State Claims Commission

Please print in ink or type

DEC 0 9 2014

BEFORE THE STATE CLAIMS COMMISSION Of the State of Arkansas

RECEIVED

□ Mr. □ Mrs.		Do Not Write in These Spaces
□ Ms.		Claim No. 15-0432-CC
□Miss Michael	Bowden, #088956	Date Filed Doc 9, 2014
	Claimant	(Month) (Day) (Year)
vs.		Amount of Claim \$ 50,000.00
State of Arkansas, Respondent		Fund_DOC_
Dept.of C	Corrections	
1 - 1	COMPLAIN	T Personal Injury, Failure
Michael Bowden, #0	188956 the above named Claimant, of PO	Follow Procedures, Mental Pain & Suffering 644
Al 7Kot 4		(Street or R.F.D. & No.) (City)
(State) (Zip Code) (Dayti	me Phone No.) County of LINCOIN rep	presented by ROSE
of		(Legal Counsel, if any, for Claim)
(Street and No.)	(City) (State) (Zip Code)) (Phone No.) (Fax No.)
State agency involved: 14rkansi	as Department of Correction	Amount sought: \$56.000
Month, day, year and place of incident		
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sparts of this complaint, the claimant make	Stille statements and anaroom the 6-Harris	
at the same of the	es the statements, and answers the following questions, as indicated: to whom?	: (1) Has claim been presented to any state department or officer th
(Yes or No) (Month)	(Day) (Year) : and that the following action was taken thereon:	(Department)
	, and the following action was taken thereon:	
(Name)	s paid thereon: (2) Has any third person or corporation an interest	in this claim? No if so, state name and add
that the nature thereof is as follows:	(Street or R.F.D. & No.) (City	(State) (Zip Code)
	: and was acquired on	in the following ma
THE UNDERSIGNED states on or	th that he or she is familiar with the matters and things set.	forth in the above complaint, and that he or she verify half
and the mark	Depl un	
(Print Claimant/Representa	ative Name)	whow Bourse
(itive Itanie)	(Sunature of Claimant/Representative)
Edward Lane	SWORN TO and subscribed before me at	(TRALI NAJO
Notary Public	et	(City) (State)
AL) state of Arkansas	on this day of	(State)
Fincein County	(D)+(-)	1014
Commission # 12362	040	(Year)
Commission: Expires July 2	0,2017	and our
1- R7/99	(1,0)	(Notary Public)
<u>-</u>	My Commission Expires:	10 (011
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ARKANSAS DEPARTMENT OF CORRECTION VARNER UNIT INTER-OFFICE COMMUNICATION

TO:

Inmate Bowden, Michael ADC #088956 BKS 17-31

FROM:

Sharon L. Cantrell, Grievance

RE:

Pink copies of grievances

DATE:

March 7, 2013

Attached are your three pink copies of your Step One (1) Informal grievances. I inadvertently picked these up with some other papers and placed them in my notebook. Sgt. Burchfield asked me about them last night; she said you had asked her about them. I apologize for any inconvenience this may have caused.

Cc: File

UNIT-LEVEL GRIEVANCE M (Attachment I)	Andrew Barrell
Unit/Center Vane (Attachment I)	FOR OFFICE USE ONLY
Name Poweden M.	GRV.#
ADC# 88956 Brks # 17 Job Assignment Ricket Person	Date Received:
12/14/12 (Date) STEP ONE: Informal Resolution	GRV. Code #:
2/20/12 (Data) STER TWO. B	
2/20/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should lf the issue was not resolved during Step One, state when Step One state	first be handled informally.)
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a substantial risk of physical harm; emergency grievances are not for ordinary prob- nature). If you marked yes, give this completed form to the design and the	lems that are not of a serious
nature). If you marked yes, give this completed form to the designated problem-sol attached emergency receipt. If an Emergency, state why:	ving staff, who will sign the
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ISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grievance Officer Inmate After Completion of Step One and Step Two	

(PUNITIVE HAMPITE CASSITIONED TO GENERAL APPRIL	S. A. L. S. Andrewsky, and A. S.
UNIT LEVEL GRIEVANCE M (Attachment I)	47-94)
Unit/Center Values	FOR OFFICE USE ONLY
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	Date Received:
ADC# 88956 Brks # 17 Job Assignment Roke Prosect	GRV. Code #:
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JAIT LEVEL GRIEVANCE M (Attachment I)	
Omo Center WAND	FOR OFFICE USE ONLY
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ADC#88956 Brks # 17 Job Assignment Roke Perso	Date Received:
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UNIT LEVEL GRIEVANCE M (Attachment I)		FOR OFFICE USE ONLY
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ADC# 8895(n Brks # 17 Job Assigni	nent Hokel History	GRV. Code #:
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Is this Grievance concerning Medical or Mental Health Se BRIEFLY state your one complaint/concern and be specif involved and how you were affected. (Please Print):	rvices? <u>ND</u> If yes, ci	rcle one: medical or ment
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UNIT LEVEL GRIEVANCE 10 M (Attachment I) Unit/Center Variation	
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Name Touded M	GRV.#
ADC# 88956 Brks # 17 Job Assignment Robert Relation	Date Received:
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<u>UNIT LEVEL GRIEVANCE M</u> (Attachment I)	
Unit/Center Vacae	FOR OFFICE USE ONLY
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* ADC# 8895(0) Brks # 17-2 Job Assignment Roket Press	Date Received:
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	Date:
DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grievance Office to Inmate After Completion of Step One and Step Two	er; ORIGINAL-Given back

to Inmate After Completion of Step One and Step Two

To: Sharos L. Cantrell, Grievance Officer

Fr: M. Bowden, ADC # 088956

Re: Informal grievances, dld 12/14/12

Date: 10 March 2013

Case law provides that innates are excused from complying with a grievance process when officials prevent inmates from utilizing the procedures or when officials themselves fail to comply with the procedures. Gibson v. Webber, 431 F. 3d 339, 341 (8th Cir. 2004) and Chelette v. Harris, 229 F. 3d 684, 688 (8th Cir. 2005).

For one week between 12/14/12 and 12/20/12, I attempted to utilize the grievance procedures by bringing my grievances to my problem solvers; they chose to refuse to accept my grievances, thusly, they failed to comply with the procedures. By the problem solvers acts to refuse to accept my grievances, these grievance were legally exhausted. I chose however, to further comply with the grievance process, but to no avail.

Od 12/20/12 I placed the white a copies of the grievances in the grievance box indicating why I went to btep two. To date, I've not received an official acknowledgement from the Vorner Unit Grievance Office with grievance numbers assigned. Thusly, the Crrievance office officials have failed to comply with the grievance procedures.

ON 1/24/13. I again attempted to submit these three grievances plus took additional dtd 1/9/13, that also were not acknowled by the grievance officer, by and through Sqt. D. Burchfield.

Now, however, you've sent me pink copies of the three grievances dtd 12/20/12, but no others, and again without grievance numbers assigned. You did write on these pink copies, "This issue is under investigation," in the problem solvers section, and dated your signature on 01/29/13.

Ms. Contrell, this is highly irregular and does not comport to the grievance procedures, thusly, these grievances, the three dtd 12120/112 and 1/9/13, moust and are now considered exhausted.

UNIT LEVEL CRIEVANCE I M (Attachment I) Unit/Center	
Unit Center William	FOR OFFICE USE ONLY
Name Bruden M	GRV. # 14-12+02102
000	Ala/L
ADC# 88956 Brks # 17 Job Assignment F	CKet Person GRV. Code #: 000
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McOor Bourde	12/14 VARNER UNIT GRIEVANCE
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you are harmed/threatened because of your use of the grievance proce	Date ss, report it immediately to the Warden or desi
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THIS SECTION TO BE FILLED OU his form was received on (date), and determined to (Yes or No). This form was forwarded to medical or menta the person in that department receiving this form: INT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature escribe action taken to resolve complaint, including dates: aff Signature & Date Returned	Date SS, report it immediately to the Warden or design TBY STAFF ONLY be Step One and/or an Emergency Grievand I health? (Yes or No). If yes, name Date Date Received RECEIVED DEPUTY DIRECTOR OF CORRECTION JAN 29 2013
THIS SECTION TO BE FILLED OU his form was received on (date), and determined to (Yes or No). This form was forwarded to medical or menta f the person in that department receiving this form: SINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature escribe action taken to resolve complaint, including dates: aff Signature & Date Returned	Date SS, report it immediately to the Warden or designation of the Step One and/or an Emergency Grievand I health? (Yes or No). If yes, name Date Date Received RECEIVED DEPUTY DRECTOR OF CORRECTION OF CORRECTION JAN 29 2013

IGTT490 3GR BK17/0031

ACKNOWLEDGMENT OR REJECTION OF UNIT LEVEL GRIEVANCE

TO: Inmate Bowden, Michael D.

FROM: Carter, Phalia M

DATE: 12/21/2012

ADC #: 088956A

TITLE: ADC Inmate Grievance Coord

GRIEVANCE #: VU-12-02102

Please be advised, I have received your Grievance dated 12/20/2012 on 12/21/2012 .

