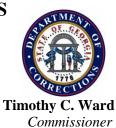
SOP 227.02 Attachment 9 5/10/19



Brian P. Kemp Governor

GEORGIA DEPARTMENT OF CORRECTIONS

STATE OFFICES SOUTH AT TIFT COLLEGE Offices of Professional Standards P.O. Box 1529 Forsyth, Ga 31029



CENTRAL OFFICE APPEAL RESPONSE

Date:		
Offender's Name: GDC#:	Grievance Number: Facility:	
Response to Appeal:		
Commissioner's Designee	Date	

I ACKNOWLEDGE RECEIPT OF THE ABOVE RESPONSE ON THIS DATE

Offender's Signature

Date

Retention Schedule: Upon Completion, this form shall be maintained with the grievance packet for four (4) years and then destroyed.