



# Media Advisement

Mississippi Department of Corrections – 301 North Lamar St., Jackson, MS 39201 – 601-359-5600  
Burl Cain, Commissioner

---

To: Members of the News Media  
From: Office of Communications  
Date: September 25, 2025  
Re: Scheduled execution/Media representative application

**\* Procedure to submit requests for media representative to an execution \***

The Mississippi Supreme Court has set an execution date for **Charles Ray Crawford, MDOC #82068**. Crawford, 59, is scheduled to be executed at 6 p.m. on **Wednesday, October 15, 2025**, at the Mississippi State Penitentiary at Parchman.

**Submit notice of interest NO LATER than 5 p.m., Friday, October 3, 2025.**

News media organizations wishing to have a representative present in the media center at the prison during briefings leading up to and following the execution must submit their request on the enclosed form and signed by their news department manager. **Each person representing your organization must fill out the attached form**, make a PDF, and send it to the address at the bottom of the form. *A background check will be performed on all applicants.* Approved applicants will be notified by email and provided additional instructions.

If you wish to send a satellite broadcasting vehicle, please indicate this need and requests will be taken on first received basis. The parking area can accommodate television and radio station satellite or microwave vehicles. Television and radio stations are each limited to **1** vehicle and will be allowed **3** support personnel (engineer, camera operator, producer).

*Please be advised that all media personnel will be entering a secure prison area and are subject to being searched. Please bring items only essential to news duties. According to MDOC policy and state law, **all recording devices will be restricted and allowed only in the media center and parking area.** Movement between the media center and parking area will be strictly limited after media personnel have checked in upon arrival. For example, going back and forth to your vehicle will be prohibited.*

**All** requested information must be provided **in print** on this form for **each** media personnel:

**Media Representative**

- **Name of news organization:**
- **Name of reporter:**
- **Date of Birth:**
- **Driver's license number including issuing state and expiration date:**
- **Social Security Number:**
- **E-mail address:**
- **Cell Phone number:**  
(so we may reach you directly and immediately if necessary)
- **Media format** (CIRCLE all that apply):

PRINT

RADIO

TV

INTERNET

Please sign below to indicate acknowledgement of the following statement:

***\*I certify and confirm that the above information is true and accurate. I understand that I will only be allowed access to the media center and that I cannot make any recordings of activities outside of the area allowed for the media. I also acknowledge that I will be entering a secured prison facility and are subject to being searched.***

---

Reporter signature

---

News Manager signature

Download and complete this form, make a PDF, and send to the following address  
**no later than 5 p.m., Friday, October 3, 2025:**

**MDOCOfficeofCommunications@mdoc.state.ms.us**