You should receive communication regarding the Grievance by 01/24/2013

Signature of ADC Inmate Grievance Coord

CHECK ONE OF THE FOLLOWING

- This Grievance will be addressed by the Warden/Center Supervisor or designee.
- This Grievance is of a medical nature and has been forwarded to the Health Services Administrator who will respond.
- This Grievance involves a mental health issue and has been forwarded to the Mental Health Supervisor who will respond.
- This Grievance has been determined to be an emergency situation, as you so indicated.
- This Grievance has been determined to not be an emergency situation because you would not be subject to a substantial risk of personal injury or other serious irreparable harm. Your Grievance will be processed as a Non-
- This Grievance was REJECTED because it was either non-grievable (), untimely, was a duplicate of , or was frivolous or vexatious.

INMATE'S APPEAL

If you disagree with a rejection, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director. Keep in mind that you are appealing the decision to reject the original complaint. Address only the rejection; do not list additional issues, which write in the space provided below.

Inmate Signature	ADC #	Date

IGIT420 3GH

INMATE NAME: Bowden, Michael D.

ADC #: <u>088956A</u>

GRIEVANCE #: <u>VU-12-02102</u>

HEALTH SERVICES RESPONSE TO UNIT LEVEL GRIEVANCE

(619) Your concern: (white) Today I was attacked and injured by punitive inmates in the hall between 13-14 and 15-18 barracks. The attackers placed a choke hold on me causing injury to right front of my neck and aggravating my neck injury in the back of my neck. I could not swallow afterwards. I lost consciousness due to the choke hold and woke on the ground. The attack left me injured in my right shoulder as well. I was taken to the infirmary and seen by Nurse Scott Newman who only took my blood pressure typed it into the computer, and said "you can go now." I was not checked for the injuries I had identified to Nurse Newman.

Response: You were seen on 12/14/12 at 1557 by Newman RN who documented he checked your vital signs, alertness and listened to your lungs. The documentation indicated that you were attacked and blacked out. He noted no signs of distress or trauma.

I find this grievance without merit.

Signature of Health Services Administrator/Mental Health Supervisor or

Designee

RECEIVED-DEPUTY DIRECTOR
ARKANSAS DEPARTMENT

Title

Dat/13

Attachment IV

JAN 29 2013

INMATE'S APPEAL

HEALTH & CORRECTIONAL PROGRAMS

If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the Deputy Director for Health & Correctional Programs along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision to the original grievance. Do not list additional issues which were not part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below.

WHY DO YOU DISAGREE WITH THE RESPONSE GIVEN ABOVE? Technically, this grievence was exhausted when the problem solvers refused to sign Counter to ADC policy, and is actionable in court. As a courtesy to ADC I appeal this response by the Vorner Unit Health Services Administrator. First, I was checked by RN Newman as stated above; he only took my blood presure, typed into the auguster, and then said "you can genere." The statement above is take. Decand, when I was seen by Dr. I ko, she did not examine my right arm dand shoulder, but concentrated on my old injury in the back of my neck. My right arm and shoulder as well as the right front of my veck remain very paintul, and have been left entreated. — I can seeking full and proper review of this grievence and a proper determination of the facts. My grievence is with merit and appropriate action should be taken.

Inmate Signature

0 0136

ADC#

12/1-6

Date

IGTT405 3GT

Attachment V

ACKNOWLEDGEMENT OF GRIEVANCE APPEAL or REJECTION OF APPEAL

TO: Inmate Bowden, Michael D.

ADC #: 088956A

FROM: Kelley, Wendy L

TITLE: Deputy Director

RE: Receipt of Grievance VU-12-02102

DATE: 01/29/2013

Please be advised, the appeal of your grievance dated

was received in my office on this date $\frac{01/29/2013}{}$

You will receive communication from this office regarding this Grievance by 03/13/2013

- The time allowed for appeal has expired
- The matter is non-grievable and does not involve retaliation:
 - (a) Parole and/or Release matter
 - 区 (b) Transfer
 - 厦 (c) Job Assignment unrelated to medical restriction
 - 厦 (d) Disciplinary matter
 - [(e) Matter beyond the Department's control and/or matter of State/Federal law
 - 屬 (f) Involves an anticipated event
- You did not send all the proper Attachments:
 - (a) Unit Level Grievance Form (Attachment 1)
 - (b) Warden's/Center Supervisor's Decision (Attachment III); or Health Services Response Attached (Attachment IV for Health Issues Only)
 - (c) Did not give reason for disagreement in space provided for appeal
 - (d) Did not complete Attachment III or IV with your name, ADC#, and/or date
 - (e) Unsanitary form(s) or documents received
 - (f) This Appeal was REJECTED because it was a duplicate of , or was frivolous or vexatious

IGTT430 3GD

Attachment VI

INMATE NAME: Bowden, Michael D.

ADC #: 088956

GRIEVANCE#:VU-12-02102

On December 14, 2012, you grieved that you did not receive adequate medical care after being assaulted on this date. You state that you were assaulted, placed in a choke hold, lost consciousness, aggravated an old injury in your neck and injured your right shoulder. You state that you were taken to the infirmary for treatment and all Nurse Newman did was take your blood pressure and advised you that you were free to go.

The medical department responded, "You were seen on 12/14/12 at 1557 by Newman RN who documented he checked your vital signs, alertness and listened to your lungs. The documentation indicated that you were attacked and blacked out. He noted no signs of distress or trauma. I find this grievance without merit."

Your appeal states that Nurse Newman only took your blood pressure and when you saw Dr. Iko, she only focused on your neck and did not examine your right arm or shoulder which remain very painful and untreated.

December 14, Nurse Newman noted that you were alert, orientated, even and unlabored respirations, lungs clear, no signs or symptoms of trauma or distress, that you reported blacking out and he released you to security. January 1, you were seen in sick call for complaints of right arm and shoulder pain and neck pain. The nurse gave you some Tylenol and advised you to return to sick call if your condition was not better in 3-4 days. January 7, you were seen in sick call again for your complaints and the nurse referred you to the provider. January 14, you were seen by Dr. Iko who noted no shoulder asymmetry, no bruises or lacerations, no swelling, normal range of motion to right shoulder, no area of tenderness, normal power and limited backward neck movement. She ordered Ibuprofen and a C-spine x-ray (completed January 16) due to your history of an old neck injury and limited neck movement. January 17, you were seen by Dr. Iko for a follow up on the C-spine x-ray and she noted that the findings were from an old injury that you reported to be asymptomatic; therefore, a referral to ortho was not warranted and she advised you to report to medical as needed. A review of your medical record indicates that you have not been seen in sick call for this complaint since your January 17 encounter with Dr. Iko. I encourage you to utilize the sick call process as it allows you to request health care services as you deem necessary.

You have been seen for your complaints and treated as deemed appropriate and clinically indicated based upon your provider's medical judgment; therefore, I find this appeal without merit.

Wands V.O.O.	3/12/13
Director	Date

Unit/Center Varue: M (Attachment I)	FOR OFFICE USE ONLY
Name Bouden M	GRV. #
In all Care and a second secon	Day D
ADC# SYSU Brks # [7] Job Assignment Pel Mar. 1-9-13 (Date) STEP ONE: Informal Resolution	GRV. Code #:
1-0-12 (Date) STEP TWO T	
If the issue was not resolved during Step One, state why:	should first be handled informally.
(Date) EMERGENCY GRIEVANCE (As a second of the second of t	T Mark.
a substantial risk of physical harm; emergency grievances are not for ordinar nature). If you marked yes, give this completed form to the designated and the	one in which you may be subject to
nature). If you marked yes, give this completed form to the designated proble attached emergency receipt. If an Emergency, state why:	em-solving staff, who will sign the
Is this Grievance concerning Medical or Mental Health Services? No If services if services is the service of the services.	
BRIEFLY state your one complaint/concern and be specific as to the complaint/olved and how you were affected. (Please Print)	int date place name of normal
involved and how you were affected. (Please Print): I Submitted	hree grievouces with
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the ADC Innote Grievaure Courd.	acknowledbase + tron
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nmate Signature Date	
you are narmed/threatened because of your use of the grievance process, we and	immediately to the Warden on Jone
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of the person in that department receiving this form:	(Yes or No). If yes, name
	Date
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- max	
aff Signature & Date Returned Jamate Signature & Inmate Signature &	Date Received
aff Who Received Step Two Grieven acc. A pursuant to Step Two. Is it an Em	nergency? (Yes or No).
ction Taken: Tot Worded (Forwarded to Grievance Officer/Warde	Date: 1-24-13
forwarded, provide name of person receiving this form: ISTRIBUTION: YELLOW & PINK – Inmate Receipts; BLUE-Grievance (Inmate After Completion of Step One and Step Two	Date:

