



CHICAGO POLICE DEPARTMENT
3510 South Michigan Avenue
Chicago, Illinois 60653

FORMAL WAIVER OF EXTRADITION CERTIFICATION

DATE	
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This document certifies the person, now being surrendered to our custody, are one and the same as the person who duly signed the Formal Waiver of Extradition Certification document, and that the document presented with this prisoner is a true and accurate copy of the document so signed, which bears the original signature of the subject being surrendered to the custody of the agents of the State of Illinois for return to that authority.

FUGITIVE	
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COUNTY	
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STATE	
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Officer of Asylum Agency _____
(Print Name) hereby certify that the copy of the Formal Waiver of Extradition Certification provided, is a true and accurate copy of the document executed before the court of this county, on a date indicated on said document, was, in our court, signed by:

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The original document to remain in the custody of the Asylum Agency.

Signature of Asylum Agency Officer: _____

Title: _____

RETAIN THIS DOCUMENT

RETURN: Original - Room 11C50 Criminal Courts Building
Copy - Extradition Office