



PIMA COUNTY ADULT DETENTION COMPLEX

ATTORNEY PRIVILEGED TELEPHONE LIST

Date: _____

For all telephone numbers to be placed on the **Attorney Privileged Telephone List**, the following information will need to be provided:

- This "**Signed**" document
- Request on OFFICIAL LETTERHEAD of Law Office/Legal Firm to also include:
 - Name of the Attorney requesting the Privileged number (Separate form for each Attorney)
 - Phone number(s) to be placed on the Privileged list

-**Color copy** of "Current" State of AZ bar card and "Current/Valid" driver's license both front and back (**NOTE: Please ensure that all documents are Clear and Legible**)

Attorney (PRINT):_____ Bar #:_____

Signature:_____

By making this request, I understand that the inmate phone calls are only intended for Attorney/Client privileges. Any other use of the inmate phone system that is not intended for Attorney/Client privileges and/or not directly related to a case or an investigation is **NOT** sanctioned by the Pima County Corrections Bureau or Pima County Sheriff's Department.

*Send requests via email to: Marcia.Freeman@sheriff.pima.gov