

Please Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

Arkansas
State Claims Commission
DEC 12 2014

D3.

BEFORE THE STATE CLAIMS COMMISSION
Of the State of Arkansas

RECEIVED

- ☐ Mr.
☐ Mrs.
☐ Ms.
☐ Miss

Dadrian Thomas #139943 Claimant

vs.

State of Arkansas, Respondent
Dept. of Corrections

Do Not Write in These Spaces

Claim No. 15-0452-CC

Date Filed Dec 12, 2014
(Month) (Day) (Year)

Amount of Claim \$ 1,900.00

Fund DOC

COMPLAINT Failure to Follow Procedures

Dadrian Thomas #139943, the above named Claimant, of P.O. Box 970, Marianna, AR 72360 ↔
(Name) (Street or R.F.D. & No.) (City)

↔ (State) (Zip Code) (Daytime Phone No.) County of Lee represented by Pro-se Failure to follow policy and procedure
(Legal Counsel, if any, for Claim)

or P.O. Box 970, Marianna AR 72360 says:
(Street and No.) (City) (State) (Zip Code) (Phone No.) (Fax No.)

State agency involved: A.D.C. Amount sought: 1,900

Month, day, year and place of incident or service: 5-30-2014 ADC

Explanation: Claimant, D. Thomas #139943 'On May 30th, 2014 at 1:30pm I was shook down and written a disciplinary by Sgt. Dorsey Lee because contraband was supposedly found. I was locked up and Busted on 6-10-14 on the disciplinary reduced to class 4. 30 days punitive, and I did 20 days in Brickley's Maximum Security barracks also I also lost all of my Good Time. On 6-13-2014 I appealed my disciplinary to Warden Danny Buel and on 6-27-2014 it was denied. On 7-8-2014 I put in a appeal to Mr. Raymond Naylor and it was affirmed on 8-1-2014. On 8-2-14 I sent my appeal to Mr. Ray Hobbs and on 8-29-2014 it was denied again. My whole basis of my appeal was that I never received a Configuration form for any property that was supposedly found on or around me but I was still busted for it. The ADC has only one policy that govern Inmate Property Control. AD-H-03 States 2 pages, 2.2 Form 401 must be completed to identify all property taken from inmate as either excess/contraband or disciplinary/criminal evidence. After completion the form must be immediately scanned into COM's. The form must include at least the inmates name ADC # date of receipt, a description of the property items, in sufficient detail for easy identification, the reason the property was taken from Page 1 of 1

As parts of this complaint, the claimant makes the statements, and answers the following questions, as indicated: (1) Has claim been presented to any state department or officer thereof?

(Yes or No) ; when? (Month) (Day) (Year) ; to whom? (Department)

and that the following action was taken thereon:

and that \$ was paid thereon: (2) Has any third person or corporation an interest in this claim? ; if so, state name and address

(Name) (Street or R.F.D. & No.) (City) (State) (Zip Code)

and 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 verily believes that they are true.

D. Thomas (Print Claimant/Representative Name) D. Thomas (Signature of Claimant/Representative)

SWORN TO and subscribed before me at Buckeye AR
(City) (State)

(SEAL) GENEVA V. JONES this 4 day of December 2014
NOTARY PUBLIC-STATE OF ARKANSAS
LEE COUNTY
My Commission Expires 01-10-2015
(Date) (Month) (Year)

SF1- R7/99 My Commission Expires: 01 10 2015
(Month) (Day) (Year)

Exhibit 1

ISSR100

Arkansas Department of Corrections
East AR Region, Unit Unit
MAJOR DISCIPLINARY

If the C.S.O. determines that the violation(s) described on this document are felonious, he/she must hand carry this document to the Unit Warden who must immediately notify the Director.

Inmate: Thomas, Dacrean D

ADC#: 139943C

Assignment: AM/PM:Discpl Court Review

Class: I-C is being charged by Lee, Dorsey A Sr

Title: Correctional Sergeant

with code violation(s):

- 12-1 Failure to obey verbal and/OR written orders of staff
- 15-1 The purchase OR exchange of unauthorized articles OR of authorized articles through unauthorized channels
- 09-12 Possession of Tobacco Products.
- 02-1 Aiding OR abetting IN the commission of any rule violation
- 02-6 Unauthorized contacts with the public while on work release OR away from the unit/center

Date & Time: 05/30/2014 1:30 PM

Notice of Charges:

