROOM STAFF

XC: Mail Room
Bookkeeping
Inmate/Probationer File

REQUEST FOR INDIGENT POSTAGE

() NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(2) LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

Your name on [redacted] letter and form does not match. Letter shows no indication that letter is legal.

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds. *Letter is legal.*

Rodney Hopkins 1000724832 G-2-137B
INMATE/PROBATIONER NAME GDC NUMBER DORM

RBH 6-16-15
INMATE/PROBATIONER SIGNATURE DATE

Garin Warden 6-16-15
SIGNATURE OF VERIFYING STAFF DATE

TO BE COMPLETED BY MAIL ROOM STAFF

NON-LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

RECEIVED
JUN 16 2015
MAIL ROOM

LEGAL POSTAGE USED:

DATE	MAILED TO	AMOUNT

SPECIAL MAILING:

DATE	MAILED TO	AMOUNT

TOTAL POSTAGE USED: _____

SIGNATURE OF MAIL ROOM STAFF

- XC: Mail Room
- Bookkeeping
- Inmate/Probationer File

This is not
Legal mail

REQUEST FOR INDIGENT POSTAGE

Attachment 3
SOP IIB04-0001
(10/6/08)

() NON-LEGAL FIRST CLASS POSTAGE (Maximum -- three)
AMOUNT

(2) LEGAL POSTAGE (Maximum -- five)
AMOUNT

() SPECIAL MAILING (Maximum -- one)

I don't know
who name and
unit# that's being
used but it don't
work!

I fully understand that the funds for the purchase of Indigent Postage will be a loan from the Inmate Benefit Fund. If I receive any funds to my account, I will be required to reimburse the Inmate Benefit Fund in accordance with SOP IIB04-0001, Inmate Mail and Receipt of Funds.

Rodney Gene Martin 1001257359 5-1-208
INMATE/PROBATIONER NAME GDC NUMBER DORM

Rodney Gene Martin 5-27-15
INMATE/PROBATIONER SIGNATURE DATE

SIGNATURE OF VERIFYING STAFF

DATE

TO BE COMPLETED BY MAIL ROOM STAFF

IS:
Your name is
Rodney Gene
Stapkins -
AMOUNT \$ 1000.24832

NON-LEGAL POSTAGE USED:

[REDACTED]

LEGAL POSTAGE USED:

[REDACTED]

DATE

AMOUNT

SPECIAL MAILING:

DATE

MAILED TO

AMOUNT

TOTAL POSTAGE USED: _____

SIGNATURE OF MAIL ROOM STAFF

XC: Mail Room
Bookkeeping
Inmate/Probationer File

This name and unit# does
not ~~work~~ register here
at Calman State Prison

RETENTION SCHEDULE:

Upon completion, this form will be placed in the inmate/probationer case history file.