Arkansas State Claims Commission

Please print in ink or type

# BEFORE THE STATE CLAIMS COMMISSION Of the State of Arkansas

RECEIVED

MAR 25 2015

<b>M</b> r.	Do Not Write in These Spaces
□ Mrs.	
□ Ms. □ Miss	Claim No. 15-0648-CC
Pae Jarreau, #086319 Claimant	Date Filed March 25, 2015
, Cialinant	(Month) (Day) (Year)
VS,	Amount of Claim \$ Claim 1 136,782.00 Claim 2 350,000.00
State of Arkanese Bases - Just	Fund DOC Claim 2 350,000.00
State of Arkansas, Respondent	Cloim 1 T
AR Dept. of Correction	Claim 1 Loss of property, Negli
COMPLAINT	Negligen
Pae Jarreau, #086319, the above named Claimant, of POB	
(Name)	(Street or R.F.D. & No.) (City)
Ar Kansas 72320 County of Lee repres	sented by
(State) (Zip Code) (Daytime Phone No.)	(Legal Counsel, if any, for Claim)
or Brickeys, Ar. 7232	O Says:
(Street and No.) (City) (State) (Zip Code)	(Phone No.) (Fax No.)
State agency involved: Brickeys Adc Adc Centr - Office Complicate Box Box State Am	ount sought: \$ 13 6363, And \$ 350,000.
Month, day, year and place of incident or service: 4/5/13. Brickeys, MAX. Sec	D. Co.
Explanation: Adc. Brickeys Unit (Theft) 2 Radio head a break	Frison,
C. The transfer of the contract of the contrac	35. and 30. Further (loss) of
Legal tiles \$ 12,500. Bookdraft \$12,500. Five oboto's	\$ 12,500-EACH(\$62,500) Food/
Dath/Clathe/Electronics, See itemized list on attache	d page one Column A. 3212
With holding personal properties 4/5/13 through to-date	4-26-14. \$ 100. per-day equaling
approx. year - 4 36,500, Mental Stress, anguish, o	and anxiety/Suffering of fear
4 12,500. (Total CLATM 1) 136, 782.) Sec. officer R. TI	vern Stale property, Property Supervi
sor and warden Complicit by Neglect allowed threats/abuse of	dutherity to knowingly Go unchecked.
ana. Claim, For indivisual agencies: Adc. Central Offi	ce/I-A-Compliance Division
State Police A. G. office / Board of Corr. Recompens	e Each for theft and or Loss
of Book draft \$12,500 equalling \$50,000, Le	ad files \$ 12.500 commo
\$ 50,000. Five Photo \$12,000 - equaling \$62	500 from Ench andness
(2nd-Claim Total) - "A.d.c. Bo.c	I A. A. G. Stale Polace Office
of Compliance 1350,000	, January Contract
These offices also prejudiced me. By Their N	lealect. (in the dame stated in ive
188/Losses) and thereby directly prevented CL	A = MANT from obtaining only
Sort of resolution internally From the immed	lidte Unit Administration wire
Sdiction on any of its Angencies. Please	continue on otterchaen
or additional explanation of claim Page Of	VE-A AND SE CONTRACTOR
As parts of this complaint, the claimant makes the statements, and answers the following questions, as indicated: (1	1) Has claim been precented to any state department or ASC cont.
NO ; when? : to whom?	-)
(Yes or No) (Month) (Day) (Year)	(Department)
and that the following action was taken thereon:	
11.01.0	700
and that \$ was paid thereon: (2) Hard third person or corporation an interest in	this claim; ; if so, state n me and address
(Name) (Street D. & No.) (City)	(5) 4.1
(Name) (Street F.P.D. & No.) City)	(State) (Zip Code)
: and was acquired on	in the following manner:
	and the same of th
THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set fo	with for the above correlated — Jake to an income to the
hat they are true.	od of the above companie, and that he or she verily Deneves
Paelaire Jarreau St. 9	N Is he at a s
(m) + (m) + (m)	Signature of Claimant/Representative
	1 le + + 0
SWORN TO and subscribed before me at	Creys 11k.
BNRYL W. O. th	140
	(City) (State)
SEAL) on this day of	(City) AC (State)
BIONOTALEZY	2014
SEAL) on this day of (Date)	(City) (State) (O) (Month) (Year)
BIONOTALEZY	2014
Date) Colory & W.	2014
BIONOTALEZY	(Month) (Year)