UNIT LEVEL GRIEVANCE M (Attachment I)	
Unit/Center Var 18	FOR OFFICE USE ONLY
Name Boulder M.	GRV. #
ADC# 88956 Brks # 17 Job Assignment Policet	Date Received:
1-9-13 (Date) STEP ONE: Informal Resolution	GRV. Code #:
-9-13 (Date) STEP TWO: Formal Grievance (All complaints/conce	
If the issue was not resolved during Step One, state why	rns should first be handled informally.)
(Date) EMERGENCY GRIFVANCE (An amount of the control of the contro	ato it back in
a substantial risk of physical harm: emergency grideness situation	is one in which you may be subject to
nature). If you marked yes, give this completed form to the designated prattached emergency receipt. If an Emergency state why	mary problems that are not of a serious roblem-solving staff, who will sign the
Is this Grievance concerning Medical or Mental Health Services? NO BRIEFLY state your one complaint/concern and he specific as to the complaint.	<i>W</i>
BRIEFLY state your one complaint/concern and be specific as to the con involved and how you were affected. (Please Print)	If yes, circle one: medical or mental
involved and how you were affected. (Please Print): I received	and answer from the
Stated: "Some of Lundle Bould 12-14-12.	The auswer on the form
him. The statement is late.	THE WAS TERRITIED TO
Maria Orania de la companya della co	
nmate Signature	9-12/4
Date f you are harmed/threatened because of your use of the grievance process, repo THIS SECTION TO BE FILLED OUT BY	
THIS SECTION TO BE FILLED OUT BY	ort it immediately to the Warden or design
(1976) and defermance 24-1. Cu	
(Yes or No). This form was forwarded to medical or mental healt f the person in that department receiving this form:	(Yes or No). If yes, name
	Date
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aff Signature & Date Returned	0 D : W
is form was received on 1-244/17(data)	e & Date Received
All Who Received Stan Tive Colonia	Date: (Yes or No).
ction Taken: Folia 20 and on the Autobal and	200.
taff Who Received Step Two Grievance Forwarded to Grievance Officer/Was forwarded, provide name of person receiving this form:	

Department of Correction

Report of Stolen Property

Date: 12-14-12

To: MAJER	BOLTOD	_, Chief Security Officer
£		2

Name: Bowden, MicHAEC No. 88956

Description of Property:

HOLLDAY PACKAGE

Give Complete Detail of Property and Where Property was last Seen:

CHRISTMAS PACKAGE WAS LAST SEED IN THE JUDINEC GOING INTO THE NEW BUILDING, SEE COMMISSARY FORCORDS FOR COMPLETE LIST OF ITCMS SECURIFY IDENTIFIED I, JOHNSON AND J. CAPTURIGHT AS THE IMMATES WHO STOLE THE HOLIDAS PACKAGE,

Some or Inmale Bouten Commission was return to Jos Assisy to Ado:

Inmate's Signature

Syt Klongo & Syt. Merter

(e fund to 519 h

Security Officer

13-

ADC- 0-1079 C-841-

Unit/Center VAROUS (Attachment I)	FOR OFFICE USE ONLY
Name Rowhan, Michael Cyllon)	GRV. # VU-13-00/5
ADC# 8895@ Brks # 17 Job Assignment Ticke	Date Received: 14/13
03-07-13 (Date) STEP ONE: Informal Resolution	GRV. Code #: +00/7/3
62-13-13 (Date) STEP TWO: Formal Grievance (All complaints/	ns should first he handled inc.
If the issue was not resolved during Step One, state why: (Date) EMERGENCY GRIEVANCE (An emergency situation a substantial risk of physical harm; emergency grievances are not for ordinature). If you marked yes, give this completed form to the designated proattached emergency receipt. If an Emergency, state why:	is one in which you may be subject
Is this Grievance concerning Medical or Mental Health Services? No BRIEFLY state your one complaint/concern and he specific as to the services.	If you single one I' I
involved and how you were affected. (Please Print): I've Sent	plaint, date, place, name of personn
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VARNER UNIT GRIEVANCE	ADMINISTRATION BUILDING
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Inmate Signature	12-67-13
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This form was received on	TAFF ONLY
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of the person in that department receiving this for	(Yes or No). If yes, nar
Langer we grad gobarditotic ICCCIAIID IIIG LUAM.	Date
401 P 15 CRT PRO 1/20/24 30T 100	The state of the s
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Co.	4-7-1
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Describe action taken to resolve complaint, including dates:	Date Received
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Co.	
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Co.	
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Describe action taken to resolve complaint, including dates:	Date Received
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Describe action taken to resolve complaint, including dates: Staff Signature & Date Returned	Date Received
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Describe action taken to resolve complaint, including dates: Staff Signature & Date Returned Inmate Signature This form was received on (date), pursuant to Step Two. Is it and Staff Who Received Step Two Grievance:	Date Received & Date Received Emergency? (Yes or No)
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Describe action taken to resolve complaint, including dates: Staff Signature & Date Returned This form was received on (date), pursuant to Step Two. Is it and Staff Who Received Step Two Grievance: Action Taken:	Date Received & Date Received Emergency? (Yes or No) Date:
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Describe action taken to resolve complaint, including dates: Staff Signature & Date Returned This form was received on (date), pursuant to Step Two. Is it an	Date Received & Date Received Emergency? (Yes or No) Date:

Attachment II

₫**GTT**400 3GR

ACKNOWLEDGMENT OR REJECTION OF UNIT LEVEL GRIEVANCE

TO: Inmate Bowden, Michael D.

FROM: Carter, Phalia M

DATE: <u>02/14/2013</u>

ADC #: 088956A

TITLE: ADC Inmate Grievance Coord

GRIEVANCE #: VU-13-00159

Please be advised, I have received your Grievance dated 02/13/2013 on 02/14/2013

You should receive communication regarding the Grievance by 03/15/2013

Signature of ADC Inmate Grievance Coord

CHECK ONE OF THE FOLLOWING

- This Grievance will be addressed by the Warden/Center Supervisor or designee.
- This Grievance is of a medical nature and has been forwarded to the Health Services Administrator who will respond.
- This Grievance involves a mental health issue and has been forwarded to the Mental Health Supervisor who will respond.
- This Grievance has been determined to be an emergency situation, as you so indicated.
- This Grievance has been determined to not be an emergency situation because you would not be subject to a substantial risk of personal injury or other serious irreparable harm. Your Grievance will be processed as a Non-Emergency.
- This Grievance was REJECTED because it was either non-grievable (), untimely, was a duplicate of , or was frivolous or vexatious.

INMATE'S APPEAL

If you disagree with a rejection, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director. Keep in mind that you are appealing the decision to reject the original complaint. Address only the rejection; do not list additional issues, which were not a part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below.

Inmate Signature	ADC #	Date	-

20

TGTT410 3GS

. Attachment III

INMATE NAME: Bowden, Michael D.

ADC #: 088956A

GRIEVANCE #: <u>VU-13-00159</u>

WARDEN/CENTER SUPERVISOR'S DECISION

In response to grievance VU-13-00159 you stated that "I've sent three copies, the white, blue, and pink of my grievances in December as a result of the attack on my person and theft of my christmas package, to Ms. Bennett, yet I have not received any acknowledgement."

According to Inmate Grievance Coordinator Mrs. Carolyn Bennett records show that the grievance office has only received one grievance in the month of December 2012 which was a medical VU-12-2102. All grievances are processed according to AD 12-16 Inmate Grievance Procedure. According to the grievance policy AD 12-16 the inmate must submit a step one informal grievance to the problem solver or Sergeant or above and if they do not respond or if the inmate does not agree with the response the inmate has three days to proceed to a step two formal grievance. When an inmate chooses to go to step two the grievance then becomes a formal justification of why the inmate must then submit either the white, pink or yellow copy of the grievance with a date and justification of why the inmate is proceeding to a step two formal grievance. If you reside in the Varner Unit you will drop your step two formal grievances in the grievance box in the Varner Unit next to the Master Control Booth and if you reside in the Varner Super Max then you will give your step two formal grievances to the problem solver or Sergeant or above who will then drop it in the grievance box. If you do not submit your step two formal grievances to the grievance office then it can not be processed as a grievance. Therefore I find this grievance without merit.

Math

Signature of Warden/Supervisor or Designee

RECEIVED

APR **1 6** 2013

Title Her

4-3-(2 Date

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING

INMATE'S APPEAL

If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision to the original grievance. Do not list additional issues, which are not part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below.

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? THE ABOVE DECISION IS IN ERROR. I dropped four grievaxes (while) in the grievance box on 12/26/12. Three were on the assault the fourthwas medical. All of them had the same reason for proceeding to step two: "Sat. Mingo and Syl. Heater rejused to sign." Only the medical grievance has been responded to. The three others grieve: (1) ADC creating a dongerous situation where assaults by AdSea innates on regular socialism is common! (2) my properly (valued at 19/10p) was stolen as a result of the assault; and, (3) two officers tailed to maintain security over AdSea innates allowing them to gather and assault me in plan sight of one officers tailed to maintain After no response I had Set Burchield sign and take the blue and 21th copies directly to the grievance of react. Sharon Cantrell, who wrote on the 21th copies. "This issue is under investigation." dtd 1/29/13. — I did all 1/20w them, and have deliberately deviated from AD12-16, in afterpt to bury my meritorious claims.

Mikad Bouden

88954

4-8-13

Inmate Signature

ADC#

Date

21

IGTT405 3GT

Attachment V

ACKNOWLEDGEMENT OF GRIEVANCE APPEAL or REJECTION OF APPEAL

TO: Inmate Bowden, Michael D.

