Minnesota Department of Corrections
Restrictive Housing Property Pick-Up Form

Incarcerated Person: _____ OID#: _____ Date of Intake: _____

From Unit: _____ Room #: _____

The following is a list of items that staff may pick up from your personal property and are allowed in restrictive housing. This is a one-time only request.

Authorized Items	Items Received	Comments
Phone Number/Address Book		
Shower Shoes		
Wedding ring with no stones, plain band		
Comb/Pick/Brush (1 only)		
Prepaid Envelope (10 only)		
Prescription Eyewear (1 pair)		
Authorized Prosthetics		
Religious Item (1 only)		
Legal Papers (5-pound limit)		
Ear Plugs (where authorized)		
Dentures		

Give a brief description of where property is located: _____

_____

_____

_____

Completed by staff: _____ Date: _____

Staff Printed Name: _____Date:_____

Property received by Incarcerated Person: _____ Date: _____

Distribution:
Restrictive Housing file
Incarcerated Person
Property Department