On May 30, 2014 at approx. 1:30pm while overseeing Regional Maintenance in Hughes, AR in zone 4, I Sgt. Lee was conducting a strip search of the inmate D. Thomas #139943 when I noticed he had a white plastic bag under his private area. At that time I Sgt D. Lee asked inmate Thomas to drop whatever it was that he had in the plastic bag, he complied. I then opened the bag and it contained 1 Package of Newport (hard box), 1 Package of Tops, 1 package of Smoking Tobacco. I then asked this inmate where he had gotten these items. He didn't say anything. I then contacted my supervisor Lt. Padilla. At that time Lt. Padilla contacted the unit and informed Major Conner of the incident. Approx. 20mins later Lt. Etherly, Major Conner, Sgt. Mize, K9 Jack, Cpl. Caldwell and Lt. Swiney arrived at the job site and then they escorted inmate D. Thomas back to the unit for pre-lock up. After arriving back at the unit this inmate was drug tested and pictures were taken. This inmate knows that his actions are against ADC and unit policy therefore I am charging him with 12-1, 15-1, 9-12, 2-1, & 2-6. End of Statement

I affirm that the information in this report is true to the best of my knowledge)

Signature of Charging Officer

NOTIFICATION:

Officer

Date & Time Notified

Witness Statements:

No ☒

If yes, list:

Inmate's Signature

C.S.O. Review:

Outcome: Refer to Hearing Officer/Comm.

By: Conner, William M

Date 06/03/2014

Extension:

No ☒

Yes

Has extension form been completed?

Presentation by Counsel - Substitute is required when it is determined that the inmate is illiterate or incompetent or that the issues are extraordinarily complex.

Counsel-Substitute: Assigned (Name)

Not Assigned

BSR101

Arkansas Department of Correction

DISCIPLINARY HEARING ACTION

Inmate: Thomas, Dacrean D

ADC#: 139943C

Unit: East AR Region, Unit

Code Violation(s):

- 12-1 Failure to obey verbal and/OR written orders of staff
- 15-1 The purchase OR exchange of unauthorized articles OR of authorized articles through unauthorized channels
- 09-12 Possession of Tobacco Products.
- 02-1 Aiding OR abetting IN the commission of any rule violation
- 02-6 Unauthorized contacts with the public while on work release OR away from the unit/center

Date/Time of Alleged Offense(s): 05/30/2014 1:30 PM

Hearing Date: 06/10/2014

Time: Start 1:56 PM

End 2:00 PM

Recorder: Waddle, Keith L.

Page#:

Side:

Meter: From

To

Plea: Not Guilty, Not Guilty, Not Guilty, Not Guilty, Not Guilty

Attendance Waived: No

Has waiver form been completed?

Inmate's Statement:

I did not receive a 101 form.

Signature of Inmate

Court Questions:

Do you have a statement?

Sentencing Conditions:

Verdicts: Guilty, Guilty, Guilty, Not Guilty, Not Guilty

Restriction Days to Serve

Commissary: 60
Phone: 60
Visitation: 60
Penalive Isolation Days to Serve: 30
G1 Class Reduced to: IV
G1 Days Forfeited: 365

Days Suspended: 0
Days Suspended: 0
Days Suspended: 0
Days Suspended: 0
Class Suspended:
Days Suspended: 0

4:04 PM

6/10/14

Exhibit 2
2012

Disciplinary Hearing Action

06/10/2011 3:32 PM

Page 2

Inmate: Thomas, Dandrean D

ADC#: 1399430

Unit: East AR Region, Unit

Additional Sanctions/General Comments:

Factual Basis for Decision (This is a short synopsis of the facts as the Hearing Officer perceives them after reviewing all of the evidence.):

Inmate possessed tobacco.

Evidence Relied Upon:

1 states on the pt of 5-30-14, Thomas disobeyed an order by possessing tobacco.
Photo of items confiscated.

Reasons Why Information Purporting to Exonerate Inmate was Discounted:

FI report is accepted.

Reasons for Assessment of Punishment:

Inmate is 1C but must not possess tobacco in the ADC.

I have read this report and understand that I may appeal to the Warden about any decision made in this matter within fifteen (15) working days by completing the "Disciplinary Appeal" form.

Inmate's Signature

Counsel-Substitute

I affirm that the information is true to the best of my knowledge.

Hearing Officer

Date

Exhibit 3



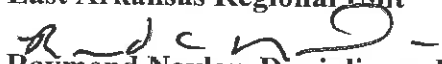
Arkansas Department of Correction

Internal
Affairs
Division

P.O. Box 8707
Pine Bluff, Arkansas 71611-8707
Phone: (870) 267-6218
Fax: (870) 267-6226

MEMORANDUM

TO: Inmate Dadrean Thomas ADC# 139943
East Arkansas Regional Unit

FROM: 
Raymond Naylor, Disciplinary Hearing Administrator

RE: Major Disciplinary Appeal

DATE: August 1, 2014

Please be advised that I am in receipt of your disciplinary appeal dated July 8, 2014 regarding the major disciplinary you received on May 30, 2014, 1:30pm by Sgt. Dorsey Lee.

