DEPARTMENT OF CORRECTIONS

Non-Criminal Commitment To Jail Custody and Receipt for Prisoner

1. Subject's Name (Last, First, M.I.)	2. Date of Birth		3. Date of Commitment	
4. AKA, Also known as	5. OTIS Number		6. Institution	
7. Committing Agency	8. Location of Pick-up			
Commitment Record				
9. I certify that this person's home, an approved public treatment facility, an approved private treatment				
facility, or another appropriate health facility is not available and therefore by authority of AS: 47.37.170 and SLA 1976 CH. 101 Commit this person to the custody of the Department of Corrections.				
Signature of Committing Officer: Date & Time in:				
10. Committing Officer's Name (Printed)	11. Badge/I.D. #	12. Bookir	ng Officer Signature	
,	and a subjective of		ig amour eigname	
Release Information				
Release Information				
13. ☐ Transferred to Treatment Facility		☐ Held for Twelve Hours		
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☐ No Longer Intoxicated		☐ Released to Responsible Adult		
14. Signature of Person Receiving Subject		15. Agency		
16. Signature of Releasing Officer		17. 🗅	17. Date & Time Out	

Distribution:

Original to File Copy to Committing Officer or Official

Department of Corrections Form 811.01D Rev. 12/02