ADC #: 088956A

FROM: May, Larry D

TITLE: Chief Deputy Director

RE: Receipt of Grievance VU-13-00159

DATE: 04/16/2013

Please be advised, the appeal of your grievance dated

was received in my office on this date $\frac{04/16/2013}{}$

You will receive communication from this office regarding this Grievance by 05/29/2013

- The time allowed for appeal has expired
- The matter is non-grievable and does not involve retaliation:
 - (a) Parole and/or Release matter
 - III (b) Transfer
 - (c) Job Assignment unrelated to medical restriction
 - (d) Disciplinary matter
 - (e) Matter beyond the Department's control and/or matter of State/Federal law
 - (f) Involves an anticipated event
- You did not send all the proper Attachments:
 - (a) Unit Level Grievance Form (Attachment 1)
 - (b) Warden's/Center Supervisor's Decision (Attachment III); or Health Services Response Attached (Attachment IV for Health Issues Only)
 - (c) Did not give reason for disagreement in space provided for appeal
 - (d) Did not complete Attachment III or IV with your name, ADC#, and/or date
 - (e) Unsanitary form(s) or documents received
 - (f) This Appeal was REJECTED because it was a duplicate of , or was frivolous or vexatious

IGTT400 3GD

Attachment VI

INMATE NAME: Bowden, Michael D.

ADC #: 088956

GRIEVANCE#:VU-13-00159

You grieved on 2/13/13 that you've sent three copies, the white, blue, and pink of my grievances in December, as a result of the attack on your person and theft of your Christmas package, to Ms. Bennett and you have not received any acknowledgement.

The Warden responded that according to Mrs. Carolyn Bennett, Inmate Grievance Coordinator, records show that the grievance office has only received one grievance in the month of December 2012, which was a medical (VU-12-2102). All grievances are processed according to AD 12-16 Inmate Grievance Procedure. According to the grievance policy AD 12-16, the inmate must submit a step one informal grievance to the problem solver or Sergeant or above and if they do not respond or if the inmate does not agree with the response, the inmate has three days to proceed to a step two formal grievance. When an inmate chooses to go to step two, the grievance then becomes a formal grievance. The inmate must then submit either the white, pink, or yellow copy of the grievance with a date and justification of why the inmate is proceeding to a step two formal grievance. If you reside in the Varner Unit, you will drop your step two formal grievances in the grievance box in the Varner Unit next to the Master Control Booth and if you reside in the Varner Super Max, then you will give your step two formal grievances to the problem solver or Sergeant or above who will then drop it in the grievance box. If you do not submit your step two formal grievances to the grievance office, then it cannot be processed as a grievance. Therefore I find this grievance without merit.

After review of your complaint and supporting documentation, I find that I concur with the Warden's decision. Records show that the grievance office has only received one grievance in the month of December 2012 for you, which was a medical (VU-12-2102) grievance. AD 12-16 explains the grievance procedure and how to properly process a grievance. To file a formal grievance at the Varner Unit, the grievance box is next to the Master Control Booth and for Varner Super Max, you will give your formal grievance to the problem solver who will drop it in the grievance box for you.

Appeal denied.

1 00		
17m7		5.1.13
Director	Date	- (,)

State Claims Commiss
DEC 15 2014

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

MICHAEL BOWDEN (ADC 088956)

RECEIVED CLAIMANT ED

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

ANSWER

COMES NOW the Respondent, Arkansas Department of Correction, and for its Answer, states and alleges as follows:

- 1. Respondent denies liability in this claim and asserts it will hold the Claimant to strict proof on each allegation unless admitted by Respondent. Respondent reserves the right to plead further upon completion of the investigation by internal affairs and requests the matter be held in abeyance until the investigation is complete.
- 2. The applicable account information required by the Commission is:

a. Agency number: 0480

b. Cost Center: HCA 0100

c. Internal Order:

340301

d. Fund Center: 509

WHEREFORE, for the reasons cited above the Respondent prays that the claim be dismissed with prejudice and that Claimant take nothing, or in the alternative that the matter be held in abeyance until completion of the investigation by internal affairs.

Respectfully submitted,

Department of Correction Office of Counsel

LISA MILLS WILKINS Ark. Bar #87190

Attorney Supervisor Post Office Box 8707 Pine Bluff, AR 71611

(870)267-6844 Office

(870)267-6373 Facsimile

CERTIFICATE OF SERVICE

I certify that a copy of this pleading has been served this 2 day of 2014, on the Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

Michael Bowden (ADC 088956) Varner Unit PO Box 600 Grady, AR 71644-0600

ISA MILLS WILKINS Ark Bar #87190

IN THE ARKANSAS STATE CLAIMS COMMISSION

MICHAEL D. BOWDEN ADC #88956

V. CLAIM #: 15-0432-CC

DEPARTMENT OF CORRECTIONS

RESPONDENT

MOTION FOR PRODUCTION OF EMPLOYEE RECORDS

COMES NOW, Claimant, Michael D. Bowden, pro se, and for his Motion for Production of Employee Records. states:

Claimant has before the commission a claim for damages resulting from an assault on him on 14 December 2012. His claim against Respondent is for personal injury caused by Department of Correction employee negligence of duty to protect Claimant from harm.

Claimant avers that Respondent employee's, D. Williams and Shirley Hudson, were negligent in their duty to protect him against clear and present danger. Claimant avers that each employee has received one or more "file note" and/or disciplinary action for other acts of failure to properly perform their duty. These records are necessary to Claimant's case, and will provide the commission record of these employees' work history and determinant of negligence of duty to protect claimant from harm.

Claimant moves for Commission to Order Respondent to produce said employees' records, provide Claimant with copy, no less than thirty days before an oral hearing on the claim.

WHEREFORE, Claimant, Michael D. Bowden, prays the Commission
GRANT his Motion for Production of Employee Records; and ORDER
employees' records be made available and copied to Claimant no
less than 30 days before an oral hearing on the McLaim of ARKANSAS
Respectfully submitted,

Michael D. Bowden, pro se

Subscribed and sworn to before me, a Notary Public, on this 3/ day of December, 2014.

My Commission Expires on

IN THE ARKANSAS STATE CLAIMS COMMISSION

MICHAEL D. BOWDEN ADC #88956

V.

CLAIM #: 15-0432-CC

DEPARTMENT OF CORRECTIONS



RESPONDENT

MOTION FOR PRODUCTION OF ASSAILANTS' DISCIPLINARY RECORDS

COMES NOW, Michael D. Bowden, pro se, and for his Motion for Production of Assailants' Disciplinary Records, states:

Claimant has before the commission a claim for damages resulting from an assault on him on 14 December 2012. His claim against Respondent is for personal injury caused by Department of Correction employee negligence of duty to protect Claimant from harm.

Claimant avers that the assailants were known dangerous inmates escaped from their punitive barrack number eleven, and who had a long history of disciplinary action for violent assaults on other inmates, namely whites, as the Claimant. The disciplinary records are necessary to Claimant's case, and will provide the Commission record of assailants long history of violent acts, including assault on Claimant, and determinant of negligence of Respondent's duty to protect Claimant from harm.

Claimant moves for Commission to Order Respondent to produce assailants, Justin Cartwright, ADC# 140279 and, Ivory Johnson, ADC# 132361, complete disciplinary record for all violent acts

prior to and including the assault and injury of Claimant, and provide copy to Claimant no less than thirty days before an oral hearing on the claim.

WHEREFORE, Claimant, Michael D. Bowden, prays the commission GRANT his Motion for Production of Assailants' Disciplinary Records as requested above; and, ORDER assailants disciplinary records be made available and copy thereof to Claimant no less than thirty (30) days before an oral hearing on the claim.

Respectfully submitted,

Michael D. Bowden, pro se

ROBERT LMINGO
OF ARY PUBLIC STATE OF ARKANSAS
DESHA COUNTY
First Commission Expires 01-31-2021
Commission # 12392194

Subscribed and sworn to before me, a Notary Public, on this 3/, day of December, 2014.

My Commission Expires on

IN THE ARKANSAS STATE CLAIMS COMMISSION

MICHAEL D. BOWDEN ADC #88956

V.

CLAIM #: 15-0432-CC

DEPARTMENT OF CORRECTIONS

Stole Clolms Commission

JAN 0 7 2015

CELLINANT

RESPONDENT

MOTION FOR PRODUCTION OF VIDEO RECORDINGS

COMES NOW, Michael D. Bowden, $pro\ se$, and for his Motion for Production of Video Recordings, states:

Claimant has before the commission a claim for damages resulting from an assault on him on 14 December 2012. His claim against Respondent is for personal injury caused by Department of Correction employee negligence of duty to protect Claimant from harm.

Claimant avers that the assault on him was recorded on video feeds of five security cameras, and that known dangerous assailants escaped from punitive segregation barracks and waited in plain view of Respondent employees, D.Williams and S. Hudson, for an extended amount of time in violation of existing rules, presenting a clear and present danger to population inmates including Claimant. The video recordings will show both employees were aware of the assailants waiting in an area of their responsibility and that the area was restricted to assailants. The video recordings will show employee D. Williams was in close proximity of the assailants, aware of them having escaped into a

restricted area. The video recordings will show employee S. Hudson had clear view of the assailants, aware that they were in a restricted area, and carelessly failed to remove the assailants from the restricted area. These records are necessary to Claimants case, and will provide the Commission record of employees'action before and during the assault and injury on Claimant, and determinant of negligence of duty to protect Claimant from harm.

Claimant moves for Commission to Order Respondent to produce said video recordings, provide copy to Claimant and means to review recordings, no less than thirty days before an oral hearing on the claim.

WHEREGFORE, Claimant, Michael D. Bowden, prays the Commission GRANT his Motion for Production of Video Recordings; and, ORDE video recordings be made available and copy thereof to Claimant and means to review recordings no less than 30 days before an oral hearing on the claim.