After a thorough review of all the documents pertaining to this matter, I find that I must affirm the decision of the major disciplinary hearing officer.

If you so desire, you may appeal further to the Director of the Department of Correction.

RN1

Cc: Warden Burl / Inmate File
File



Arkansas Department of Correction

Exhibit 4

Director's Office
P.O. Box 8707
Pine Bluff, Arkansas 71611-8707
Phone: (870) 267-6200
Fax: (870) 267-6244
www.arkansas.gov/doc

MEMORANDUM

TO: Inmate D. Thomas, ADC #139943
East Arkansas Regional Unit

From: *RH*
Ray Hobbs, Director

Date: August 28, 2014

RE: Disciplinary Appeal

I am in receipt of your disciplinary appeal regarding a major disciplinary you received on 05/30/2014, at 1:30 p.m., by Sergeant D. Lee.

After reviewing your appeal, I find no due process violations that would warrant modification or reversal of the disciplinary hearing officer's decision. You were in possession of tobacco. Therefore, I find no evidence to support modification or reversal of this disciplinary.

Your appeal is denied.

RH/cv

cc: Warden/Inmate File
Hearing Officer Administrator
File

property bag. The bag will be sealed with notations on the seal of the date, name, and ADC # of the inmate. Upon arrival at the new location or upon return to the inmate, as soon as possible, the inmate, if he/she desires to have his copy completed, will hand the pink copy to the UPCO and inventory completed. The completed pink copy will be returned to the inmate. When the receiving/returning unit completes the inventory, the Form F-841-1 shall be signed by the UPCO with his/her name printed, signed and AASIS number thereon or a designee and by the inmate with ADC# written. If the inmate refuses or is unavailable to sign the inventory, a second officer will sign in the presence of the inmate.

3. The completed white original will be forwarded to the records office to be placed in the inmate's institutional file and the inmate will keep the pink copy. Property inventory shall be immediately scanned into eOMIS.

E. EXCESSIVE PROPERTY AND CONTRABAND AFTER INTAKE

1. Any property found in the possession of an inmate, which is not listed on either Form 841-1 or 841-3 or approved for purchase from the commissary will be deemed contraband.
2. Form 401 must be completed to identify all property taken from the inmate as either excess/contraband or disciplinary/criminal evidence. After completion the form must be immediately scanned into eOMIS. The form must include at least the inmate name, ADC Number, date of receipt, a description of the property item(s) in sufficient detail for easy identification; the reason the property was taken from the inmate; disposition of the items; and the confiscating officer and inmate will co-sign the form. If the inmate refuses to sign the form it will be signed by a second officer in the presence of the inmate.
3. Hold property until proceedings complete. Confiscated items to be used for disciplinary, grievance or judicial proceedings will be secured until proceedings are completed. Photograph all items if necessary, attach to the Property Confiscation Form, Form F-401 and document all actions relative to these items on Form F-401.
4. Unauthorized property shall be disposed of as follows:
 - (a) Mail the items at the inmate's expense to a party of the inmate's choosing. No lien will be placed on the inmate's account for postage to mail unauthorized property.
 - (b) Destruction, if authorized by the inmate completing and signing the destruction section of Form F-841-5 and destruction is witnessed by the UPCO and another staff member; or
 - (c) Pick-up by a party of the inmate's choosing during visitation or from the Unit where it was confiscated if the inmate has been transferred from that unit. Confiscated property will not be transferred with the inmate or to another more convenient location for pick-up. Any person authorized by an inmate to receive excess personal property will sign the appropriate section of the F-841-5 form.
5. A disciplinary may be written on all confiscated property as unauthorized excessive or contraband.
6. Contraband will be destroyed.

UNIT LEVEL GRIEVANCE FORM (Attachment I)

Unit/Center EARLName D. ThomasADC# 139943Brks # 1-59Job Assignment GRIEVANCE RECEIVED

FOR OFFICE USE ONLY

GRV. # EA-14-01537Date Received: 9/10/14GRV. Code #: 503 (93)9-4-14 (Date) STEP ONE: Informal Resolution

SEP 10 2014

9-9-14 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)If the issue was not resolved during Step One, state why: I have not got a answer

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious 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:

Is this Grievance concerning Medical or Mental Health Services? NO If yes, circle one: medical or mentalBRIEFLY state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print): I'm writing this grievance because

Penny Durl, Raymond Naylor, Ray Hobbs, Waddle Keith, Dorsey
Lee, Failure to Follow Policy and procedure. Policy AR 941
page 5, E 1, 2, 3 I was suppose to had contraband took from
me and was not gave a 401 Form for any Contraband.
So there for I'm saying they Failure to Follow Policy
~~DO NOT WRITE IN THESE SPACES~~

D. Thomas

Inmate Signature

9-4-14

Date

RECEIVED

OCT 02 2014

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING

If you are harmed/threatened because of your use of the grievance process, report it immediately to the Warden or designee.

