NOTICE OF PROPOSED RULE

DEPARTMENT OF CORRECTIONS

RULE NO.: 33-203.201

RULE TITLE: Inmate Trust Fund

PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to remove the requirement that Form DC2-363, Money Order Deposit Form For Inmate Deposits not be photocopied and revise Form DC2-363, Money Order Deposit Form For Inmate Deposits, to include additional information on ways to send money, to include

additional contact information, and to make some formatting changes.

SUMMARY: Rulemaking was initiated to allow Form DC2-363 to be photocopied and to revise Form DC2-363, to include additional ways to send money and additional contact information.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The agency has determined that this rule will not have an adverse impact on small business and is not expected to directly or indirectly increase

regulatory costs more than \$200,000 within a year of taking effect. A SERC has not been prepared by the agency. The agency has determined that the proposed rule is not expected to require legislative ratification based on the

statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and

described herein: upon review of the proposed changes to these rules and incorporated forms, the department has

determined that the amendments will not exceed any one of the economic analysis criteria in a SERC as set forth in

s. 120.541(2)(a), FS. Any person who wishes to provide information regarding the statement of estimated regulatory

costs or to provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this

notice.

RULEMAKING AUTHORITY: 944.09, 944.516, 945.091, 945.215 FS

LAW IMPLEMENTED: 17.61, 20.315(12), 57.085, 717.113, 944.09, 944.516, 945.091, 945.215 FS

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED

AND ANNOUNCED IN THE FAR. THE PERSON TO BE CONTACTED REGARDING THE PROPOSED

RULE IS: LaDawna Fleckenstein, 501 South Calhoun Street, Tallahassee, Florida 32399-2500.

THE FULL TEXT OF THE PROPOSED RULE IS:

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33-203.201 Inmate Trust Fund.

- (1) No change.
- (2)(a) All monies (cashiers checks, money orders, or certified bank drafts only; no cash or personal checks allowed) shall be mailed pursuant to the instructions provided on Form DC2-363, Money Order Deposit Form For Inmate Deposits, and shall be initially deposited into the Inmate Trust Fund. Form DC2-363 is hereby incorporated by reference. This form may be obtained from any institution, facility, the vendor listed on Form DC2-363, the Bureau of Finance and Accounting, Inmate Trust Fund Section, Centerville Station, P. O. Box 12100, Tallahassee, Florida 32317-2100 or the Forms Control Administrator, Office of Research, Planning and Support Services, 501 South Calhoun Street, Tallahassee, Florida 32399-2500, http://www.flrules.org/Gateway/reference.asp?No=Ref-<u>02765</u>. The effective date of this form is _____ 7-13. Funds must be mailed with the completed Form DC2-363, Money Order Deposit Form For Inmate Deposits, and made payable to vendor listed on Form DC2-363 and include the inmate's name and DC number. Funds will become available for the inmate's use within ten working days after receipt by the vendor listed on Form DC2-363. Every effort shall be made to have funds available sooner. Any money order, cashiers check, or certified bank draft in the amount of \$400 or higher posted to an inmate's account will have a ten day hold placed on the funds. After ten days the funds will be available for the inmate's use. Deposits mailed to institutional or other Department addresses including the Bureau of Finance and Accounting, Inmate Trust Fund Section will be returned to the sender. Do not include any letters or notes with your payments, these will be discarded.
 - (b) No change.
- (c) Deposits sent by mail are processed using an advanced high-speed processing machine which requires the use of the deposit form; the form should not be photocopied. Attempts will be made to process deposits sent without the accompanying form, but the absence of the form could cause a delay of up to 30 days to process. If staff are unable to determine to which inmate the money is being sent, the money will be returned to the sender with a request for additional information necessary to process the deposit. If staff are unable to determine to which inmate the money is being sent and are unable to return the money because the sender did not provide a valid return address, the money will be held in a clearing account until the sender or receiving inmate is identified. If the inmate remains unidentified for 1 year the funds shall escheat to the state as unclaimed funds held by a government agency in accordance with Section 717.113. F.S.

- (d) No change.
- (3) (12) No change.

Rulemaking Authority 944.09, 944.516, 945.091, 945.215 FS. Law Implemented 17.61, 20.315(12), 57.085, 717.113, 944.09, 944.516, 945.091, 945.215 FS. History–New 1-27-86, Amended 7-16-89, 5-1-90, 3-2-92, 6-2-92, 8-25-92, 10-19-92, 4-13-93, 5-28-96, 6-15-98, Formerly 33-3.018, Amended 5-7-00, 7-13-03, 10-20-03, 1-23-05, 5-12-05, 11-12-06, 9-2-08, 5-26-09, 7-1-13, ______.

NAME OF PERSON ORIGINATING PROPOSED RULE: Michael Deariso, Bureau Chief of Finance and Accouting

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Michael D. Crews, Secretary DATE PROPOSED RULE APPROVED BY AGENCY HEAD: January 6, 2014

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: November 11, 2013