Respectfully submitted,

Michael D. Bowden, pro se

Subscribed and sworn to before me, a Notary Public, on this 3/ day of December, 2014.

My Commission Expires on

MICHAEL BOWDEN (ADC # 088956)

CLAIMANT

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

RESPONSE TO CLAIMANT'S REQUEST FOR EMPLOYEE RECORDS, ASSAILANTS DISCIPLINARY RECORDS, AND VIDEO RECORDINGS

COMES NOW the Respondent, Arkansas Department of Correction, and for its Response to the Claimant's Request for Production, and responds as follows:

- 1. Response to Request No. 1. Employee records are not subject to disclosure to the inmates for the safety and security of the institution.. Furthermore, this action is not against the officers, but against the ADC. Claimant has failed to state any relevance that any previous file note has to this proceeding.
- 2. Response to Request No. 2: Claimant is not entitled to have the disciplinary records of other inmates pursuant to ACA Section 12-27-113(e)(2).
- 3. Response to Request no. 3: None known at this time. If found, this response will be supplemented. Arkansas Claims Commission

Respectfully submitted, Department of Correction Office of Counsel

Attorney Supervisor Post Office Box 8707 Pine Bluff, AR 71611 (870)267-6844 Office (870)267-6373 Facsimile

CERTIFCIATE OF SERVICE

____, 2015, on the below Claimant by placing a copy of the same in the U.S. Mail, regular postage to:

MICHAEL BOWDEN (ADC # 088956)

Varner Unit P. O. Box 600

GRADY, AR 71644-0600

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

MAR 0 2 2015

MICHAEL BOWDEN (ADC # 088956)

CLAIMATOT

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

ANSWER TO RESPONSE TO CLAIMANT'S REQUEST FOR EMPLOYEE RECORDS, ASSAILANTS DISCIPLINARY RECORDS, AND VIDEO RECORDINGS

COMES NOW, Claimant, Michael Bowden, *pro se*, and for his Answer to Response to Claimant's Request of Production, states:

- 1. With respect to Response to Request No. 1: The actions, or lack of actions, of ADC employees, G. Williams and S. Hudson were pertinent to the cause for Claimant's injury. Those actions, or lack of actions, were such that the security officers were negligent in their duty to protect Claimant from harm. Had these officers performed their duty, the Claimant would not have been harmed. These officers past actions may very well show a pattern of neglect, not necessarily resulting in inmate injury, but such that they were disciplined for their actions that could have ended in injury of worse. Any past disciplinary action showing a failure to maintain security of their assigned post, as in this case, is very much a matter for the Commission and this proceedings. Therefore, the Commission should order ADC to produce these officers records, if only for in-camera proceedings, for the fair determination of the facts.
- 2. With respect to Response to Request No. 2: It was known by security officers G. Williams and S. Hudson, that several escaped punitive inmates were loitering in a forbidden area were the assault of Claimant would occur for up to a half-hour before that assault. The disciplinary records of the inmates who attacked Claimaint are pertinent to the Commissions understanding that they were well known and had a lengthy disciplinary record of inmate-on-inmate assault. Therefore,

the Commission should order ADC to produce the assailants disciplinary records, if only for incamera proceedings, for the fair determination of the facts.

3. With respect to Response to Request No. 3: On the day of the injury to Claimant, ADC security officers at the Varner Unit, pulled, viewed, and preserved video recordings of events leading up to, during, and after the attack of Claimant, from multiple camera locations. That video does exist and would be in the possession of Varner Unit security, ADC Internal Affairs, and/or ADC Central Office because of the severity and liklihood of future legal action. The video recordings are known to show that lack of action by security officers G. Williams and S. Hudson before the attack on Claimant by failing to maintain security and control of their assigned area allowing known dangerous inmates who had escaped from punitive segregation to await for and attack Claimant to steal his Christmas package, injuring him in the process, and showing that assault on Claimant in detail resulting in him being unconscious and injured. Therefore, Claimant strongly objects to the Respondent's suggestion that no known video recordings exist, and demands production according to the rule.

Respectfully submitted,

Michael D. Bowden, pro se

ADC # 088956

Varner Unit

P.O. Box 600

Grady, AR 71644

IN THE ARKANSAS STATE CLAIMS COMMISSION

RECEIVED

MICHAEL BOWDEN ADC # 08956

CLAIMANT

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

REQUEST FOR PRODUCTION OF DOCUMENTS

COMES NOW, Claimant, Michael Bowden, *pro se*, and for his Request For Production Of Documents, states:

- 1. Claimant requests that the Respondent provide him with copy of the Post Orders in effect on 14 December 2012 for the posts of 11-12 Barracks, 13-14 Barracks, and 15-18 Barracks.
- 2. Claimant requests that the Respondent provide him with copy of the Post Records for the day shift on 14 December 2012 for the posts of 11-12 Barracks, 13-14 Barracks, and 15-18 Barracks.
- 3. Claimant requests that the Respondent provide him with copy of all 005 reports concerning the attack on Claimant on 14 December 2012, including but not limited to those written by Officer D. Williams (assigned to 13-14 Barracks) and by Officer S. Hudson (assigned to 15-18 Barracks).

Respectfully submitted,

Michael Bowden,, pro se

ADC # 088956

Varner Unit

P.O. Box 600

Grady, AR 71644

MAR 3 1 2015

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

RECEIVED

MICHAEL BOWDEN (ADC # 088956)

CLAIMANT

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

REQUEST FOR ADMISSIONS FROM D. WILLIAMS

COMES NOW, Claimant, Michael Bowden, *pro se*, and for his Request For Admissions From D. Williams:

The following request of admission is directed to Arkansas Department of Correction employee, Officer D. Williams. Claimant requests these admission be responded to within thirty (30) days, pursuant to Ark. R. Civ. P. Rule 36. Claimant requests that Officer D. Williams verify the response with his signature.

ADMISSION NO 1: You admit that you were an employee of the Arkansas Department of Correction on 14 December 2012.

ADMISSION NO 2: You admit that on 14 December 2012, you were working at the Varner Unit, Grady, Arkansas.

ADMISSION NO 3: You admit that on 14 December 2012, you were assigned to the 13-14 Barracks post.

ADMISSION NO 4: You admit that on 14 December 2012, you were the only officer posted on the 13-14 Barracks post.

ADMISSION NO 5: You admit that prior to 14 December 2012, you had complained to your supervisors about the short of under staffing problem.

ADMISSION NO 6: You admit that on 14 December 2012, you referred to the barracks 11-14 as "AdSeg" barracks.

ADMISSION NO 7: You admit that on 14 December 2012, the inmates in the so called "AdSeg" barracks were not on Administrative Segregation but on Punitive Segregation, but still segregated from population.

ADMISSION NO 8: You admit that on 14 December 2012, the inmates in 11-14 barracks were never to be in contact with population inmates.

ADMISSION NO 9: You admit that on 14 December 2012, that the shower located in the 13-14 barrack hallways was used exclusively by the inmates in the AdSeg barracks.

ADMISSION NO 10: You admit that on 14 December 2012, you were aware that Christmas mail-order packages were being delivered to population inmates.

ADMISSION NO 11: You admit that on 14 December 2012, you were aware that no inmates in the AdSeg barracks were allowed to receive a Christmas mail-order package.

ADMISSION NO12: You admit that on 14 December 2012, you were aware that population inmates in the "new building" were carrying their Christmas packages from the visitation yard to the new building unescorted.

ADMISSION NO 13: You admit that on 14 December 2012, you saw one or more inmates from the AdSeg barracks in the tunnel (the connector from the main building to the new building).

ADMISSION NO 14: You admit that on 14 December 2012, that the tunnel area is considered a part of the 15-18 barracks post and an extention of that hallway.

ADMISSION NO 15: You admit that on 14 December 2012, that the tunnel area was out-of-bounds to inmates housed in the AdSeg barracks.

ADMISSION NO 16: You admit that on 14 December 2012, that the tunnel area was for population inmates coming from or going to the new building (barracks 15 to 22).

ADMISSION NO 17: You admit that on 14 December 2012, that any inmate from the AdSeg barracks in the tunnel area would have been considered out of place of assignment, a 3-1 violation.

ADMISSION NO 18: You admit that on 14 December 2012, you were aware of one of more inmates from the AdSeg barracks in the tunnel area but did not take action to remove them.

ADMISSION NO 19: You admit that on 14 December 2012, you were made aware of an assault on Claimant in the tunnel area well after you noticed one or more inmates from the AdSeg barracks in the same tunnel.

ADMISSION NO 20: You admit that on 14 December 2012, you saw the inmates for the AdSeg barracks running from the tunnel, one carrying a Christmas mailorder package, through your assigned area of 13-14 barracks hallway, and through Riot Gate North #3, and that you made no attempt to stop them.

ADMISSION NO 21: You admit that on 14 December 2012, you made no attempt to remove the inmates from the AdSeg barrack while they loitered in the tunnel area well before the attack on Claimant.

ADMISSION NO 22: You admit that after 14 December 2012, you made the comment to a third-party inmate about the attack in which you stated that you had complained to your supervisors about short staffing.

ADMISSION NO 23: You admit that after 14 December 2012, you made the comment to a third-party inmate about the attack in which you stated that you had a fear of the AdSeg inmates because you were alone at your post.

