for Just claim

Please Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

State Claims Commission Arkansas AUG 0 1 2014

BEFORE THE STATE CLAIMS COMMISSION

Of the State of Arkansas

RECEIVED

(Day)

(Year)

Inches Miss					
Miss Kenneth Pitts, #0.8593@interest Vi. State of Arbaness, Respondent Dept. of Corr. COMPLAINT Follow Proceedure Remeth Pitts, #0.8593@interest COMPLAINT Follow Proceedure Remeth Pitts, #0.95938 The above named Chebaurt, of 2501. State Farm Rd, Tucker, AR 721 (Santo (Code) (Dystane Fune No.) (Santo (Code)) (Dystane Fu	□ Mr.			Do Not Write i	n These Spaces
Notes Rependent Dept. of Corr. COMPLAINT Follow Proceedure Renneth Pitts, #095938 the above assent Caleman, of 251 State Farm Rd. Tucker, AR 721 County of Difference of Corr. COMPLAINT Follow Proceedure Renneth Pitts, #095938 the above assent Caleman, of 251 State Farm Rd. Tucker, AR 721 County of Difference of of Diffe			Claim N		7.00
Amount of Chinn 9 36.42 Pand DOC COMPLAINT FOLLOW Procedure Kenneth Pitts, #095938		En		- 2 101 3	90
State of Arkansas, Respondent Dept. of Corr. COMPLAINT Follow Procedure Kenneth Pitts, #095938	Kenr	leth Pitts, #08593@lain	ant		
Dept. of Corr. COMPLAINT Follow Procedure Kenneth Pitts, #095938	vs.		Amount	of Claim \$36	.42
COMPLAINT Follow Procedure Kenneth Pitts, #095938 the above named Colument, of 2501 State Farm Rd, Tucker AR 721 (Cox) (Street of File 2) (State Cox) (Desired Frome No.) (Street and No.) (Cox) (Desired Frome No.) (Street and No.) (Cox) (State Cox) (Desired Frome No.) (Cox) (State Cox) (Sta	State of Arkansas, Respondent		Fund I	00C	
Kenneth Pitts, #095938 the above named Chimans, of 2501 State Farm Rd. Tucker, AR 721 (State) (Potal) (Deputed Prime No.) 1. 2165-8013 (State) (Op Ood) (Deputed Prime No.) (Strot and No.) (Cip) (State) (Op Ood) (Potal No.) (Dept. of Corr.				
Country of Affects of F.D. 8 No.) (Chy) (State of Affects of Aff		COMPL	Loss of AINT Follow	of Proper 7 Procedu	ty, Failure to re
(Since of F.D. & R.) (Since of F.D. & R.) (Since of F.D. & R.) (Since of R.D. & R.) (City) (Since of R.D. & R.) (City) (Since of R.D. & R.) (Since of R.D. & R.) (Since of R.D. & R.) (City) (Since of R.D. & R.) (Since of R.D. & R.) (City) (Since of R.D. & R.) (City) (Since of R.D. & R.) (Since of R.D. & R.) (City) (Since of R.D. & R.) (City) (Since of R.D. & R.) (City) (Since of R.D. & R.) (City) (Since of R.D. & R.) (City) (Since of R.D. & R.) (Since o	Kenneth Pitts, #09593	8, the above named Claimant, of	2501 State	Farm Rd	, Tucker, AR 721
(City) (State) (City) (State) (City) (Free No.) (Free N	In. 72168-8713	county of Offerson	correct or i	Cr.D. & No.)	(City)
Amount cought of Section or service (1916 1) 2014 May remained that the service of the service o			(Legal Counsel, if an	y, for Claim)
Amount sought I 31 47 Touch, day, your and place of incident or cervice. I 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Street and No.)	(City) (State) (Zip Code) (Phon	ie No.)	
South of the state	ate agency involved:	ll.	Amount sought:	931 WY	(=====,
ALL MARKETS AND THE PROPERTY OF THE PROPERTY O	lonth, day, year and place of incident or servi	100: Acres 11. 2014 N	* - F	1111	1 1 "
The state of the statement, and showers the following action was taken thereon: (City) (State) (City) (State) (City) (State) (City) (State) (State) (City)		AS JOHN THE CO. LOW	A to a di	The Inop	International
The state of the statement, and showers the following action was taken thereon: (City) (State) (City) (State) (City) (State) (City) (State) (State) (City)	solution for Sixty (LE) No	and the late of the	Ch I I	parany Any	Seat to west
That I have been a superior of the superior of	LOS TAMBUTANA BASE	+ Welle Con and William	A ARST METERS	LIBERI CATTO	rung wast Toughtin
The state of the statement, and showers the following action was taken thereon: (City) (State) (City) (State) (City) (State) (City) (State) (State) (City)	assic (And Company Very	The "Thought of a	interpenties 1 H	out a Tai	A CIT White Kerbole
The state of the statement, and showers the following action was taken thereon: (City) (State) (City) (State) (City) (State) (City) (State) (State) (City)	why worm them Book in	ders come to the But I	Bell or a low	Jun 11 B	Stone IN 2007. 1
That I have been a properly to the properly to	sporter than fiver (5) on S	ex (4) Times out of the	e needs I he	History	breed was and
The Understand of the first the same and address the same of the same and address the same of the same	of and still Mars I pro	sed over 8 30.00 dellers	Por thouse	-11. 91.	THE WALL THE THE
And the complete the state of t	dekelly are the Proper	enter Proper Suppresson De	los Wers Consen	-1 mount	· Shad by
The UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above compluint, and that he or she verify believes they are true. Continued to the statement of the state department of officer thereof? Continue of the state department of officer thereof? Continue of the state department of officer thereof? Continue of the state of the state department of officer thereof? Continue of the state of the state department of officer thereof? Continue of the state of the sta	bute deads on a ADE July	made General Property Di	centrony Record	For RH	1-14 G. H. Steven "
The UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint. THE UNDERSIGNED states on oath that he or sh	aft to top things prices	Hole wast Teleffer I AM.	du de que.	De Southle	carro Huna Ordan