THIS SECTION TO BE FILLED OUT BY STAFF ONLY

This form was received on 9-4-14 (date), and determined to be **Step One** and/or an Emergency Grievance
NO (Yes or NO) This form was forwarded to medical or mental health? NO (Yes or NO) If yes, name
 of the person in that department receiving this form:

Sgt. J. Davis58123J. Davis

Date

9-4-14

PRINT STAFF NAME (PROBLEM SOLVER)

ID Number

Staff Signature

Date Received

Describe action taken to resolve complaint, including dates: Disciplinaries are non-grievableSgt. J. Davis 9/8/14

Staff Signature & Date Returned

Inmate Signature & Date Received

This form was received on 9-9-14 (date), pursuant to **Step Two**. Is it an Emergency? NO (Yes or No).Staff Who Received Step Two Grievance: Sgt. Garner Date: 9-9-14

Action Taken: (Forwarded to Grievance Officer/Warden/Other) Date:

If forwarded, provide name of person receiving this form: Date:

DISTRIBUTION: YELLOW & PINK – Inmate Receipts; BLUE-Grievance Officer; ORIGINAL-Given back
 to Inmate After Completion of Step One and Step Two.

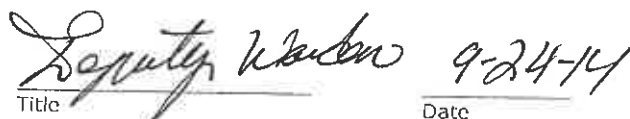
BK01/0584
Attachment IIIIGTT410
3GSINMATE NAME: Thomas, Dadrean D.ADC #: 139943CGRIEVANCE #: EA-14-01537

WARDEN/CENTER SUPERVISOR'S DECISION

Inmate Thomas, the issue you grieve is untimely and it involves a disciplinary matter. Per AD 14-16, disciplinary matters are non-grievable and the Unit Level Grievance Form (Attachment I) shall be completed and submitted within 15 days after the occurrence of the incident, with the date beside "Step 1: Informal Resolution" filled in. There is no merit in your complaint.



Signature of Warden/Supervisor or Designee



Title

Date

INMATE'S APPEAL

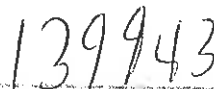
If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision 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?

I disagree with the above response due to the fact that Danny Burl, Raymond Naylor, Ray Hobbs, Waddell, and Dorsey Lee ignored the fact that I was not given a 401 form. Therefore, I am not grieving a disciplinary matter. This grievance was written upon me receiving my appeal receipt from Director Ray Hobbs. (Which is a direct violation to ADC policy). Because Ray Hobbs did not follow policy.



Inmate Signature



ADC#



Date

RECEIVED

OCT 02 2014

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING

IGTT430
3GD

Attachment VI

INMATE NAME: Thomas, Dadrean D.

ADC #: 139943

GRIEVANCE#:EA-14-01537

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

I have received your formal grievance appeal dated 09/09/14 in reference to the disciplinary policy and procedure was not followed.

After reviewing all supporting documentation, I have determined that your complaint should have been rejected at the unit level, for being non-grievable (disciplinary matters). Therefore, I will not address the merits of your appeal, which is denied.


Director

10-22-2014
Date

UNIT LEVEL GRIEVANCE FORM (Attachment I)

Unit/Center EARL

Name D. Thomas

ADC# 139943 Brks # 1-58 Job Assignment 1-Ho

9-18-14 (Date) STEP ONE: Informal Resolution

9-19-14 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)

If the issue was not resolved during Step One, state why: low policy by not giving me a 401 and not scanning it in to the Eom's

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious 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:

Is this Grievance concerning Medical or Mental Health Services? If yes, circle one: medical or mental

BRIEFLY state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print):

On 9-17-14 approx 4:30 I was called to the field major's office where Lt. Padilla, Lt. Chinney, Lt. Chinney was all present when this occurred concerning a confiscated form that I did not get on 5-30-14 the day of the property was took from me upon entering the office. Lt. M. Padilla attempted to hand me a 401 form pertaining the contraband that was allegedly confiscated from me. Therefore I'm writing this grievance due to the fact that Sgt. Lee and Lt. M. Padilla falsified documents, by not giving me a 401 form at the time of confiscating the said contraband, was allegedly took from me.