ADMISSION NO 24: You admit that after 14 December 2012, you made the comment to a third-party inmate about the attack in which you stated that you were aware of the inmates from the AdSeg barracks in the tunnel area on the day of the attack.

ADMISSION NO 25: You admit that after 14 December 2012, you made the comment to a third-party inmate about the attack in which you stated that you considered the tunnel area that the inmates from the AdSeg barracks were in as the responsibility of Officer S. Hudson (posted on 15-18 barracks).

ADMISSION NO 26: You admit that after 14 December 2012, you made the comment to a third-party inmate about the attack in which you stated that "ADC was at fault" and that "Bowden should get paid."

ADMISSION NO 27: You admit that after 14 December 2012, that at the time of the attack on Claimant by the AdSeg inmates, there was mass movement of inmates due to the fact that it was lunch mealtime.

ADMISSION NO 28: You admit that after 14 December 2012, that your post orders directed you to be in the hallway during mealtime and mass movement of inmates.

ADMISSION NO 29: You admit that after 14 December 2012, that your post or general orders were to ensure movement of inmates, and to avoid any stoppage or loitering.

ADMISSION NO 30: You admit that after 14 December 2012, that the inmates from the AdSeg barracks were unescorted and loitering in the tunnel and, in fact, had escaped from direct supervision and control of the officer assigned to 11-12 barracks.

Respectfully submitted,

Michael D. Bowden, pro se

ADC # 088956

Varner Unit

P.O. Box 600

Grady, AR 71644

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

MICHAEL BOWDEN (ADC # 088956)

CLAIMANT

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

RESPONSE TO CLAIMANT'S REQUEST FOR ADMISSIONS FROM D. WILLIAMS

COMES NOW the Respondent, Arkansas Department of Correction, and for its Response to the Claimant's Request for Admissions from D. Williams, and responds as follows:

1. Response to Requests 1-30: Objection. Requests for Admissions are only addressed to parties. Officer D. Williams is not a party to this action.

Respectfully submitted,

Arkansas **St**ate Claims Commission

Department of Correction Office of Counsel APR 3 0 2015

RECEIVED

Tria Wills Wilkens

LISA MILLS WILKINS Ark. Bar #87190

Attorney Supervisor Post Office Box 8707 Pine Bluff, AR 71611 (870)267-6844 Office (870)267-6373 Facsimile

CERTIFCIATE OF SERVICE

I certify that a copy of the DISCOVERY RESPONSE has been served this 30 day of 2015, on the below Claimant by placing a copy of the same in the U.S. Mail, regular postage to:

MICHAEL BOWDEN (ADC # 088956) VARNER UNIT P. O. Box 600 GRADY, AR 71644-0600

LISA MILLS WILKINS Ark, Bar #87190

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

MICHAEL BOWDEN (ADC # 088956)

CLAIMANT

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

RESPONSE TO CLAIMANT'S REQUEST FOR ADMISSIONS FROM S. HUDSON

COMES NOW the Respondent, Arkansas Department of Correction, and for its Response to the Claimant's Request for Admissions from S. Hudson, and responds as follows:

1. Response to Requests 1-17: Objection. Requests for Admissions are only addressed to parties. Officer S. Hudson is not a party to this action.

Arkansas

State Claims Commission

APR 3 0 2015

Respectfully submitted,

Department of Correction Office of Counsel

RECEIVED

LISA MILLS WILKINS Ark. Bar #87190

Attorney Supervisor Post Office Box 8707 Pine Bluff, AR 71611 (870)267-6844 Office

(870)267-6373 Facsimile

CERTIFCIATE OF SERVICE

I certify that a copy of the DISCOVERY RESPONSE has been served this 30 day of Mail, regular postage to:

MICHAEL BOWDEN (ADC # 088956) VARNER UNIT P. O. Box 600 GRADY, AR 71644-0600

LISA MILLS WILKINS Ark. Bar #87190

Arkansas State Claims Commission

MAY 2 7 2015

RECEIVED

Michael D. Bowden ADC # 088956 Varner Unit P.O. Box 600 Grady, AR 71644

25 May 2015

Arkansas Claims Commission 101 E. Capitol Ave, Suite 410 Little Rock, AR 72201

RE:

Michael Bowden #088956

Claim # 15-0432-CC

Vs.

AR Dept. Of Correction

Dear Sirs:

Enclosed please find my final discovery for the hearing. This includes proof of a video recording of the incident that the ADC claims does not exist, wherein can be seen loitering —and hooded — inmates who attacked and left me harmed and unconscious. Also, included is proof of exhaustion, and ADC's attempt to thwart my efforts to grieve this issue.

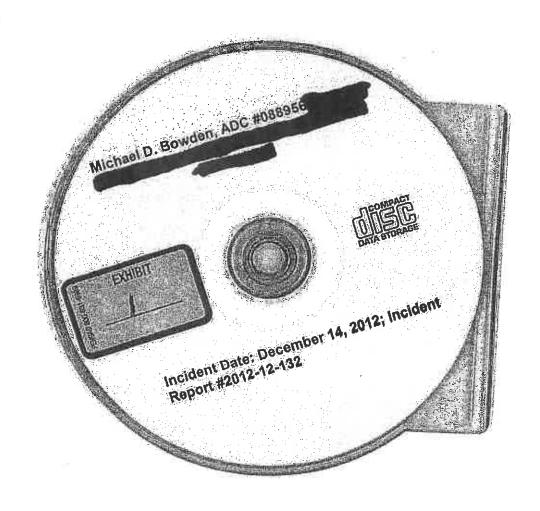
Fair and due process includes that *both* parties make available all the pertinent evidence, rather than claim they are doing so. It is clear from the lack of providing this video, which I have marked as "1" through "5", that ADC is continuing to attempt to thwart even *these* proceedings as well. I pray the Commission will take that into consideration when the hearing is conducted next month.