And the second of the company of the	ekto yen as ske gotto	then from you she	5 the can who	A OSHEAN	We Descoud Deele &
And the second of the company of the	of Should have Brighing ut.	to me to make show the	the person!	presit."	var author The
The UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint. THE UNDERSIGNED states on oath that he or sh	adding it area to arrive	ade them not a personal	property rom	- Sugar	Sea I House landt
The UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint. THE UNDERSIGNED states on oath that he or sh	publical Mustice her Soucas'()	I clears and lique beca in	had best at I	he prince	Me Hole Form Lines
sparts of this complaint, the claimant makes the statements, and answers the following questions, as adicated: (1) Has claim been presented to any state department or officer thereof? (Yes or No) (West) (Street or R.F.D. & No.) (City) (State) (State) (State) (State) (City) (State) (City) (City) (State) (City) (City) (City) (State) (City) (City) (City) (City) (City) (State) (City) (City) (State) (City) (City) (City) (City) (City) (State) (City) (Cit	onse 2001) 2005, 2009, 2000	,2011 2012 And 2013 And 1	up propert ha	us wat be	of Stolen on my Red
sparts of this cerein laint, the claimant makes the statements, and answers the following questions, as adicated: (1) Has claim been presented to any state department or officer thereof? We or No) (West) (State) (State) (State) (State) (State) (State) (City) (Cit	Cotos Brown Come to Mic	remains Scending level As	much 14,203	dow They	LALL HOLL Stoler AL
sparts of this cerain laint, the claimant makes the statements, and answers the following questions, as adicated: (1) Has claim been presented to any state department or officer thereof? (Yes or No) (West) (Street or R.F.D. & No.) (City) (State) (State) (State) (State) (State) (City) (State) (City) (State) (City) (City) (State) (City) (City) (State) (City) (H A C C C	in Just 11, 2011 about 12:	10 mm on 1215	Ba- Some	John Doe sat male
(Yes or No) (Manth) (Day) (Year) is whon? Safe Melly, Rengand Property, Supervision M. S. 21. (Yes or No) (Manth) (Day) (Year) is and that the following action was taken thereon: (Department) (Depart	E THE MODERAL RECORD IT YOU	116 Segular But distant Si	gred Anton	Staging I	Recount all mapes
(Year) and that the following action was taken thereon: (Name) (Street or R.F.D. & No.) (City) (State) (Signature of Claimant/Representative) SWORN TO and subscribed before me at (City) (State) (City) (State) (City) (State) (Signature of Claimant/Representative) (Signature of Claimant/Representative) (City) (State) (City) (City) (State) (City) (parts of this complaint, the claimant makes the sta		1 11 1		ate department or officer thereof?
(Name) (Street or R.F.D. & No.) (City) (State) (Zip Code) that the nature thereof is as follows: and was acquired on in the following manner: THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verify believes they are true. TR. Heast seth Roy Pitts #85938 (Print Claimant/Representative Name) SWORN TO and subscribed before me at (City) (State) SWORN TO and subscribed before me at (City) (State) On this On	(Yes or No) (Month) (Da	(Year)	selly, lergenand	(Department)	APRICA COM. M.S. 24.
that then sture thereof is as follows: :and was acquired on in the following memore: :and	that \$ 1011 was paid th	nereon: (2) Has any third person or corporation	an interest in this claim?	Noxe	_; if so, state name and address
THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verily believes they are true. AR. Hearneth Roy 14th #85938 (Print Claimant/Representative Name) SWORN TO and subscribed before me at (City) (State) On this		(Street or R.F.D. & No.)	(City)	(State)	(Zip Code)
City) (City) (State) OTARIO (Date) My Commission Expires: 12. Measueth Roy Pitts #85938 (Signature of Claimant/Representative) (Signature of Claimant/Representative) (City) (City) (City) (City) (State) (Year)		: and was acquired on			in the following menner:
City) (City) (City) (State) OTAR OF COMMISSION Expires: (City) (City) (State) OTAR OF COMMISSION Expires: (City) (City) (City) (State) OTAR OF COMMISSION Expires: (City) (City) (City) (City) (State) OTAR OF COMMISSION Expires: (City) (City) (City) (City) (State) OTAR OF COMMISSION Expires: (Notary Public)	THE UNDERSIGNED states on oath that	t he or she is familiar with the matters and	things set forth in the abo	ve complaint, and	that he or she verily believes
(City) (State) SWORN TO and subscribed before me at (City) (State) On this D day of State (Date) (Month) (Year) FI-R7/91 (Motary Public)	t they are true.			2	
SWORN TO and subscribed before me at (City) (State) On this D day of State O		F86938 SMR.1		lette #	85938-7/30/20
(City) (State) on this D day of State OTAR SO (Date) (Date) OTAR SO (Year)	(r imt Camadorepresentative f	чаше)	(Signature o	f Claimant/Rep	resentative)
on this D day of St. Dot (Year)	sv	VORN TO and subscribed before me at_	Luce		An
on this D day of St. Dot 4 (Control of the state of the	and the			(City)	
(Pate) (Date) (Date) (Obstex) (Obstex) (Date) (Obstex) (Obs	AL)	on this	of Add	(Oxig)	
T- R7/9 My Commission Expires: 12-24-201	A STANSON NO. 128 VO		OI NOTE	(MIII) (No. 14)	
My Commission Expires: 12-201	S SAUTARLE ON	(Date)	1	(Month)	(Year)
My Commission Expires: 12-24-301	1 2 2		XX91	the team	150-
My Commission Expires: 12 26 301	1- R7/9		_	Notary Publ	ic)
(Month) (Dav) (Year)	Diplines .	My Commission Expires:	13-26-2015	- 0	
			(Month)	(Day)	(Year)