GRIEVANCE RECEIVED

SEP 22 2014

EAST AR REGIONAL UNIT

RECEIVED

OCT 31 2014

D. Thomas

Inmate Signature

9-18-14

Date

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING

If you are harmed/threatened because of your use of the grievance process, report it immediately to the Warden or designee.

THIS SECTION TO BE FILLED OUT BY STAFF ONLY

This form was received on 9/18/14 (date), and determined to be **Step One** and/or an Emergency Grievance yes (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

Lester Allen 33386 Lester Allen
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Date Received 9/18/14

Describe action taken to resolve complaint, including dates: I L.T. Padilla did deliver a copy of the Confiscation report to inmate D. Thomas due to the fact that the Confiscation form was not in Eom's with I did not have any knowledge it was received the paper work due to Major Corner was given the paper work and I was told that he would have someone give it to him on the date the incident took place.

L.T. M. Padilla 9-19-2014 D. Thomas 9-18-14
Staff Signature & Date Returned Inmate Signature & Date Received

This form was received on Sept 15, 2014 (date), pursuant to **Step Two**. Is it an Emergency? No (Yes or No).

Staff Who Received Step Two Grievance: Sgt. Sator Date: Sept 15 2014

Action Taken: forward (Forwarded to Grievance Officer/Warden/Other) Date: Sept 15 2014

If forwarded, provide name of person receiving this form: Mrs. Mills Date: Sept 15 2014

DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grievance Officer; ORIGINAL-Given back to Inmate After Completion of Step One and Step Two.

IGTT410
3GSBK 00584
Attachment IIIINMATE NAME: Thomas, Dadrean D.ADC #: 139943CGRIEVANCE #: EA-14-01620

WARDEN/CENTER SUPERVISOR'S DECISION

Inmate Thomas, you grieve on 09/17/2014, you were called to the field major's office where Lt. Padilla, Lt. Swinney, and Lt. Chaney were all present and given a confiscation form which you did not receive on 05-30-2014. Your complaint is noted. Lieutenant Padilla stated Sergeant Lee did a confiscation form on you when the contraband was taken off of you and Sergeant Lee gave it to Lieutenant Padilla. Lieutenant Padilla also stated he gave it to Major Conner, because he was told not to go to the max and when you wrote a grievance stating you did not receive a confiscation form, he called you into the field office to give you one to resolve your issue. Staff should have given this inmate a confiscation form when the items were confiscated from him, not four months later. I find your complaint with merit and corrective action will be taken.

[Signature]
Signature of Warden/Supervisor or Designee

[Signature]
Title

[Signature]
Date

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?

no action has been taken

OCT 31 2014

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING

D. Thomas
Inmate Signature

139943
ADC#

10-16-14
Date

IGTT430
3GD

Attachment VI

INMATE NAME: Thomas, Dadrean D.

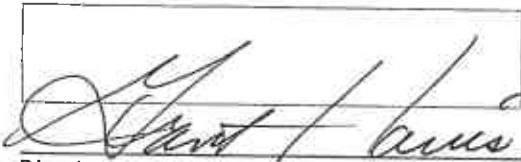
ADC #: 139943

GRIEVANCE#:EA-14-01620

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION

I have received your formal grievance appeal dated 09/19/14 in reference to not being given a 401 form on 05/30/14 when your contraband was confiscated.

After reviewing all supporting documentation, I have determined that your complaint should have been rejected at the unit level for being untimely. Therefore, I will not address the merits of your complaint, which is denied.



Director

11-10-2014
Date

JAN 07 2015

RECEIVED
CLAIMANT

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

DADREAN THOMAS (ADC 139943)

V.

NO. 15-0452-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 6th day of January, 2015, on the Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

Dadrean Thomas (ADC 139943)
East Arkansas Regional Unit
PO Box 970
Marianna, AR 72360-0970


LISA MILLS WILKINS Ark. Bar #87190

Before the State Claims Commission
of the State Arkansas

J. Thomas, 139943 Claimant

VS

15-0452-CC

Arkansas Claims Commission

JAN 09 2015

RECEIVED

Amended Complaint

Comes now Dadean Thomas #139943, Claimant, comes before this Commission to Amend his State claim filed in December 2014, Claimant asserts that the State of Arkansas has not responded to original complaint. Claimant states that in his original complaint he erred in not stating the following

1. As a result of defendant's failure to follow policy, Claimant Dadean Thomas #139943 suffered 'back spasms', mental anguish & migraine - head aches due to Defendant's removing claimant's mattress, forcing claimant to lay on a concrete slab from June 10, 2014 through July 9, 2014. from 7am 7pm (12 hrs per day)

Wherefore, Claimant request the Arkansas State Claims Commission to please honor claimant's request to Amend original complaint and add the above facts.

