

## **CITY OF NEW YORK - DEPARTMENT OF CORRECTION**

## OFFICE OF CONSTITUENT AND GRIEVANCE SERVICES

CORRECTION
Dr. Her

Form.: 7103R

COMMANDING	GOFFICER S DISPOSITION FORM	Eff.:9/14/18 Ref.: Dir. 3376R-A	On Light	
Inmate's Name:	Book & Case #:	NYSID #:		
Grievance Reference #:	Date Filed:	Facility:	Facility:	
Title of Grievance:	Category:			
	COMMANDING OFFICER'S DISPOSITION	N		
The OCGS disposition is:	ONCERNS. REQUESTS. RESOLUT	TONS		
Accepted	Rejected	N		
Commanding Officer's Disposition and	Comments:			
	OCGS			
		<u> </u>		
Commanding Officer's Signature:	F1 2000 A	Date:		
	NOTICE TO INMATE	•		
Check t	he appropr <mark>iate</mark> box <mark>below</mark> and provide you	ur signature.		
You have (2) <u>tw</u>	o business days from receipt of this notic	e to file your appeal.		
I accept the Commanding Officer	s disposition and do not wish to appeal to the	e Division Chief.		
I reject the Commanding Officer's	disposition and wish to appeal to the Division	n Chief.		
	Failure to sign the form will forgo your right	to appeal.		
Inmate's Signature:		Date:		
Grievance Coordinator/Officer Signature	): :	Date:		