property on Tuesday Gune 10, 2014. Which this is an very bad ideal ax her half for not letting this male Sergent Know He Should make show that the prisoners should have received all his on her personal property.

Sergent ons Kelly have fainbure to Security my personal property of my Reabak's Classic (All Canulas) Termine Shees from 3/25/14 To 6/10/14

Sat. Kelly are leak of due process of societing prisoner personal property in making show MR. K. R. Paths #85938 should have receive his Rockokis Classic all canaus Tearnies shows and June 10, 2014. at 12'. 10 km on 12:15 km. Also if I was getting out that next day of this above date and time. She should have brought my personal perperty and Willendorg at the me that gence 9, 2014 before the went home to make show herself I had all my personal property. Size 12 Rockok Classic (ALL CANVAS)"

in her hands serve 3/25/2014 to 6/10/2014.

State Claims Commission 7/30/2014

RECEIVED

Trust Fund Resident Activity

Proof of money when Teni

<i></i>	1 rust run	u Resident	Activity	Short	s was	Boughi	arc
me	First Name	Class	Unit	Building	Pod	Bed	
						1	

Resi	den P	erson	al ld	Last	Name	First Name	Class	L G	Unit	Building	Pod	Bec	
0859	938 0	35938	8	Pitts		Kenneth	Gene	ral P	Cummins	A01	BK16	340	U
Beg	inning B	alanc	k	16								EM.	
													\$0.00
Task	. No	1	Date	75	Task	CARRY OF T	Check	Co	mment				Amount
	2718	7718	/15/2006	1:	Intake			Au	tomated Inta	ke			\$0.00
*	2729	845 8	/17/2006	2:	Sale								\$0.00
4	2748	1718/	/25/2006	3:	Automated Pay	ment		Au	g 24, 2006				(\$3.00)
*	2753	4108/	/29/2006	1:	Transfer From	Unit		Au	tomated Tran	ısfer			\$0.00
	27534	1108/	/29/2006	1:	Transfer To Ur	ıit		Au	tomated Trar	sfer			\$0.00
	27656	5189/	/5/2006 4	1:4	ROA			Bar	bara L Casey	7			\$50.00
•	27753	879/	/7/2006 8	3:4	Sale								(\$44.47)
	27890	85 9/	/12/2006	3:	Sale								(\$1.79)
*	27905	859/	/13/2006	9:	Change Card#								\$0.00
*	28005	15 9/	18/2006	3:	Automated Pay	ment		Sep	17, 2006				(\$3.00)
*	28347	53 9/:	29/2006	5:	Group Disburse	ement	57042						\$0.00
3	28450	8010)/4/2006	10	Sale								(\$0,74)
3	28605	49 10	0/10/200	5 3	Sale								\$0.00
*	28865	83 10	0/20/2000	5 1	Sale			Rev	ersed Task N	lo. 2845080			\$0.74
+	29362	48 11	/9/2006	3:	Sale		1						(\$0.74)
Ð	30043	69 12	2/8/2006	2:	ROA			Pru	dential Finan	cial/Death Be	enefit/08593	3	\$2,752.12
	30118	19 12	/12/2006	5 8	ROA			Нар	py Holidays				\$6.00
*	30264	34 12	2/12/2006	3	Sale								(\$41.20)
0	30264	48 12.	/12/2006	3	Sale								\$1.95
*	30366	36 12.	/14/2006	35	Sale								(\$20.97)
•	30453	12 12	/18/2006	2 5	Sale								(\$25.34)
*	30526	08 12	/19/2006	3 5	Sale								(\$20.68)
Ð	30586	75 12	/21/2006	3	Automated Payr	nent		Dec	20, 2006				(\$3.00)
*	30627	77 12/	/21/2006	35	Sale								(\$11.90)
E	30775	12 12/	/28/2006	5 5	Sale								(\$31.73)
+	308010)3 1/2	2/2007 8:	4 5	Sale								(\$17.41)
•	308164	1/2	2/2007 12	2: (Group Disburse	ment	61280	As o	f 1/2/07				\$0.00
	308412	23 1/2	2/2007 4:	0 S	Sale		ji						(\$44.91)
	309300)5 1/4	/2007 3:	1 S	Sale								(\$20.01)
÷	309547	2 1/5	7/2007 11	: R	Resident Withdr	awal	61676	K. Pi	itts #085938/	Brother's ch	ristmas gift		(\$50.00)
4	309590	7 1/5	/2007 1:	0 R	Resident Withdr	awal	61743	Mr. S	Sylvester Var	Buren, II/Fo	r Pastor		(\$2,000.00)
+	310409	0 1/9.	/2007 2:	0 R	ROA			Carlt	on & Betty I	nyeard			\$20.00
*	310624	9 1/9	/2007 3:	3 S	ale								(\$43.55)
*	311257	3 1/1	1/2007 9	: S	ale								(\$21.03)

-		1	T	To: 7/24/	2007	2 01 3
1	3113	519 1/11/2007 1	2 Sale			(\$34.45)
+	31139	941 1/11/2007 1	Resident Withdrawal	62015	K. Pitts #85938/Death & Birth Certificates	(\$35.00)
4	31286	512 1/18/2007 9:	Sale			(\$30.52)
*	31310	51 1/18/2007 3:	Transfer Funds		HC - K. Pitts #85938 to R. Douthitt #108032/	(\$5.00)
•	31393	47 1/23/2007 8:	Sale			(\$27.55)
1	31394	75 1/23/2007 8:	Sale			(\$29.75)
•	31403	99 1/23/2007 9:	Sale		CERTIFIED PTG	(\$4.49)
£	31476	23 1/25/2007 9:	Sale			(\$7.67)
*	31584	24 1/30/2007 9:.	Sale			(\$22.18)
*	31614	98 1/3 1/2007 3:.	Automated Payment		Jan 30, 2007	(\$3.00)
	31621	74 1/31/2007 11	Group Disbursement	62782	Jan. 2007	\$0.00
÷	31735	79 2/6/2007 8:2.	Sale			(\$24.10)
*	318306	64 2/8/2007 9:2.	Sale			(\$14.22)
*	31949(08 2/13/2007 12	Sale		li di	(\$30.21)
	320296	592/15/2007 8:	. Sale			(\$6.82)
	320995	0 2/20/2007 8:	. Sale			(\$26.17)
1	322016	3 2/22/2007 8:	. Sale			(\$6.20)
4	322142	6 2/22/2007 1:	. ROA		Income Tax Refund	\$293.00
+	322471	2 2/23/2007 10.	Sale		CERT PTG	(\$4.49)
1	323224	1 2/27/2007 10.	Sale			(\$30.31)
*	323292	6 2/27/2007 11	Sale			\$0.96
4	323545	5 2/28/2007 3:	Automated Payment		Feb 27, 2007	(\$3.00)
+	323636	6 2/28/2007 12	. Group Disbursement	64465	As of 02/28/2007	\$0.00
•	323768	3/1/2007 9:2	Sale			(\$27.64)
*	324983	73/6/2007 9:2	Sale			(\$31.54)
t	325098	3/6/2007 11:	Sale		OVERSEAS PTG	(\$0.45)
•]	3259166	3/8/2007 8:2	Sale		X	(\$16.79)
ŧ	3265595	3/12/2007 3:	Automated Payment		Mar 11, 2007	(\$3.00)
ř	3273135	3/13/2007 3:	Sale			(\$34.98)
	3278970	3/15/2007 8:	Sale			(\$24.66)
3	3279490	3/15/2007 9:	Sale		CERT PTG	(\$4.25)
	3290159	3/20/2007 9:	Sale			(\$18.21)
3	3299903	3/22/2007 8:	Sale			(\$10.59)
	3309350	3/26/2007 9:	Sale		CERT PTG	(\$5.36)
	3315149	3/27/2007 9:	Sale			(\$28.79)
]	3325236	3/29/2007 3:	Automated Payment		Mar 28, 2007	(\$3.00)
]	3331880	3/30/2007 3:	Group Disbursement	66148	As of 03/30/2007	\$0.00
	3338407	4/3/2007 9:5	Sale			(\$36.69)
]	3341435	4/3/2007 3:4	Change Card #			\$0.00
]	3347648	4/5/2007 8:5	Sale		8	(\$14.72)

