



**ACKNOWLEDGMENT OF DOC 590.200
MARRIAGES AND STATE REGISTERED
DOMESTIC PARTNERSHIPS IN PRISONS**

Name

DOC number

We affirm that we have read and fully understand DOC 590.200 Marriages and State Registered Domestic Partnerships in Prisons, and followed the requirements outlined in the policy.

We understand that if DOC 590.200 Marriages and State Registered Domestic Partnerships in Prisons is not fully adhered to, we will not be eligible to participate in programs and privileges that the Department offers for married individuals/state registered domestic partners (e.g., Extended Family Visits).

Incarcerated individual

Signature

Date

Intended spouse/
State Registered Domestic Partner

Signature

Date

Intended spouse/State Registered Domestic Partner: Please retain a copy of all items submitted for your records.

CASE MANAGER

Name

Signature

Date

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

Distribution: **ORIGINAL** - Imaging system **COPY** - Case manager