J. Thomas

(Print Claimant/Representative Name)

[Signature]
(Signature of Claimant/Representative)

Sworn to and subscribed before me

Brickley
city

AR
State

on this

25
Date

day of

one
month

2014
Year

WALLACE B. McNARY
NOTARY PUBLIC-STATE OF ARKANSAS
ST. FRANCIS COUNTY
My Commission Expires 01-10-2015

[Signature]
(Notary Public)

My Commission Expires

01
month

10
Day

2015
Year

Arkansas
State Claims Commission
JAN 20 2015

RECEIVED
CLAIMANT

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

DADREAN THOMAS (ADC 139943)

V.

NO. 15-0452-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT


ANSWER to AMENDED COMPLAINT

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

Dadrean Thomas (ADC 139943)
East Arkansas Regional Unit
PO Box 970
Marianna, AR 72360-0970


LISA MILLS WILKINS Ark. Bar #87190

Before The State Claims Commission
of the State Arkansas

D. Thomas, 139943 Claimant

VS

State of Arkansas, Respondent
(A.O.C.)

15-0452-CC

Arkansas Claims Commission

JAN 09 2015

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Amended Complaint

Comes now Dadrin Thomas #139943, Claimant, comes before this Commission to Amend his State claim filed in - December 2014, Claimant asserts that the State of Arkansas has not responded to original complaint. Claimant states that in his original complaint he erred in not stating the following

i. As a result of defendant failure to follow policy, Claimant Dadrin Thomas #139943 suffered 'back spasms', mental anguish & migraine - head aches due to Defendants removing claimant mattress, forcing claimant to lay on a concrete slab from June 10, 2014 through July 9, 2014. from 7am 7pm (12 hrs per day)

Wherefore, Claimant request the Arkansas State Claims Commission to please honor Claimants request to Amend original complaint and add the above facts.

D. Thomas

(Print Claimant/Representative Name)

DeNece

(Signature of Claimant/Representative)

Sworn to and subscribed before me

City

State

on this

Date

day of

month

Year

WALLACE B. McNARY
NOTARY PUBLIC STATE OF ARKANSAS
ST. FRANCIS COUNTY
My Commission Expires 01-10-2015

SEAL

(Notary Public)

My commission Expires

Month

Day

Year

Before The ARKANSAS State Claims Commission

DADREAN THOMAS (#139943)

CLAIMANT

V. 15-0452-CC

ARKANSAS DEPARTMENT CORRECTIONS

Arkansas Claims Commission
JAN 26 2015
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RESPONDENT

Reply To Answer

The CLAIMANT DADREAN THOMAS (#139943)

Asserts that Respondant is liable in this claim for the violation of ADC + Unit policy and procedures.

1. CLAIMANT requests that request for Abeyance be denied. Respondant has had several opportunities to investigate this matter through the Grievance Appeal as well as the disciplinary appeal process.
2. Liability has already been proven by a response from Warden D. Burt in a grievance response dated 10-14-14
3. CLAIMANT is willing to negotiate with Respondant for a reduced out of court settlement.

4. Claimant seeks exemplary damages in the amount of \$900.00
- A. Have Respondant remove disciplinary from claimants adc file.
 - B. Restore all lost good time.
 - C. Transfer claimant to the Cummins or wrightsville unit
 - D. never transfer claimant back to the Briceys or Briceys max unit.
5. Claimant will negotiate with respondant and asks that all damages be paid to claimant within 30 calendar days from date on written Agreement.

For the reasons stated above, Claimant prays that the claim not be dismissed & allow Claimant to proceed to an oral hearing to present documentary & oral evidence that Respondant did violate ADC Policy.

Respectfully,

Dadrea Thomas #139943
EARL P.O. Box 970
MARIANNA, AR. 72360

Certificate of Service

I certify that a copy of this pleading has been served this 14th day of January, 2015, on the Respondant by placing a copy of the same in the U.S. Mail Regular postage to:

Lisa Mills Wilkins

Attorney Supervisor
P.O. Box 8707
Pine Bluff, AR. 71611

Dadreon Thomas # 139943
claimant

Before The Arkansas State Claims Commission

Dadrean Thomas #139943 Claimant

V.