				To: 7/24/	2007	3 O!
*	336087	3 4/10/2007 9:	Sale			(\$8.39)
•	336271	0 4/10/2007 12	Sale		Reversed Task No. 3360873	\$8.3
•	337069	3 4/12/2007 1:.	Sale			(\$2.10
Œ	338811	0 4/19/2007 9:.	Sale			(\$3.87
	339345	5 4/23/2007 3:.	Automated Payment		Apr 22, 2007	(\$3.00
•	3396436	54/23/2007 4:.	Sale			(\$5.07
	3407044	4/26/2007 9:	Sale		lgl ptg	(\$5.85
	3412638	84/30/2007 9:	Sale		LGL PTG	(\$1.11
*	3412782	4/30/2007 11.	Resident Withdrawal	67570	Subscription/085938/K Pitts	(\$15.58
*	3412954	4/30/2007 3:	. Group Disbursement	67548	As of April 2007	\$0.00
	3425070	5/3/2007 10:	. Sale			(\$0.95
*	3423571	5/3/2007 11:	. ROA		BARBARA L CASEY	\$60.00
3	3432448	5/7/2007 12:	. Sale		REG PTG	(\$0.39
*	3432598	5/7/2007 12:	. Sale		LGL PTG	(\$1.83)
S	3443840	5/10/2007 8:	. Sale			(\$31.41)
4	3445019	5/10/2007 10	Sale		REG PTG	(\$0.39)
*	3450014	5/14/2007 3:	Automated Payment		May 13, 2007	(\$3.00)
•	3464257	5/17/2007 10	. Sale			(\$5.31)
4	3468053	5/18/2007 10	. Sale		LGL PTG	(\$1.48)
4	3488014	5/25/2007 7:	Sale			(\$3.14)
*	3492281	5/29/2007 10	. Sale		REG PTG	(\$0.56)
*	3500927	5/31/2007 2:	Group Disbursement	68852	As of 05/31/2007	\$0.00
+	3501780	6/1/2007 8:3	Sale			(\$5.39)
4	3501888	6/1/2007 8:5	Sale		EXTRA PTG	(\$0.39)
4	3506014	5/4/2007 11:	Sale		LGL PTG	(\$0.56)
	3508444	5/5/2007 2:0	ROA		BARBARA L CASEY	\$40.00
+	3521725	5/8/2007 7:3	Sale			(\$2.70)
; 4 :	3522564	5/8/2007 10:	Sale		LGL PTG	(\$0.41)
*	3526264	5/11/2007 12	Sale		LGL PTG	(\$0.82)
*	35341016	5/13/2007 9:	Sale		REG PTG	(\$0.41)
4	35355796	5/13/2007 2:	Automated Payment		507CV00089 HLJ	(\$102.37)
+	35355826	5/13/2007 2:	Reservation		507CV00089 HLJ	\$0.00
+	35370586	/14/2007 9:	Sale			(\$15.31)
+	35617766	/25/2007 3:	Automated Payment		Jun 24, 2007	(\$3,00)
ŧ]	35740326	/28/2007 10	ROA		Southwestern Energy Prod Co/Royality	\$13.97
+	35770606	/29/2007 12	Group Withdrawal	70367	As of 06/29/07	(\$2.79)
+]	3577075 6	/29/2007 12	Group Disbursement	70372	As of 06/29/07	\$0.00
1	35770996	/29/2007 1:	Group Disbursement	70376	As of 06/29/07	\$0.00
Ð	3583441 7/	/3/2007 9:0	Sale			(\$7.34)
	3599979 7/	/10/2007 9:	Sale		LGL PTG	(\$0.90)

EXPLOTION Las - Organis Copy

ARKANSAS DEPARTMENT OF CORRECTION

Maximum Security Unit Commissary Request

▶ ▶ Special Order ◀ ◀ ◀

Clothing and Electronics

INMATE NAME: OTR. 16 maye R. P. 45

NUMBER: ** 85438

(PRINT FULL NAME)

CELL LOCATION: # 47

BUSAF

DATE: 7/ /2014

\$7.25 \$1.39

\$36.42 \$52.68 \$44.23 \$39.14 \$55.67 \$52.03

Price

Qty	Item	Price	$\neg \vdash$	DATE:	201	
	Sweatpants *	Tiree	-11	Watch Batteries Circle One		
	Small	\$14.50	\dashv	Prices Vary **		
	Medium	\$14.50		1216, 1616, 399, 377, 371, 394, 2016, Other		
	Large	\$14.50		Other	1	
	X-Large	\$16.68	-11	Miscellaneous		
	2-XLarge	\$16.68		Bath Towel *	\$	
	3-XLarge	\$16.68		Wash Cloth *	\$.	
	4-XLarge	\$16.68			φ.	
	Sweatshirts *		Size	Shoes		
1	Small	#40.0F	-	Reebok Classic (All Canvas) **	\$3	
-	Medium	\$18.05		Reebok-Classic (All Leather) *	\$5	
-	Large	\$18.05	-	Reebok Ultra Low (All Leather) **	\$4	
\rightarrow	X-Large	\$18.05 \$18.05	1	V4orceA Playmaker **	\$3	
_	2-XLarge	\$22,26		Nike Dark 9 * (All Leather)	\$5	
3-XLarge 4-XLarge		\$22,26		New Balance Shoes **	\$52	
		\$22.26				
	Boxers (GRT Sport) *		P	<u>Watches</u> Please list the name and item number of the you want to order.	ne watch	
	mall (1pr./waist 28-30")	\$3.23		you want to order,	Pri	
	led (1 pr./waist 32-34")	\$3.23			FU	
	arge (1 pr./waist 36-38")	\$3.23	Name		4	
	-Large (1 pr./waist 40-42")	\$3.23	Item			
-	K-Large (1 pr./waist 44-46")	\$3.45	Number			
3>	(-Large (1 pr./waist 48-50")	\$3.45		Revised (06/12/13)		
	Video games *	, 1		2		
#1	I G-501	\$40.00				

NOTE:

#HG-502

* - This comes from Union Supply Company and is ordered at 8:00 a.m. every Tuesday. It usually arrives by Monday of the following week.

\$40.00

** - This comes from Access Corporation and is ordered at 8:00 a.m. every Wednesday. It usually arrives by the following afternoon.

Áll special order items will be deducted from your account upon arrival. They will be delivered on your next scheduled store day.

Sizes on clothing larger than those listed are not carried by our suppliers but can be obtained by them. We will have to

I FORMALI

AD 09-01 Inmate Grievance Procedure

Emergency grievances may be submitted without the affected the inmate. PS Staff shall have 3 working days to include the date, personnel involved, or witnesses and how it of the grievance form. The Grievance form shall be specific to completed. The inmate will retain the pink and yellow copy submitted to the Problem Solver (PS) within 15 days of the espond unless an emergency is determined to exist date of occurrence with the date beside "Step One" The Unit Level Grievance Form shall be completed & mergency grievances shall be addressed within 24 hours.

completion of Step One. However, if the grievance is determined not to be an emergency it will be returned to the PS and processed under Step One

inmate may proceed to Step Two and submit the pink copy to the unit grievance officer. However, the inmate must file Step date of Step One. If PS Staff fails to respond within the required time frame the wo no later than Six (6) working days from the submission

statement as to why he/she felt Step One was unsuccessful proceed to Sten Two within 3 days of the receipt of Sten One by submitting the original to the Unit Grievance Officer, with a Additional sheets cannot be attached to the Unit Grievance Hom inmate feels Step One to be unsuccessful the inmate may If PS Staff responds within the required time frame, and the

Under the new Immate Grievance Procedure, AD 09-01, Only from the Director's appeal level within 30 days. to the inmate as rejected. An inmate will receive a response completed in accordance with written policy it may be returned disagreement with Unit Level's response. If this step is not statement of appeal date, Inmate ADC# and reason for The Unit Grievance Officer will acknowledge the Grievance within Five (5) working days. The Warden/Health Services Warden's response and the appeal portion completed with Warden/HSA/MH response the inmate has 5 days to appeal to the Chief Deputy Director/ Deputy/Assistant Director. The Admin/Mental Health Services Admin. will have 20 working days to respond. If an inmate is not satisfied with the inmate should include the original Unit Level Grievance

emergency grievances. Grievances should only address one

Resolution) and Step Two Formal Grievance, to include One form will be used for both Step One (Informal

informal resolutions) weekly (Saturday thru Friday) issue, if more than one issue only one will be addressed.

mmate is limited to the filing of FIVE (5) Step One

to the filing of Five (5) Step One (Informal Resolutions) will retain the yellow & pink copy. Ininates are limited to a designated Problem Solver. The inmate 15 days of occurrence and gave directly An Immate must file Step One within Weekly (Saturday thru Friday).