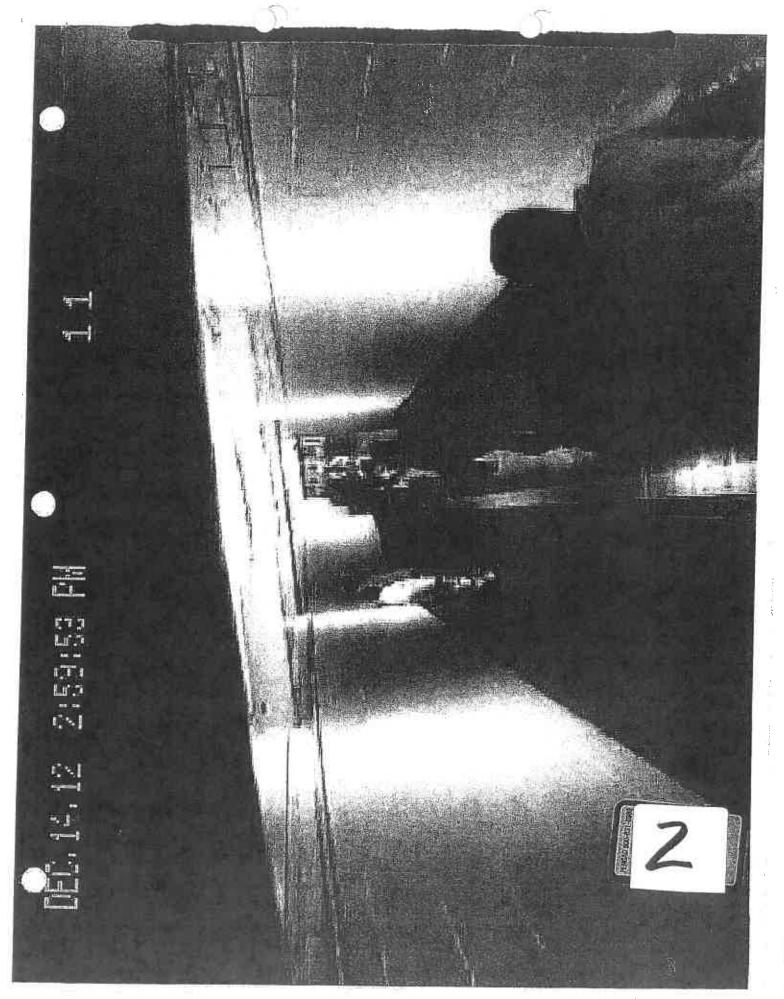
Thank you,

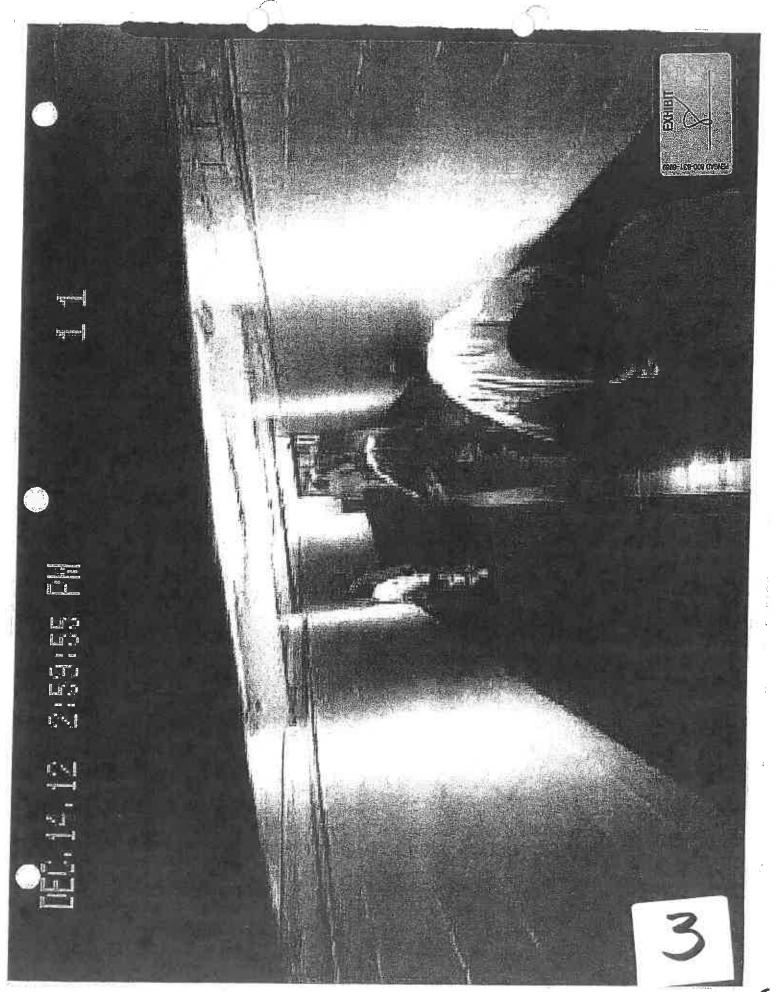
Michael D. Bowden, pro se

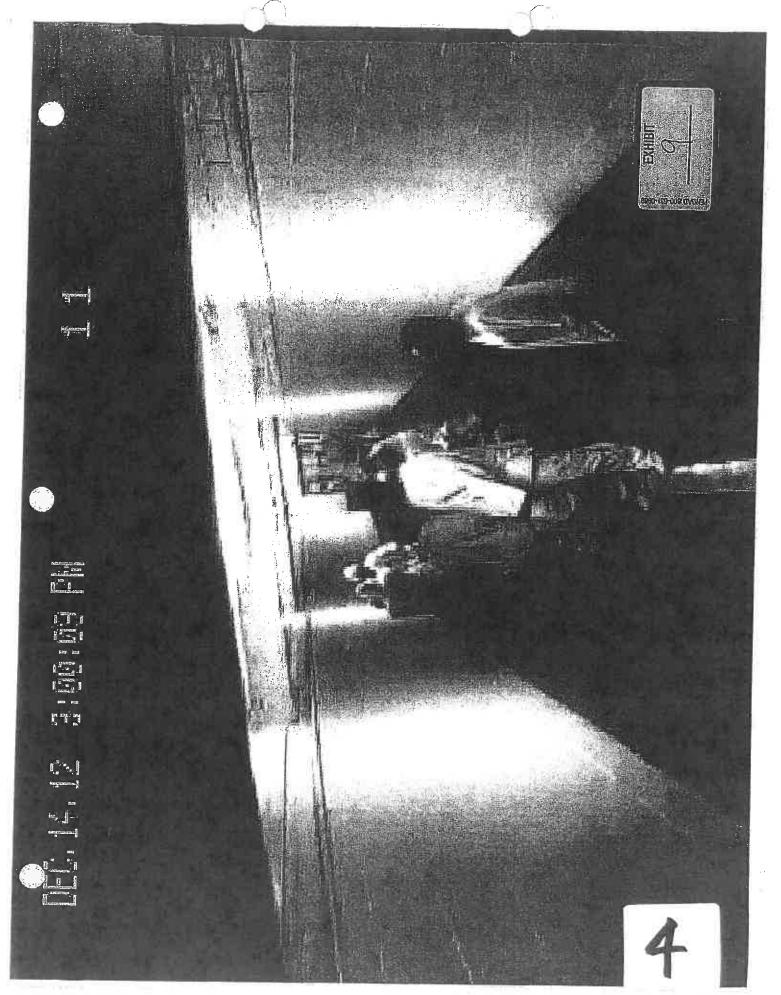
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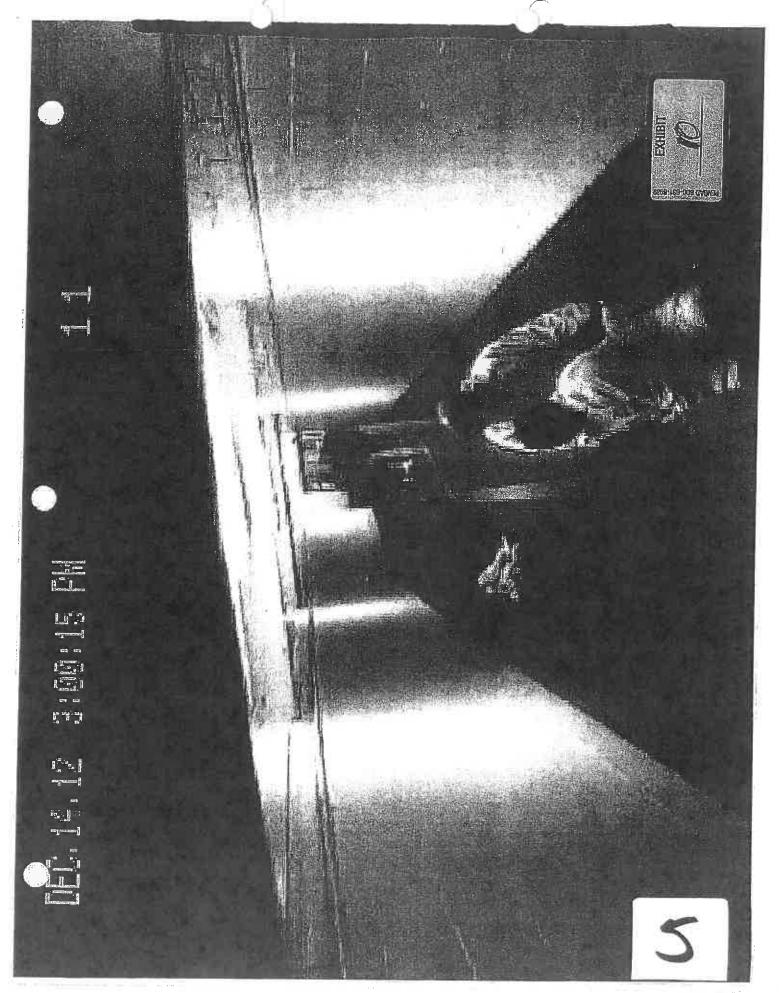
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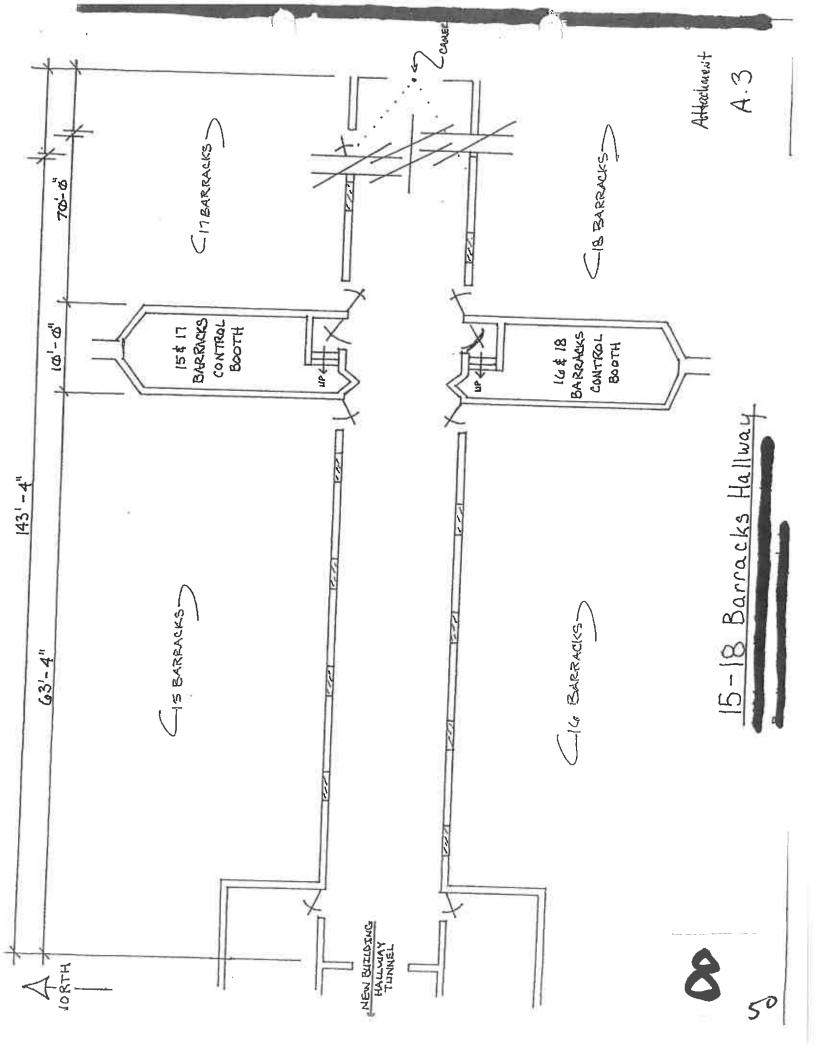












