



PRISONER REVIEW BOARD  
JAYHAWK WALK  
714 SW JACKSON, SUITE 300  
TOPEKA, KANSAS 66603-3722  
(785) 296-4524

**APPLICATION FOR EXECUTIVE CLEMENCY**

Under K.S.A. 22-3701, the Prisoner Review Board is responsible for processing and reviewing applications for Executive Clemency. The law requires that the sentencing court and prosecuting attorney be notified of the application, and that a notice be published in the official county paper. The Prisoner Review Board then reviews pertinent records, reports, and other available information. If a personal interview with the applicant is needed, the applicant will be notified. Following review, the **Prisoner Review Board** submits its report to the **Governor**, who makes the final decision in all clemency matters. Applicants must supply the information requested below.

**Name & KDOC Number:** \_\_\_\_\_

Did you plead guilty? \_\_\_\_\_ Did you appeal? \_\_\_\_\_ If so, state decision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did you file motions under K.S.A. 60-1507, or habeas corpus actions in either state or federal court concerning your conviction? \_\_\_\_\_ If so, state decision : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reasons for seeking Clemency** (use extra page if needed). Note: If you prefer not to disclose your reasons to facility officials, please put information in a sealed envelope, labeled Prisoner Review Board, and give this along with your application, to the facility **Clemency Clerk**.

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TO THE GOVERNOR OF THE STATE OF KANSAS:

I hereby make application for Executive Clemency for the reasons above, and affirm that the information contained in my application is true and correct to the best of my knowledge and belief.

/ / \_\_\_\_\_  
DATE Applicant's Signature & KDOC Number



KANSAS DEPARTMENT OF CORRECTIONS  
PRISONER REVIEW BOARD  
JAYHAWK WALK  
714 SW JACKSON, SUITE 300  
TOPEKA, KANSAS 66603-3722  
(785) 296-4524

DATE: / /

**REQUEST FOR PUBLICATION FOR CLEMENCY**

A check for \$\_\_\_\_\_ is enclosed to pay for the cost of publishing the notice shown below. The notice should be published one time only, between the \_\_\_\_\_ of \_\_\_\_\_. Immediately after publication, please return to the address below the affidavit of publication properly executed and a copy of the printed notice. This is necessary to meet statutory requirements, and the petitioner's application for Executive Clemency cannot be completed until proof of publication is received.

Return to: Kansas Department of Corrections  
Prisoner Review Board  
Jayhawk Walk  
714 SW Jackson, Suite 300  
Topeka, KS 66603-3722

**NOTICE OF PUBLICATION**

\_\_\_\_\_ sentenced \_\_\_\_\_  
for \_\_\_\_\_ in \_\_\_\_\_ County, Kansas, has applied for executive clemency. Persons wishing to comment should send information in writing to the above address within fifteen (15) days after the date of publication.

**Attach Printed Notice Here:**

**Affidavit**

**This is to certify that the above notice, a printed copy of which is attached, was published on \_\_\_\_\_ in the \_\_\_\_\_, which is the official county newspaper for \_\_\_\_\_ County, Kansas.**

Printer's fees: \$\_\_\_\_\_.

Signature of affiant: \_\_\_\_\_ Title: \_\_\_\_\_

Name of paper: \_\_\_\_\_ Location: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires / /

**A F F I D A V I T**

(To proceed as Pauper in Clemency Application)

STATE OF KANSAS            )  
  ) ss:  
COUNTY OF \_\_\_\_\_)

\_\_\_\_\_, being duly sworn, states:  
(Name and register number)

1. That I am presently incarcerated at \_\_\_\_\_, for a term of \_\_\_\_\_ years, and desire to apply for Executive Clemency;
2. That I have \_\_\_\_\_dollars in my inmate trust account and will not receive incentive pay in a sufficient amount by the end of the month to pay the cost of publication of notice of this application.
3. That I do hereby request the cost of said publication be paid by the State of Kansas in accordance with law, and that I be permitted to proceed as a pauper.

\_\_\_\_\_  
Signature of Offender

SUBSCRIBED AND SWORN before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

(S E A L) \_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

**Certification by Facility Official**

I hereby certify that, as of this date, the above-named inmate has the amount of \$\_\_\_\_\_ in his current inmate account, which amount may be drawn against for his personal expenditures. I further certify that this inmate will not receive incentive pay by the end of this month in an amount sufficient to pay more than \_\_\_\_\_ dollars of publication costs (insert amount of incentive pay to be received by end of the month). I also certify that the State of Kansas has not paid for the cost of clemency publication for this inmate during the past twelve months.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Facility Business Manager

BY: \_\_\_\_\_  
(Assistant Chief Clerk)

**PRISONER REVIEW BOARD  
TOPEKA, KANSAS**

**K.S.A. 22-3706 provides as follows: "Person acting as agent or representative of individual seeking release; contingent fee prohibited; statement and affidavit.** No person acting as agent or representative for an individual before the board for pardon, commutation of sentence, parole or revocation of parole, conditional release or post-release supervision shall contract for or receive a fee contingent upon a certain decision by the board. Such agent or representative shall submit a statement on the applicant's behalf to the prisoner review board in writing and shall submit therewith an affidavit stating such agent's representative's name; place of residence; the name of the applicant being represented or has been represented; the fee, if any, paid to or to be paid to such agent or representative by any person for such services; that such fee is not or was not a contingent fee. If any person representing any applicant for pardon, commutation of sentence, or parole shall fail to file such affidavit the application shall not be considered. Any affidavit filed as provided in this section shall be a public record."

**AFFIDAVIT-EXECUTIVE CLEMENCY AND PAROLE MATTERS**

State of: \_\_\_\_\_

County of: \_\_\_\_\_

The affiant, \_\_\_\_\_  
(Name and Address)

of lawful age, being duly sworn, states that affiant is an attorney at law admitted to practice within the state  
of \_\_\_\_\_

by \_\_\_\_\_  
(Name and Address of Client)

to represent \_\_\_\_\_  
(Name of Offender or Parolee) (Number)

for \_\_\_\_\_; and that the fee for  
affiant's services is \$ \_\_\_\_\_ to be paid by \_\_\_\_\_  
(Name of Payor)

and that \$ \_\_\_\_\_ of the fee has already been paid:

Affiant further states that the fee is not or was not contingent upon granting or denial of the aforesaid application.

\_\_\_\_\_  
(Signature of Affiant)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

(SEAL)

\_\_\_\_\_  
Notary Public

My appointment expires \_\_\_\_\_