from the submission of Step One. Unievance will be acknowledged by Grievance Officer Grievance Officer within 6 working days 20 days of receipt by Grievance Officer within 5 working days and responded by submitting bink copy to Unit to by Warder/HSA/MH within assue within 3 working days, the inmate may proceed to Step 2 If the PS does not resolve

If response received within required time frame but the lamate is not satisfied with Will be acknowledged by Gnevance Responded to by Warden/HSA/MH of Step One from the PS. Grievance Officer within 5 working days and response given he/she may proceed to Step Two by submitting the Unit Grievance Officer wahin original grievance form to the 3 working days of the receipt within 20 days of receipt by CitieVance Officer

the date of appeal. Immate ADC# and reason for disagreement Deputy/Assistant Director within 5 days. Appeal shall include in accordance to policy it may be returned to the immate If unsatisfied with Warden/HSA/WH response an impate may appeal the decision to the Chief Deputy Director, as rejected. An impate will receive a response within with unit level response. If this step is not completed 30 working days.

D. Yoss 7/30/07

Unit/Center	FOR OFFICE USE ONLY
Name	7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
ADC# Good Brks # Job Assignment 1	Date Received: (0-1/0-1-1
(Date) STEP ONE: Informal Resolution	GRV. Code #: 505
6/14/14 (Date) STEP TWO: Formal Grievance (All complaint	ts/concerns should first be handled informally.
in the issue was not resolved during Sten () ne s	state why: C + C = 1/ - L - L
(Date) EMERGENCY GRIEVANCE (An emergency	
a substantial risk of physical marin, emergency grievances are not	I for ordinary problems that are not of a porious
in for marked yes, give uits completed form to the design	gnated problem-solving staff, who will sign the
attached emergency receipt. If an Emergency, state why:	
Is this Grievance concerning Medical or Mental Health Services:	? Are If yes, circle one: medical or mental
21011 11 state your one complaint/concern and he specific as for	Othe complaint data place name of name
involved and how <u>you</u> were affected. (Please Print):	to be a first to the second of the
	<u> </u>
harry feet a tright William to the first tright	and the second second
	and the second s
	Light in Marks B. Coll Sparie
	A Care State
	- 4 *
Karaja ayang panang ang karaja ayang ang k	
" was not a start of the	the state of the s
The state of the second	
Market Branch Branch	
umate Signature	D.
you are harmed/threatened because of your use of the grievance pro	Date
THIS SECTION TO BE RETED ()	OUT BY STAFF ONLY
ms form was received on (date) and determined to	to be Stan One and/on on Emany
(res or No). This form was forwarded to medical or med	ntal health? (Yes or No). If yes, nam
f the person in that department receiving this form:	Date
RINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature	41,4/14
escribe action taken to resolve complaint, including dates:	Date Received
——————————————————————————————————————	
off Circutana & D. t. D.	
taff Signature & Date Returned Inmate	Signature & Date Received
nis form was received on / (1.4.)	
nis form was received on / (1.4.)	
aff Signature & Date Returned is form was received on (date), pursuant to Step Tw aff Who Received Step Two Grievance: tion Taken: (Forwarded to Grievance Control of the step Two Grievance Control of the st	Os Is it an Emergency? (Yes or No). Date: (Yes or No).

to Inmate After Completion of Step One and Step Two.

UNIT LEVEL GRIEVANCE F(M (Attachment I) Received Max Unit Unit/Center	FOR OFFICE US ONLY
Name JUN 16 2014	GRV. # 10-100 4 5:3
ADC# Brks # Job Assign filevance Office	Date Received:
(Date) STEP ONE: Informal Resolution	GRV. Code #: DDD
6/14/14 (Date) STEP TWO: Formal Grievance (All complaints/concerns show	ld first he handled informally)
If the issue was not resolved during Step One state why: C 1/10) = 11 1 L = 1 + n 1:
(Date) EMERGENCY GRIEVANCE (An emergency situation is one is	n which you may be subject to approx
a bassame risk of physical flam, emergency grievances are not for ordinary pro	oblems that are not of a serious of the contract the cont
nature). If you marked yes, give this completed form to the designated problem-s attached emergency receipt. If an Emergency, state why:	solving staff, who will sign the in the
Is this Grievance concerning Medical or Mental Health Services? [RDIFFI V state your one complaint to a result of the state of the sta	circle one: medical or mental
BRIEFLY state your one complaint/concern and be specific as to the complaint, involved and how you were affected. (Please Print):	date, place, name of personnel
Sugarance C. 1. K. V. J. J. Special Character Residen	Territor than a live MA
State of the state	MINE THE MENT OF STATE OF THE S
of the surprise The force to be a set of the	
they after a stand March 1721 the first place I have a	
HOLLOW MESSAGE FOR THE STORY OF THE PRINCE	
- All and of the Property of Land and Indian Company	
- A March & a S. L.A. sametres Conserved Traylor St. 10	
THE OLD REPORT & PROPERTY OF A PARTY OF THE	
the control of the co	un fan yn tra Todf
TO BE DESCRIBED THE THREE OF THE DAY LABOUR. IN THE SECOND	508
The form of the first that the transfer of the second by the second by	The state of the s
	HEARING EN 188
Tomacto Claratory	<u> </u>
Inmate Signature Date If you are harmed/threatened because of your use of the grievance process, report it important to the process.	and the first of TV is a second
THIS SECTION TO BE FILLED OUT BY STAFF	ONLY
This form was received on (date), and determined to be Step One	and/or an Emergency Grievance
(Yes or No). This form was forwarded to medical or mental health?	(Yes or No). If yes, name
of the person in that department receiving this form:	Date
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature	Date Received
Describe action taken to resolve complaint, including dates:	RECEIVED Date Received
	JUL 3 5 2015
EDIA .	- W. L. P.
Cér de Circumstant de Constant	ADMINISTRATION
Brant Digitatore & Date Returned Inmate Signature & Da	ite Receivedon ou man
This form was received on (date), pursuant to Step Two Is it an Emer Staff Who Received Step Two Grievance	gency? (Yes or No).
- The restrict Stop 1 to Ottoration, The Co.	Date. 10-14-14
Action Taken: (Forwarded to Grievance Officer/Warden/C	Other) Date:
Staff Who Received Step Two Grievance: Action Taken: (Forwarded to Grievance Officer/Warden/Of	Other) Date: Date: A-MINI

to Inmate After Completion of Step One and Step Two.

INMATE NAME: Pitts Kenneth R.

ADC #: 085938C

GRIEVANCE #: MX-14-01304

WARDEN/CENTER SUPERVISOR'S DECISION

I have reviewed your grievance dated 06/10/2014. In your grievance, you state this complaint is against Sgt. Kelly. You state you had a pair of Classic Reebok tennis shoes when you went to West Isolation. You state you state your shoes were missing when you were issued your property after moving to 8 barracks. You also state a mirror in your legal book is also missing out of your property, but you acknowledge the mirror being lost. You state you have had your shoes since transferring from the Cummins Unit. You state you want another pair of tennis shoes or you will be filing a claim with the Small Claims Commission and you will win.