NO. 150452-CC

Arkansas Department of Corrections Respondant

Arkansas Claims Commission

FEB 03 2015

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Reply to answer of amended complaint

The claimant D. Thomas (#139943) excepts that respondant is liable in this claim for the violation of ADC unit policy.

1. Claimant requests that the request for abeyance be denied.

2. Liability has already been proven by a response from Warden D. Burl in a grievance response in Exhibit 7 2 of 3

Certificate of Service

I certify that a copy of this pleading has been served this 25 day of January on the Respondent by placing a copy of the same in the U.S. Mail regular postage to Respondent

JAN 29 2015

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CLAIMANT

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

DADREAN THOMAS (ADC #139943)

V.

NO. 15-0452-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

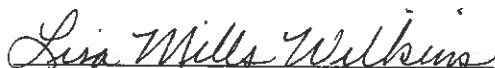
RESPONDENT'S MOTION TO DISMISS

COMES NOW the Respondent, Arkansas Department of Correction, and for its MOTION TO DISMISS, states and responds as follows:

1. Claimant alleges A FAILURE TO FOLLOW POLICY. He is seeking \$1,900.00. Claimant has failed to state a cause of action under ARCP 12(B)(6) and the matter should be dismissed.
2. Claimant alleges that he was not given a confiscation form for the contraband that was allegedly found on or around him. Claimant fails to recall that the tobacco found and confiscated from him fell from a white plastic bag located under his private area. Does he really need a confiscation form? Considering that Claimant was the only person being strip searched at the time and the bag fell from underneath the area where he was squatting and contained tobacco, a contraband, the disciplinary was properly written and upheld.
3. Based on the foregoing statements, has failed to state a claim upon which relief can be granted herein under ARCP Rule 12(b)(6).

WHEREFORE, for the reasons stated above and the evidence submitted, the Claim must be dismissed.

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 the MOTION TO DISMISS has been served this 27 day of January, 2015, on the below Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

DADREAN THOMAS (ADC #139943)

EAMU

P. O. BOX 970

MARIANNA, AR 72360-0970


LISA MILLS WILKINS Ark. Bar #87190

Before the Arkansas State Claims Commission
Dadrian Thomas # (139943) Claimant

V.

NO. 15-0452-CC

Arkansas Claims Commission

FEB 06 2015

Arkansas Department of correction Respondent

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Reply To Motion to Dismiss

1. The Respondent stated under ARCP 12(B)(6), Claimant has failed to state cause of action. But this claim has merit as given in Defendants policy AD-----

2. Claimant state that according to ADC administrative Directive AD 14-03(E)(2) "Form 401 must be completed to identify all property taken from the inmate as either excess/contraband or disciplinary/criminal evidence. After completion the form must be immediately scanned into eomis. The form must include at least the Inmate name ADC number, date of receipt, a description of the property item in sufficient detail for easy identification the reason the property was taken from the inmate

3. Based on the foregoing statements has state a claim with merit upon which relief can be granted under AD 14-03(E)(2)

Wherefore, for the reasons stated above and the evidence submitted, I ask that this claim don't be dismissed

Certificate of service

I certify that a copy of the ~~Motion~~ Reply to motion to Dismiss has been served this 30 day of January, 2015, on the Respondant by placing a copy of the same in the U.S. mail Regular postage

STATE CLAIMS COMMISSION CHECKET
OPINION

Amount of Claim \$ 1,900.00

Claim No. 15-0452-CC

<u>Dadreon Thomas, #139943</u> Claimant		<u>Pro se</u> Claimant	
vs.			
<u>AR Dept. of Correction</u> Respondent		<u>Lisa Wilkins, Attorney</u> Respondent	
State of Arkansas			
Date Filed	<u>December 12, 2014</u>	Type of Claim	<u>Failure to Follow Procedure</u>

FINDING OF FACTS

The Claims Commission hereby unanimously grants the Respondent's "Motion to Dismiss" for reasons set forth in paragraph 2. Therefore, this claim is hereby unanimously denied and dismissed.


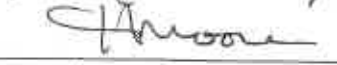

(See Back of Opinion Form)

CONCLUSION

The Claims Commission hereby unanimously grants the Respondent's "Motion to Dismiss" for reasons set forth in paragraph 2. Therefore, this claim is hereby unanimously denied and dismissed.

