

PRISONER REVIEW BOARD
JAYHAWK WALK
714 SW JACKSON, SUITE 300
TOPEKA, KANSAS 66603-3722
785-746-7516

**NOTICE OF CLEMENCY APPLICATION
SENTENCING FORM**

Name & Number: _____

Pursuant to K.S.A. 22-3701, this will serve notice that the above-named person has made application for Executive Clemency. The application will be reviewed in the near future by the Prisoner Review Board, as provided by statute, and the Prisoner Review Board will submit its report to the Governor for consideration and decision. **The sentence record in this case is as follows:**

Date	County	Case No.	Sentence	Offense
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Release Date:(when released from jail/prison custody): _____
Release Date without Parole (sentence discharge date): _____

Reasons for seeking Clemency: If resident prefers not to disclose reason to facility officials, place written information in a sealed envelope and give to facility **Clemency Clerk**. This will be sent to the designated officials for comments.

Your comments and recommendations are solicited by the Prisoner Review Board as significant factors in examining this application. They may be made in the space below or by separate letter, and should be forwarded directly to the **Prisoner Review Board**. Your response will then be incorporated in the Prisoner Review Board's report submitted to the Governor. Please send your reply within the next 10 days to:

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This notice prepared by: Name and Title (print or type): _____
Address (or facility name): _____
Signature: _____

REPLY:

☐ Favor Clemency ☐ No Objection ☐ Against Clemency ☐ No Recommendation

Comments:

☐ Judge Name & Title (Print or Type) _____
☐ District Attorney
Signature _____
Address _____