Unit records reflect you received your pair of tennis shoes on 06/10/2014. Therefore, I find this grievance to be without merit.

Signature of Warden/Supervisor or Designee

Wark

7-8-19 Date

RECEIVED

INMATE'S APPEAL

JUL 1 5 2014.

If you are not satisfied with this response, for invariant peal this decision within five working days by filling in the information requested below and mailing the appropriate wave Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you write in 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? I disagree with this mother it have not received any Tennis Street on Colololy. And you conit provide your gave me any Street. Mrs. Kelly are Suppose to hand these personal proporty to me herself, your going to May form my Classic Reaboter Tennis Skees. I have a Stead proporty form out on this matter, and I want is my Tennis Street hecause they wasnot in my property at 12:10 Am on 12:15 Am on Clolol. When I received my personal took for my personal property was in 8 Acilo Bics combail Booth and the Sef. gave me my personal my Tennis was missing MR.K. R. Pitts

Inmate Signature

ADC#

Date

I been my proof of Sale of my Tennis Stocs from Commin Sunt in 2006 on 2007. 8 30.08 some Sollars. I want to know what to know who give me my Tennio Sence your Said you und records reflect I town juve a pair of Sloos who gover than to ID one. ??? Soft Kelly is own the momonty norm She Is the crity 1GTT410 person Should is sues exact Personal Moments took Pors. pint Blak.

INMATE NAME: Pitts, Kenneth R.

ADC #: 085938

GRIEVANCE#:MX-14-01304

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

Your appeal dated 6/10/14 was received on 7/15/14. After review of your appeal and supporting documentation, I find that I concur with the Warden's decision. Your appeal is without merit.

Appeal denied.

_____Dat

10 3

£. #

My File Copy Exhinit [B] - orgine & copy + To Keep. Department of Correction

Report of Stolen Property

	Date Gune 15, 2014
0: Sp. Dr. E. Williams	Chief Security Officer
ame: Ork. Konnett. R. P. He	ADC # 85938

Description of Property:

T

1.

Rechak Gassia (All Cenivas) costs ove 430,00 dollars at Compans Unit in 2007. I Had over & 2.788.12 on The Books account When I payed for them living in MBKS.

Give complete detail of property and where property was last seen:

ON March 25, 2014 I had a prin of Reglock Classic (all comins) that to used isa lation for Sixty (66) days. SHI Kelly invending me That day on a Tire day morning. An wedenday 4/28/14 I denied 48 HRS property Set Killy as an Personal Property For returns off printing on belog 204 For (210/2014) often recovering may passonal preparty contation 14 of 12:10 Amon 12:05 Am Coled a Gristage bana Mrs Tot Colio 14. Un le 10/14 Sgt. Seviele signed The Coniente and Returned to Sat, Kelly Sho Meur onswer It. I wont to Steptowo Sgt. Seviel signed it and Return Mr. Vannety R. Petts 87938 to the Greener Pox Inmate's Signature

Security Officer

200-25

cc/ 26

nmate's Name	7	AI	ADC#:O* 10	Sending Institution:	Rece	Receiving Institution:			
ITEM (# allowed)	#REC/SEN		CODE #RET'D	DESCRIPTION	TTEM	#DEC/CENT	TOORE	CINEAU	DESCRIPTION.
ADA Compliance Item	2			10 250	Nail Climers (1)		100	WINCH D	DESCENT HOLY
All Books (10)	5	CHANCE OF THE PARTY OF THE PART		15	Personal Mail		1		
Bathrobe (F, 2)					Photos (5)				
Bowls	Ģ	Chimasan		bosh	Radio (1)		V		1000 PER
5)					Religious Material	son the same	1		3
Comb (M, 1 1)	N.F.	· Andrews			Religions Medal (1)				4000
Cup	()		A Same		Ring (1)				
Dentures (1)	400				Shoes wk rel (1)				
Depil ory preparation (1)	1)			5	Shower Shoes (1)	nere.			
Ear buds/emphone(1)	100	V			Soan Dish	e i	1	3	
Earplus					Socks (I 3 + 2)	9			
Eyeglasses/Contacts (1)	e direction of the second of t	Q P			Stockings		1		
Gloves (1)	200			2	Sweat Pants (1)				
Gym Shoes (1)	3			MC DIC	Sweat Shirts (1)				
					Toothbrush holder		acteors,		
Laundry Bag (I 1+1)		and mark			Undershirts				
Legal Mail/Transcript	prince.	Jane -			Undershorts (M,I-2 + 3)	2		-4	
Magazines (3 ea)					Watch-Wrist (1)	April 10 miles			
udable Items (All Hygiene	items limited	to 2 items o	f each type o	Expendable Items (All Hygiene items limited to 2 items of each type or one pack if sold in a pack. Possession is limited to maximum in a pack)	session is limited to maxim	m in a pack)	C		
Batteries (4)	6	F	()		Flex Pens			-	,
Depty adhering 2)					Food items		\		
Denture adnesive (2)					Hair Dressing (2)		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
Envelope (10)		A syelliphoran c		Aller,	Shampoo (2)				
Tiber for Hudgen if the in-					Shaving Cream (2)		3		
	The Contract of	Cacil type	or one jack	YY(1) Y (5) (5) (5) (7)	rited to maximum in a pack	1001	V	8	Consequence said
1000		1				0.0	1		200000000000000000000000000000000000000
1. M. A.C. 1.U.	1350								ACKOY CHIEF
State Issued Items / 15 CL	The same	2	101 ×	クとして	でできる。ハスノン				
Brogans-shoes (1pr)									
Pants (3 pr)	5	(-		CEST	Shirts (3)	ر زر: ا	7		254
Cup/Hat (1)	-	N. Assertan		2	Soup		1		not to the Base Articular
Canvas Shoes (M, I)	1//1	An and the state of the state o			Thermals (2 sets)				
ADC Hand Book					Bath Towel as needed	ă.	()		
Loothbrush (1)	-	Ţ			Toothpaste (2)				
Jacket/Coat (1)					Washcloth (1)		1		
					The state of the last of the l		- Marrie 1		

Printed Name / Sign Name Badge # of Official Returning Property

Date

Location Stored

Inmate's Signature & ADC# / Witness, if refuses Date

Printed Name / Sign Name / Badge # of Official Receiving Property

thereby icertify that all my property is listed herein and disposition by all property listed on this inventory is correct. Also, I do not have in my possession any legal materials belonging to any other inmate.

The light was all my property is listed herein and disposition by full property listed on this inventory is correct. Also, I do not have in my possession any legal materials belonging to any other inmate.

The light was all my property is listed herein and disposition by full property listed on this inventory is correct. Also, I do not have in my possession any legal materials belonging to any other inmate.

The light was all my property is listed herein and disposition by full property listed on this inventory is correct. Also, I do not have in my possession any legal materials belonging to any other inmate.