Date of Hearing March 11, 2015

Date of Disposition March 11, 2015

	Chairman
	Commissioner
	Commissioner

Dadreon Thomas, # 139943
P.O. Box 970
Marianna, AR. 72360

Arkansas Claims Commission

APR 06 2015

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Tuesday, March 24, 2015

BEFORE THE HONORABLE MEMBERS OF THE GENERAL ASSEMBLY
APPEAL OF DECISION FROM THE ARKANSAS STATE CLAIMS COMMISSION

Amount of claim: \$1,900.00

Respondent: AR Dept. of corrections

Date Filed: December 12, 2014

Type of claim: Failure to follow policy and procedure

Claim No. 15-0452-CC

FACTS

On May 30, 2014 at approx. 1:30 p.m. claimant was shookdown and written a major disciplinary by Sgt. Dorsey Lee because claimant was supposedly in possession of contraband.

On June 10, 2014 claimant attended a Major Disciplinary Hearing whereas he was found guilty of being in possession of contraband and was reduced to class IV status, claimant was given 30 days to serve in punitive isolation and he lost all of his good time.

Consequently, claimant appealed the decision of the disciplinary hearing officer to the unit warden, disciplinary hearing administrator, and finally to the Director of the CDC alleging

he did not receive a 401 form as required by policy and that said form must be issued whenever contraband is found on the person or within the property of any inmate.

claimant also filed a grievance regarding this failure to follow policy and procedure and said grievance was found with merit. (SEE ATTACHED EXHIBIT 7)

Nevertheless, claimant appeals were all affirmed which served as the basis as to why claimant filed a complaint with the Arkansas state claims commission which was also dismissed.

ARGUMENT

In light of the facts listed herein that was also presented to the Arkansas state claims commission it was a grave error committed when claimant claim was dismissed.

Furthermore, a clear cut picture of "failure to follow policy and procedure" can be seen in the grievance response claimant received from the unit warden on 10-14-14 which states "staff should have given this inmate a confiscation form (401) when the items were confiscated from him, not four months later". (See Attached EXHIBIT 7)

Since no confiscation form was given when the supposed contraband was taken from the claimant then the punishment he was assessed should not of been rendered due to no confiscation form being issued.

The issuance of a 401 confiscation form also preserves the chain of custody until an inmate goes to disciplinary court. Therefore, when it was determined that no confiscation form had been completed per AOC policy and procedures listed in Administrative Directive 14-03 the disciplinary infraction filed against the claimant should have been dismissed.

WHEREFORE, due to this blatant and willful violation of the administrative directive mentioned herein, the amount requested from the Arkansas state claims commission against the Arkansas Department of Correction was appropriate.

For this cause claimant prays that this Honorable Assembly grant him the requested \$1,900.00 and any other relief that is deemed proper and just.

Respectfully Submitted,

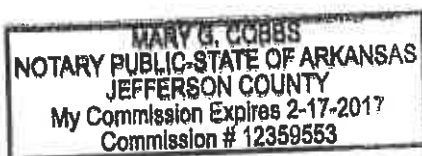
Dadrean Thomas # 139943

CERTIFICATE OF NOTARY

STATE OF ARKANSAS

COUNTY OF LEE

Subscribed and sworn to before Me a Notary Public on this 25th day of March 2015.




Mary G. Cobbs
NOTARY PUBLIC

my commission expires: 2-17-2017

IGTT410
3GSBKD/00584
Attachment IIIINMATE NAME: Thomas, Dadrean D.ADC #: 139943CGRIEVANCE #: EA-14-01620

WARDEN/CENTER SUPERVISOR'S DECISION

Inmate Thomas, you grieve on 09/17/2014, you were called to the field major's office where Lt. Padilla, Lt. Swinney, and Lt. Chaney were all present and given a confiscation form which you did not receive on 05-30-2014. Your complaint is noted. Lieutenant Padilla stated Sergeant Lee did a confiscation form on you when the contraband was taken off of you and Sergeant Lee gave it to Lieutenant Padilla. Lieutenant Padilla also stated he gave it to Major Conner, because he was told not to go to the max and when you wrote a grievance stating you did not receive a confiscation form, he called you into the field office to give you one to resolve your issue. Staff should have given this inmate a confiscation form when the items were confiscated from him, not four months later. I find your complaint with merit and corrective action will be taken.


Signature of Warden/Supervisor or Designee
Title
Date

INMATE'S APPEAL

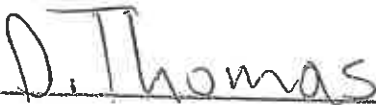
If you are not satisfied with this response, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director along with the Unit Level Grievance Form. Keep in mind that you are appealing the decision 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?

no action has been taken

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OCT 31 2014

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING
Inmate Signature139943
ADC#10-16-14
Date

28