**HELP US WIN SENTENCING REFORM!**

**ARIZONA PRISONER INFORMATION REQUEST**

FAMM is a nonprofit organization that is working in Arizona to reform the state’s mandatory minimum sentencing laws. To educate members of the media, the public, and the Arizona Legislature about the need for sentencing reform, FAMM will be collecting and sharing real stories of people serving long, unjust mandatory minimum drug sentences. Sharing your stories helps us show the human costs of mandatory minimum sentencing laws and helps us convince lawmakers to change those laws.

Right now, we are looking for stories of **Arizona prisoners serving mandatory minimum sentences for drug offenses only** (i.e., possession, sale, trafficking, importation of drugs). If your loved one in prison is not currently incarcerated for a drug offense, please do not fill out this form.

Unfortunately, we cannot respond to every person who writes to us. We will respond and ask for more information if we think your loved one’s story is one that can help us advocate for drug sentencing reforms in Arizona. Thank you for sharing your stories with us!

**All forms should be filled out completely and mailed to:**

**FAMM, Attn: Arizona**

**1100 H St. NW, Suite 1000**

**Washington, DC 20005**

**Incarcerated Person Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Inmate Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current offense(s) (please list all):**

**Drug type and amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Year sentenced: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age at sentencing: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sentence length (in years): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Was the sentence a mandatory minimum sentence?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Release date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current prison: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Incarcerated Person’s prior convictions (please list all):**

**Short description of the Incarcerated Person’s crime and role in it (For example: “My grandson sold small amounts of meth for three months with a friend, and counted money from sales”):**

**Did the judge say anything about the sentence? (For example: “I wish I did not have to give you this much prison time.”):**

**Incarcerated Person Home town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Thank you for sharing your loved one’s story with FAMM!***

**LEGAL DISCLAIMER:**

**FAMM cannot profile every case it receives and, if we do profile a case, we cannot guarantee that it will receive media attention. FAMM also cannot provide you, your family, or any prisoner with legal advice, referrals, or representation. If you or your loved one in prison have legal questions, you should contact a lawyer in Arizona.**