Exhibit C

Orginia " copy

F-841-1

ADC INMATE PERSONAL PROPERTY INVENTORY RECORD

ITEM Blanket	,#	DESCRIPTION	CODE	ndable Items	#	DESCRIPTION	005
				117-141	1 17	DESCRIPTION	COL
				Pants	1 14		- 1
Body Support Device				Photos	4 2 8		
Books				Photo Album			
Bowls	1.6	G_ G RY		Pillow Case	- P		2.207
Magazines	. 1		7	Pillow	- 5		
Cap/Hat		Nº	87.7	Prosthetic			1 - 100/402
Clock			· · ****	Radio		No. of the second second	
Comb ·	112			Religious Material			4
Cup	6			Religious Medal			**************************************
Dentures				Rings		Alexander and the second	
Earphones				Sheets	1-	17 7 - 1	177
Earplugs			100	Shirts	17.45		7.5
Eyeglasses	1111	4	- 17	Shoes		1	1112
Hoves			S	Shower Shoes			1 -
Sym Shoes	-{	S 34 36		Socks	7.7		1976
lair Braids		age of the state of		Stockings			U 10.7
lair Dressing		Harry Control of the	K	Sweat Pants			_
eadphones			at the state of	Sweat Shirts			
mate ID Badge		C. C		Toothbrush		1.00	
acket/Coat				Towels			_
aundry Bag	117	- 17.5 F.F	1	Towels-Hand			_
egal Materials				Undergarments			1000
fail Legal			-	Undershirts		. %	-
fail Personal				Under shorts		11 1	
fattress				Wash Cloths		11	-
lirror		***		Wash Clouis Watch-Pocket			_
ail Clippers	9	12		Watch-Wrist			-
adlock				Wallet			_
			T2 201				
Total Control of			Expenda				
ITEM	#	#/DESCRIPTION	CODE	ITEM	#	#/DESCRIPTION	CODE
enture Adhesive					8 10 1 10 10 1	7	CODE
eodorant			Francis .	Razor-Safety			21,000
ex Pen				Shampoo			
ood Items				Shaving Cream			
vgiene Items				Soap	e	26'	100
							-
			Oth	er			12 - A ² 1
ITEM	1 # 1	#/DESCRIPTION	CODE				-
		WESCRI HOW	CODE	ITEM	#	#/DESCRIPTION	CODE
1277							
77.7	777						
			>				
mer state that I do not	t nave in	roperty is listed on this my possession the lega	l materials b	elonging to any of	ll property lis her inmate."	ted on this inventory is	s correct.
nature of Official Rec			Locati	on Stored	Inmate's Sig Or Witness i	nature f inmate refuses to sig	Date
nature of Official Ret	urning P	roperty Date	Witness Sign	ature Date	Inmate's Sig	gnature	Date
should die during m	y incarce	eration, I designate the	individual lis	sted below to recei	ive my persor	nal property."	
me		Addres	S	City	\overline{S}	tate Pho	ne

ITEM (# allowed) #REC/SEN					and the second second second	THE COUNTY	くくくして	OT TOWN	ししてくだれ けいくい
Item					Nail Clippers (1)		-		
All Books (10)		Contract of	4		Personal Mail	2			
Bathrobe (F, 2)		Part position			Photos (5)				
Bowls	Sec. Asset	- January Barrier St. All			Radio (1)		hypotheral cu		AXX DISCO
Bras/Panties (F-I 3 ea + 5)			grave)		Religious Material	Carro			
Comb (M, I 1)	>				Religione Madel (1))	New York		TO CENT
Cup	7	Constitution of the second			Ring (1)				a control.
Dentures (1)					Shoes wk rel (1)				
Depilatory preparation (1)					Shower Shoes (1)	5			
Ear buds/emphone(1)	~ 5 *\	Mich	3		Soan Dish		- weekstanding		
Earphys	,			**************************************	Socks (1 3 + 2)	2	AND		
Eyeglasses/Contacts (1)						1			
Gloves (1)					Sweat Pants (1)				
Gym Shoes (1)	K.P. S.	- Common		XCC # C	Sweat Shirts (1)				
Hair Brush (1)					Tanthharch kaldar		ENCHORS STORY		
aundry Bag (I 1+1)	i	-			TOOMING HEADING	***			
Legal Mail/Transcript	S	The second secon			Undershirts	***			
Magazines (3 ea)		And the second s	And great and	THE TOTAL CONTRACT	Undershirts Undershorts (M,I-2 + 3)	ung dantum ung	So Palice Toleran.		
dable items (All Hygiene iten	, J	Control of the Contro		ellow Bridges	Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1)	~0	Sales research		
Batteries (4)	ns limited 1	o 2 items of	each type or	One pack if sold in a pack. Posses	Undershirts Undershorts (M,I-2 +3) Watch-Wrist (1) sion is limited to maximum	iii a	Si Dali, Ishan Si Dali, Ishan Mandali bi ka		
Beauty Aid products	ns Umited	o 2 Hens of	each type or		Undershirts Undershorts (M,1-2 +3) Watch-Wrist (1) sion is limited to maximu	u in a pack)	Single Control of the		
Denime adnesive (2)	ns limited 1	o 2 Hems of	each type or	One pack if sold in a pack. Posses	Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) sion is limited to maximum Flex Pens Frood items	in a pack)	and the state of t		
Envalored 10	ns Umited 1	0 2 items of	each type or	One pack if sold in a pack. Posses	Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Stor is limited to maximum Flex Pens Food items Hair Dressing (2)	u in a pack)	The state of the s		
All Market 10	ns limited 1	# Tems of	each type or	One pack if sold in a pack, Posses	Undershirts Undershirts (M,1-2 + 3) Watch-Wrist (1) Watch-Wrist (1) Sion is limited to maximum Flex Pens Flood items Hair Dressing (2) Shampoo (2)	n in a pack)	error of the state		
All nygrene items limited to	ns limited t	O 2 Hens of	each type or	One pack if sold in a pack. Posses	Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Watch-Wrist to maximum Flex Pens Flood items Hair Dressing (2) Shampoo (2) Shawing Cream (2)	n in a pack)	en e		
	ns limited t	o 2 Hems of	each type or	one pack if sold in a pack. Posses	Undershirts Undershirts (M,1-2 + 3) Watch-Wrist (1) Watch-Wrist (1) Sion is limited to maximu Flex Pens Flex Pens Flood items Flood items Hair Dressing (2) Shampoo (2) Shawing Cream (2)	u in a pack)	erroperson. The state of the s		
ころうなが、	ns limited 1	o 2 Hems of each type or	each type or	Legal Mail/Transcript Legal Mail/Transcript Marzzines (3 ea) Expendable Hems (All Hygiene items limited to 2 Hems of each type or one pack if sold in a pack. Possession is limited to maximum in a pack. Denture adhesive (2) Deodorant (2) Envelopes (10) Other All Hygiene items limited to 2 Items of each type or one pack if sold in a pack. Possession is limited to maximum in a pack. Undershorts (M,1-2 Watch-Wrist (1) Watch-Wrist (1) Flex Pens Food items Hair Dressing (2) Sharmoo (2) Sharmoo (2) Envelopes (10) Other All Hygiene items limited to 2 Items of each type or one pack if sold in a pack. Possession is limited to maximum in a pack. Other All Hygiene items limited to 2 Items of each type or one pack if sold in a pack. Possession is limited to maximum in a pack.	Undershirts Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Sioa is limited to maximum Flex Peas Food items Flair Dressing (2) Sharring Cream (2) Sharving Cream (2) Sharving Cream (2)	u la pack)	All the state of t		
	ns limited t	o 2 items of	each type or	one pack if sold in a pack. Posses	Undershirts Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Stoa is limited to maximum Flex Pens Flex Pens Flood items Hair Dressing (2) Shampoo (2) Shawing Cream (2) ed to maximum in a pack) LCC TAP CAR	n in a pack)	The state of the s		
Sand Hems	ns limited t	0 2 items of each type or	each type or one pack if	one pack if sold in a pack. Posses	Undershirts Undershirts (M,1-2 + 3) Watch-Wrist (1) sion is limited to maximum Flex Pens Flood items Flood items Fair Dressing (2) Shampoo (2) Shampoo (2) Shawing Cream (2) od to maximum in a pack)	u in a pack)	on Andrews		
State Issued Items Brogans-shoes (Ipr)	ns limited t	o 2 Hems of each type or	each type or	one pack if sold in a pack. Posses	Undershirts Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Sion is limited to maximum Flex Pens Food items Flair Dressing (2) Shampoo (2) Shawing Cream (2) Shawing Cream (2) Shawing Cream (2) Shawing Cream (2)	u in a pack)	The state of the s		
LE ASSUED HEMS Pants (3-pt)	ns limited t	o 2 items of	each type or	one pack if sold in a pack. Posses one pack if sold in a pack. Possession is limit	Undershirts Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Sioa is limited to maximum Flex Peas Food items Hair Dressing (2) Sharring Cream (2) Sharring Cream (2) Shaving Cream (2)	n pack)	And the second s		
LL VY Se Issued Rems Brogans-shoes (Ipr) Pants (3-pt) C fr/Ha, (1)	ns limited t	9 2 Hems of each type or	each type or	one pack if sold in a pack. Posses	Undershirts Undershirts Undershorts (M,1-2 +3) Watch-Wrist (1) Sion is limited to maximum Flex Peas Food items Flair Dressing (2) Sharmoo (2) Sharmoo (2) Sharwing Cream (2) ed to maximum in a pack) UCTINY CAR VOLCE (2) Shirts (3) Soap	a pack)	And the second s		
Issued Items Brogans-shoes (Ipr) Pants (3-pr) Cap/Ha, (4) Canvas Shoes (M,1)	ns limited t	o 2 items of	each type or	one pack if sold in a pack. Posses	Undershirts Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Watch-Wrist (1) Watch-Wrist (1) Flex Pens Food items Flood items Flair Dressing (2) Shampoo (2) Shampoo (2) Shawing Cream (2) Shaving Cream (2) Shaving Cream (2)	u in a pack)	or constraints of the constraint		
Issued Rems Issued Rems Issued Rems Brogans-shoes (Inr) Pants (3-pt) Ctip/Ha. (4) Canvas Shoes (M,1) ADC Hand Book	as limited t	9 2 items of each type or	cach type or	one pack if sold in a pack. Posses	Undershirts Undershirts Undershorts (M,1-2 + 3) Watch-Wrist (1) Sion is limited to maximum Flex Pens Food items Food items Food items On maximum in a pack, On maximum in a pack	u in a pack)	on Andrew Control of the Control of		
Pants (3-pt) Cup/Ha (1) Canvas Shoes (M,1) ADC Hand Book Toothbrush (1)	ns limited t	each type or	each type or one pack if	one pack if sold in a pack. Posses	Undershirts Undershirts Undershorts (M,I-2 + 3) Watch-Wrist (1) Watch-Wrist (1) Watch-Wrist (2) Shout is limited to maximum Flex Pens Food items Flair Dressing (2) Shampoo (2) Shampoo (2) Shawing Cream (2) Shawing Cream (2) Shawing Cream (2) Shawing Cream (2) Shart Towasimum in a pack) MCCANON (2) Shart (2) Shirts (3) Soap Thermals (2 sets) Bath Towel as needed Toothpaste (2)	d in a pack)			

