ATTACHMENT - F

CITY OF NEW YORK - DEPARTMENT OF CORRECTION

OFFICE OF CONSTITUENT AND GRIEVANCE SERVICES

TRANSMITTAL TO CENTRAL OFFICE REVIEW COMMITTEE FORM

Form.: 7105R
Eff.:9/14/18
Ref.: Dir.: 3376R-A

Inmate's Name:	Book & Case #:	NYSID #:
Grievance Reference #:	Transmittal Date:	Facility:
Title of Grievance:	Category:	

Grievance Description:

OCGS Disposition:

Division Chief's Disposition:

OCGS Director Signature:	Date Prepared: