THE STATE of ALASKA
GOVERNOR BILL WALKER

Department of Corrections

DIVISION OF_____

MEMORANDUM

Date: _____

To: Ronald F Taylor, Acting Commissioner

Through: Director of Institutions
or
Director of Probation and Parole
or
Director of Administrative Services

From [Superintendent]
[Probation Supervisor] _____
[Manager]

[Facility/Office/Section] _____

[Address]
[City, State Zip] _____

SUBJECT: Badge Retirement _____ Lost Badge _____

I would like to retire
__Correctional Officer __Probation Officer ___ Other __ Badge Number _____

for retiring _____ _____ or _____ _____
(rank) (name) (title) (name)

from (facility/location/section)_____

The badge will be mounted and presented upon retirement. A check for **$81.00** is attached and will be forwarded to the Budget & Finance Office for deposit. I understand that retired badges must be mounted or otherwise rendered unusable as a badge of authority.

Thank you for your attention to this matter.

Cc: Training Academy