Location Stored

Immate's Signature & ADC# / Witness, if refuses

Date

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

KENNETH PITTS (ADC 085938)

CLAIMANT

V.

NO. 15-0086-C@Arkansas Claims Commission

ARKANSAS DEPARTMENT OF CORRECTION

AUG 1 2 2014

RESPONDENT

RECEIVED 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 // day of // 2014, on the Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

Kenneth Pitts (ADC 085938) Maximum Security Unit 2501 State Farm Road Tucker, AR 72168

MILLS WILKINS Ark. Bar #87190

STAT _ CLAIMS COMMISSION DUCKET OPINION

		OPIN	ION		
Amount o	of Claim \$ 36.42	_		Claim No.	15-0086-CC
			Attorneys		
	Kenneth Pitts, #085938	_Claimant	Pro se		
	vs.	Cialinant			Claimant
	AR Department of Corrections		Lisa Wilkin	s. Attornev	
State of A	rkansas R	espondent			Respondent
Date Filed	August 1, 2014		Type of Claim	Loss of Property	
	20	FINDING OF	FACTS		
	This claim was filed for loss of Corrections.	of property in	the amount of \$36	5.42 against Arkansa	s Department
	Present at a hearing March 1 represented by Lisa Wilkins,	3, 2015 was the Attorney.	e Claimant, pro se	e, and the Responden	t,
	The Claims Commission una manage inmate property and	nimously found unanimously a	d liability on the p wards the Claima	part of the Responder at \$36.42 for his lose	nt in failing to
	The Claims Commission her and hereby directs the Claim	eby unanimous	lv awards this cla	im in the amount of	\$26 AD
	IT IS SO ORDERED.				
	TI IO OCCUPIENCY,				
					•
		(See Back of Opin	ion Form)		
	Upon consideration of all the unanimously awarded this cla Commission Clerk to issue	im in the amou	nt of \$36.42 and	s Commission hereby hereby directs the (y C laims
Date of Hea	ring March 13, 201:	5			
Date of Disp	osition March 13, 201	5	200	tt- hone	Chal
			10/11/	**(W/OID)	Chairman

Commissioner

Commissioner

IN THE CLAIMS REVIEW SUBSOMMITTEE OF THE ARKANSAS GENERAL ASSEMBLEY

KENNETH PITTS (ADC #085938)

CLAIMANT

V.

NO. 15-068616 Claims Commission

ARKANSAS DEPARTMENT OF CORRECTION MAR 25 2015

RESPONDENT

NOTICE OF APPEALIVED

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

Notice is hereby given that the Respondent is appealing the granting of the decision by the Arkansas State Claims Commission rendered March 13, 2015, in the above matter to the General Assembly of the State of Arkansas in accordance with Arkansas Statute 19-10-211.

Respondent hereby designates the entire record, and all proceedings, exhibits, evidence and documents introduced in evidence to be contained in the record on appeal.

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

CERTIFCIATE OF SERVICE

I certify that a copy of the NOTICE OF APPEAL has been served this 25 day of ________, 2015, on the below Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

KENNETH PITTS (ADC #085938)

MSH

2501 STATE FARM ROAD

TUCKER, AR 72168

Disa Millo Wilkins) LISA MILLS WILKINS Ark. Bar #87190