Unit Center M (Attachment I)	
Unit/Center Vaine	FOR OFFICE USE ONLY
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ADC# 88956 Brks # 17 Job Assignment Roke Terran	Date Received:
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(Date) STEP TWO: Formal Grievance (All complaints/concerns should lifthe issue was not resolved during Step One, state why: (Date) EMERGENCY GRIEVANCE (An emergency situation is one in a substantial risk of physical harm; emergency grievances are not for ordinary probablem. If you marked yes, give this completed form to the designated problem-so attached emergency receipt. If an Emergency, state why:	which you may be subject to plems that are not of a serious plying staff, who will sign the
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involved and how you were affected. (Please Print):	ate, place, name of personnel
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	9
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DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grievance Office to Inmate After Completion of Step One and Step Two	er; ORIGINAL-Given back 5

UNIT LEVEL GRIEVANCE I M (Attachment I)
Unit/Center Vacae (Attachment I) FOR OFFICE USE ONLY
Name Cruden M.
ADC# 8895(0 Bries# 17) Date Received:
Job Assignment College 42
(Date) STEP ONE: Informal Resolution
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-nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why
attached emergency receipt. If an Emergency, state why:
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of the person in that department receiving this form: (Yes or No). If yes, name Date
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DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grievance Officer; ORIGINAL-Given back 50 to Inmate After Completion of Step One and Step Two

UNIT LEVEL GRIEVANCE M (Attachment I)	
Unit/Center VALNE M (Attachment I)	FOR OFFICE USE ONLY
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	GRV. Code #:
Z 14 Z (Date) STEP ONE: Informal Resolution	*
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If the issue was not resolved during Step One state why:	itist be handled informally)
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attached emergency receipt. If an Emergency, state why:	iving staff, who will sign the
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Is this Grievance concerning Medical or Mental Health Services? No If yes, cir BRIEFLY state your one complaint/concern and be specific as to the complaint, dainvolved and how you were affected. (Please Print):	rcle one: medical or mental
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	Date
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staff Signature & Date Returned	
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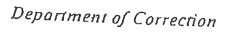
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Report of Stolen Property

	Date: 12-14-12
To: MAJOR BOLTOD, Chief Security Offi	icer
Name: Bowden, MICHAEC NO. 8	38956
Description of Property:	39

Give Complete Detail of Property and Where Property was last Seen:

	r open y was last Seen:
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Inmate's Signature

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ARKANSAS DEPARTMENT OF CORRECTION **VARNER UNIT** INTER-OFFICE COMMUNICATION

TO:

Inmate Bowden, Michael ADC #088956 BKS 17-31 world

FROM:

Sharon L. Cantrell, Grievance

RE:

Pink copies of grievances

DATE:

March 7, 2013

Attached are your three pink copies of your Step One (1) Informal grievances. I inadvertently picked these up with some other papers and placed them in my notebook. Sgt. Burchfield asked me about them last night; she said you had asked her about them. I apologize for any inconvenience this may have caused.

Cc: File

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UNIT LEVEL GRIEVANCE F M (Attachment I)	
Unit/Center Value (Attachment I)	FOR OFFICE USE ONLY
No.	
ADOUGO COLL	GRV. #
Job Assignment Hole	Date Received:
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UNITLEVEL GRIEVANCE L M (Attachment I)	
Unit/Center Vacales (Attachment I)	FOR OFFICE USE ONLY
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Unit/Center Vo-	
Unit/Center Variety (Attachment I)	FOR OFFICE USE ONLY
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	Date Received:
	GRV. Code #:
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Inmate Signature 12/14/1	7
If you are harmed/threatened because of your use of the grievance process, report it immed THIS SECTION TO BE FILLED OUT BY STAFF O	
THIS SECTION TO BE FILLED OUT BY STAFF O	diately to the Warden or design
This form. was received on (data) and I	NLX
(Yes or No). This form was forwarded to medical or mental health?	(Yes or No) If yes name
	Date
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff PRINTED WITE	
Describe action taken to resolve complaint, including tarted	Date Received
assue is finder withing	tigation
JAN 28 2013	
Succes: Martalla 1	
Staff Signature & Date Returned O Date I This form was received on 1-21 (2 (date) pursuant & Standard Signature & Date I	Received
This form was received on 1-3:1 (* (dale), pursuant to Step Two. Is it an Émergen Action Taken.	cy? (Yes or No).
Action Taken Land Land Land Region and Land Land Land Land Land Land Land	ite: 124.13
If forwarded, provide name of person receiving this form:)ate: 1-24-13
	:e:
DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grieva to Inmate After Completion of Step One and Step Two	RIGINAL-Given back 6
The same of the Completion of Step () ne and Step Two	

IGTT410 3GS

Attachment III

INMATE NAME: Bowden, Michael D.

ADC #: 088956A

GRIEVANCE #: VU-13-00159

WARDEN/CENTER SUPERVISOR'S DECISION

In response to grievance VU-13-00159 you stated that "I've sent three copies, the white, blue, and pink of my grievances in December as a result of the attack on my person and theft of my christmas package, to Ms. Bennett, yet I have not received any acknowledgement."

According to Inmate Grievance Coordinator Mrs. Carolyn Bennett records show that the grievance office has only received one grievance in the month of December 2012 which was a medical VU-12-2102. All grievances are processed according to AD 12-16 Inmate Grievance Procedure. According to the grievance policy AD 12-16 the inmate must submit a step one informal grievance to the problem solver or Sergeant or above and if they do not respond or if the inmate does not agree with the response the inmate has three days to proceed to a step two formal grievance. When an inmate chooses to go to step two the grievance then becomes a formal grievance. The inmate must then submit either the white, pink or yellow copy of the grievance with a date and justification of why the inmate is proceeding to a step two formal grievance. If you reside in the Varner Unit Control Booth and if you reside in the Varner Super Max then you will give your step two formal grievances to the problem solver or Sergeant or above who will then drop it in the grievance box. If you do not submit your step two formal grievances to the grievance office then it can not be processed as a grievance. Therefore I find this grievance without merit.

RECEIVED

Signature of Warden/Supervisor or Designee

APR 1 6 2013

Title Her

4-3-12 Date

INMATE GRIEVANCE SUPERVISOR ADMINISTRATION BUILDING

INMATE'S APPEAL

If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision to the original grievance. Do not list additional issues, which are not part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? THE ABOVE DECISION IS IN ERROR. I dropped four grievasces (abili) in the grievance box on 12 120/12. Three were on the assault the fourth was medical. All in them had the same reason for Proceeding to site two: "Soft Mingo and Soft tester remised to sign." Only the medical avievance has been responded to. The three others grieve: (1) ADC creating a deorgerous situation where assaults by AdSeq innates on regular sopulation is common! (2) my proporty (valued at \$100) was stolen as a result of the assault obd. (3) two criticers to led to marking Security over AdSeq innates allowing them to gather and assault me in plain sight or one oricer who remised to marking After no response I had Soft Burchield sign and take the blue and plain sight or one oricer who remised to react. Sharon Cantrell, who wrote on the place topics. "This issue is under investigation." It is the grievance officer could be toget these grievances processed, but the start at Vancar reas such grievances and have remised to act if you them, and have deliberately deviated from AD 12-16, in afternot to bury my meritorious clains.

Meilad Bouden

Inmate Signature

88956

ADC#

4-8-13

Date

STATE LAIMS COMMISSION DOCKET

19	OPIN	IION	
Amount of Claim \$	===0		15-0432-CC
		Attorneys	·
Michael Bowden #088956	Claimant	y	Pro se
Vs.			Claimant
AR Department of Correctio	ns Respondent		Lisa Wilkins, Attorney
State of Arkansas	washoudeut		Respondent
Date Filed December 9, 2014	-	Type of Claim _	Personal Injury, Failure to Follow Procedure, Mental Anguish & Pain
	FINDING OF	FACTS	& Suffering
Present at a hearing June 10 represented by Lisa Wilking The Claims Commission he Claimant's failure to prove part of the Respondent. Therefore, this claim is held.), 2015, was the os, Attorney. Treby unanimously by a preponderar	Claimant, pro se, ly denies and dist	and the Respondent,
	(See Back of Opinio	on Form)	
	CONCLUSIO	ON	
Upon consideration of all the denied and dismissed this clathe evidence any liability on Date of Hearing June 10, 2015 Date of Disposition June 10, 2015	facts, as stated alaim for Claiman the part of the l	pove, the Claims It's failure to pr Respondent.	ove by a preponderance of
	-	Jallon	Commissioner

JUL 06 2015

IN THE ARKANSAS CLAIMS COMMISSION

MICHAEL D. BOWDEN ADC # 088956

V.

NO. 15-0432-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

NOTICE OF APPEAL

COMES NOW, Claimant, Michael D. Bowden, pro se, and for his Notice of Appeal, states:

- Claimant appeals to the General Assembly form the decision by the Arkansas Claims 1. Commission denying relief.
- 2. Claimant designates the entire record for appeal.

Respectfully submitted,

Michael D. Bowden, pro se

STATE OF ARKANSAS

COUNTY OF LINCOLN

My commission expires on:

SUBSCRIBED AND SWORN TO, before me, a Notary Public, on this