



# Inmate Release Identification

*Prisoner must take a copy of this form to the DMV, with photo ID, for AK photo ID*  
**\*\*\*\*\*Do not return to the institution for copies or faxes.\*\*\*\*\***

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Full Middle Name:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Previous Names (maiden name/court ordered name change/alias/nickname/marriage)** \_\_\_\_\_

**Residence Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**City/State of Birth:** \_\_\_\_\_ **Country:** \_\_\_\_\_

----PHOTO----	Other Information
	<b>DOB:</b> _____
	<b>Gender:</b> _____
	<b>Weight:</b> _____
	<b>Height:</b> _____
	<b>Hair Color:</b> _____
	<b>Eye Color:</b> _____

**Inmate Signature:** \_\_\_\_\_

**Releasing Official Signature:** \_\_\_\_\_ **Print**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Submit This Form to: [doc.jco.admin.services.payables@alaska.gov](mailto:doc.jco.admin.services.payables@alaska.gov)**

**Date:** \_\_\_/\_\_\_/\_\_\_ **Valid for 30 days from issue date with prison ID card for dup/renewal of existing ID.**

- **Submit billings through the IRIS Financial System using the ITI process to:**
  - o Department of Corrections / Juneau Central Office,
  - o ITA will process under ID # 310233
    - o (please attach this form to the ITI transaction)
  - o For billing/payment questions please contact: Accountant V @ 907-465-8168
- **Identify the type of state identification issued:**
  - o State ID only / State ID with Alcohol Restrictions applied