



COMMONWEALTH OF PENNSYLVANIA BOARD OF PROBATION AND PAROLE

1101 S. Front Street
Harrisburg, Pa. 17104 - 2519
NOTICE OF BOARD DECISION

NAME: TABITHA FAITH BUCK

PAROLE NO: 197DN

INSTITUTION: SCI - MUNCY

INSTITUTION NO: OB6449

AS RECORDED ON AUGUST 15, 2019 THE BOARD OF PROBATION AND PAROLE RENDERED THE FOLLOWING DECISION IN YOUR CASE:

FOLLOWING AN INTERVIEW WITH YOU AND A REVIEW OF YOUR FILE, AND HAVING CONSIDERED ALL MATTERS REQUIRED PURSUANT TO THE BOARD OF PROBATION AND PAROLE IN THE EXERCISE OF ITS DISCRETION, HAS DETERMINED AT THIS TIME THAT: YOU ARE GRANTED PAROLE/REPAROLE. THE REASONS FOR THE BOARD'S DECISION INCLUDE THE FOLLOWING:

YOUR PARTICIPATION IN AND COMPLETION OF PRESCRIBED INSTITUTIONAL PROGRAMS.

YOUR POSITIVE INSTITUTIONAL BEHAVIOR.

YOUR RISK AND NEEDS ASSESSMENT INDICATING YOUR LEVEL OF RISK TO THE COMMUNITY.

THE POSITIVE RECOMMENDATION MADE BY THE DEPARTMENT OF CORRECTIONS.

REPORTS, EVALUATIONS AND ASSESSMENTS/LEVEL OF RISK INDICATES YOUR RISK TO THE COMMUNITY.

YOUR DEMONSTRATED MOTIVATION FOR SUCCESS.

YOUR ACCEPTANCE OF RESPONSIBILITY FOR THE OFFENSE(S) COMMITTED.

YOUR STATED REMORSE FOR THE OFFENSE(S) COMMITTED.

YOUR DEVELOPMENT OF A PAROLE RELEASE PLAN.

YOU ARE PAROLED ON OR AFTER 12/21/2019 TO AN APPROVED PLAN UPON CONDITION THAT THERE ARE NO MISCONDUCTS.

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PAROLE NO: 197DN

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PAROLE RELEASE SUBJECT TO DETAINERS

YOU SHALL MAINTAIN EMPLOYMENT AS APPROVED BY PAROLE SUPERVISION STAFF. IF UNEMPLOYED YOU SHALL ENGAGE IN AN ACTIVE JOB SEARCH AND PROVIDE VERIFICATION AS DIRECTED BY PAROLE SUPERVISION STAFF.

YOU SHALL NOT DIRECTLY OR INDIRECTLY HAVE CONTACT OR ASSOCIATE WITH PERSONS WHO SELL OR USE DRUGS, OUTSIDE A TREATMENT SETTING OR POSSESS DRUG PARAPHERNALIA.

UPON YOUR RELEASE, YOU SHALL SUBMIT TO AN EVALUATION TO DETERMINE YOUR NEED FOR MENTAL HEALTH TREATMENT/SERVICE. IF TREATMENT IS RECOMMENDED, YOU MUST ENROLL AND SUCCESSFULLY COMPLETE ALL TREATMENT RECOMMENDED. YOU SHALL BE REQUIRED TO SIGN THE APPROPRIATE RELEASE FORMS FOR CONFIDENTIAL INFORMATION--MANDATORY.

YOU SHALL ACHIEVE NEGATIVE RESULTS IN SCREENING TESTS RANDOMLY CONDUCTED BY THE BOARD TO DETECT YOUR USE OF CONTROLLED SUBSTANCES AND DESIGNER DRUGS, AS DESIGNATED BY THE CONTROLLED SUBSTANCE, DRUG, DEVICE AND COSMETIC ACT, OR TO DETECT YOUR USE OF ALCOHOL, OR BOTH. YOU ARE RESPONSIBLE FOR ALL TESTING COSTS.

YOU SHALL TAKE PSYCHOTROPIC MEDICATION IF PRESCRIBED BY YOUR DOCTOR--MANDATORY.

YOU SHALL NOT DIRECTLY OR INDIRECTLY HAVE CONTACT WITH VICTIM(S), OR VICTIM'S FAMILIES, INCLUDING CORRESPONDENCE, TELEPHONE CONTACT, OR COMMUNICATION THROUGH THIRD PARTIES--MANDATORY.

YOU SHALL NOT TRAVEL OR RESIDE IN LANCASTER COUNTY, PENNSYLVANIA FOR ANY REASON--MANDATORY.

YOU SHALL PAY A MONTHLY SUPERVISION FEE AS DETERMINED BY PAROLE SUPERVISION STAFF TO THE PAROLE BOARD WHILE UNDER SUPERVISION WITHIN THE COMMONWEALTH OF PENNSYLVANIA (ACT 35 OF 1991).

WHEN RELEASED TO THE COMMUNITY YOU MUST REPORT IN PERSON TO THE DISTRICT OFFICE OR SUB OFFICE THE NEXT BUSINESS DAY (MONDAY THROUGH FRIDAY) BETWEEN THE WORKING HOURS OF 8:30 A.M. - 5:00 P.M. THE DECISION ANNOUNCED BY THIS BOARD ACTION (PBPP-15) WILL NOT TAKE EFFECT UNTIL YOU HAVE SIGNED THE CONDITIONS (PBPP-11), AND THE RELEASE ORDERS (PBPP-10) HAVE BEEN ISSUED. YOU REMAIN UNDER THE JURISDICTION AND CONTROL OF THE DEPARTMENT OF CORRECTIONS UNTIL YOU HAVE SIGNED THE PBPP-11, AND THE PBPP-10 HAS BEEN ISSUED. THIS PBPP-15 DOES NOT AUTHORIZE YOU TO CHANGE YOUR RESIDENCE FROM ANY COMMUNITY CORRECTIONS CENTER OR GROUP HOME IN WHICH YOU MAY BE RESIDING WHEN YOU RECEIVE IT.

(MAX: LIFE)

NLG 08/15/2019