My Commission Expires: Dec 1, 20

UNIT LEVEL GRIEVANCE FURM (Attachment I) Unit/Center E. Ata Regional-Mx.	GRIEVANCE/RECEIVED	FOR OFFICE USE ONLY
Name Pas, Jarregy	APR 1 0 2013	GRV. # EAM13-0118
ADC# 86319 Brks #150-69 Job Assign	EAST AR RECIONAL	Date Received: 4-10-13
1-8-13 (Date) STEP ONE: Informal Resolution	IMENI MEGIONAL UNIT	GRV. Code #:
1-8-13 (Date) STEP TWO: Formal Grievance (All c	omploints/son some al 1	
If the issue was not resolved during Ste	en ()ne state why	A malita Make to sugar a limb
TO MELL PERMUIS WILLOUT	Frankely Document	ATIAN TOP IN VENEZIONE VENEZIONE LES
(Date) EMERGENCY GRIEVANCE (An em a substantial risk of physical harm; emergency grievance	CLECHEV SHABADON IS ONE IN	1 William Wall mass ha culturate tak
nature). If you marked yes, give this completed form to	the designated problem-so	olving staff, who will sign the
attached emergency receipt. If an Emergency, state why		
Is this Grievance concerning Medical or Mental Health	Services? If ves. c	ircle one: medical or mental
DINTERED AT STATE VOID ONE COMBIGINT/CONCORD and he conc		late, place, name of personnel
involved and now you were affected. (Please Print):	n Antil-5 2012	
In The Presence of C.O. Kim in iso. 2 shower stall, Approx. 3	3 30-04 CAE	rife I was detained
apparently missing He (Friar)	INFAF MON MAR T	but he cam is a their
Hallway while I was escorted	IASTIC DOLA NOA	CAFFM IT UB THE
SAUL KIMBLE COLLEGE THE SOT WILL	IMAAR to Faces T	The san The subset La
affiver I appised him of the of	eceding events	: Sat Williams
CHANGE OF MY CONCENT THAT	S. U. THOKH NA	IS DECOME OF KOONE
in his actions, to company to (FAI	LING to co.	mply to protocoly.
WOLK ON THE MOTTER. BUT, The	of Helwillian	is NOT THORNE
Supervisor _ Sor He cont tell The	ALL TO BEING MI	Property back.
- TELL SULL WILLIAMS IS FEMISS/ANA	I FERUMINTO him	Me diedmonialle -
He Has - virtually tainted any of	operty BY Ha	ecurately document
Inmate Signature	Date 4 _ 9	_ / 3
If you are harmed/threatened hecause of your use of the grie	vance process, report it imn	nediately to the Warden or designee.
This form was received on (date), and det	ermined to be Sten One a	ONLY  Ind/or an Emergency Grievance
(Yes or No). This form was forwarded to medic	cal or mental health?	(Yes or No). If yes, name
of the person in that department receiving this form:	1011/	Date
PRINTSTAFF NAME (PROBLEM SOLVER) ID Number Staff	Signature	4-3-13
Describe action taken to resolve complaint, including dat	es: This Sin	Date Received
TOTWARD TO H-Shift Sin	Der YISOP.	
		MAY 0 6 2013
G. Mai		MIMI DIVIZORI
Staff Signature & Date Returned This form was received on (1)	Inmate Signature	E RECEIVE SUPERVISOR
This form was received on 4943 (date), pursuant to Staff Who Received Step Two Grievance:		
Action Taken: full (Forwar ed to Gr.	ievance Officer/Warden/O	Date: 4-9-13 Other) Date: 4-9-13
If forwarded, provide name of person receiving this form:		Date: 4-9-13
DISTRIBUTION: YELLOW & PINK - Inmate Receip	ote DI HE Cristian OCC	3
to Inmate After Completion of Step One and Step Two.	ns, <b>DLUE</b> -Grievance Offi	icer; ORIGINAL-Given back

IGTT410 3GS

Attachment III

INMATE NAME: Jarreau Pae J.

ADC #: 086319B

GRIEVANCE #: EAM13-01118

## WARDEN/CENTER SUPERVISOR'S DECISION

Inmate P. Jarreau #86319 you grieve that Cpl. Thorne took some of your personal property while you were in Isolation 2 shower. Your complaint has been noted. The surveillance camera has been watched. At no time was Cpl. Thorne seen on the surveillance camera for the time firm you gave. Cpl. Thorne did however state in his witness statement "Inmate Jarreau had contraband in his property and became angry when I confiscated it". Cpl. Thorne also stated that "Inmate Jarreau received a major disciplinary for the items". Documentation shows that all items were confiscated, pictures were taken and a major disciplinary was written. All protocol was followed. Without further evidence I find your complaint without merit.

Signature of Warden/Supervisor or Designee

Wands

4/24/13

INMATE'S APPEAL

Fickle 4+30-13

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? There was only an inkpen that was staff are permitting my property to be stolen by "Corporal"— against Policy Retrulations;

There were no witnesses to This officers So-called "Shakedown" Confiscation; Beside The fact That he wasn't authorised to make an impromptu Confiscation (and acting Alone)—Neither was there, Nor Is There false reports regarding the property in Part. It expired Inmate Signature

ADC# 86319

Date 4-30-1

MAY **06** 2013

INMATE GRIEVANCE SUPERVISOR
ADMINISTRATION BUILDING

IGTT430 3GD

Attachment VI

INMATE NAME: Jarreau, Pae J.

ADC #: 086319

GRIEVANCE#: EAM13-01118

Inmate Jarreau, I have received your formal grievance dated 4/8/2013, where you allege on 4/5/2013, COII Thorne confiscated some of your property while you were in the shower.

After reviewing all supporting documentation and video footage, I find records indicate the items confiscated were contraband and you were issued a confiscation form for these items. COII Thorne states in part," On 4/5/13 at approximately 12:15PM I Cpl. Thorne was separating Inmate P. Jarreau ADC#086319 property in the max main hallway zone 1 so that his property could be inventoried for punitive placement. While doing so I Cpl. Thorne noticed that Inmate Jarreau had a lot of altered, and excess pieces of property, 2 sets of headphones that Inmate Jarreau has cut the bottom of the cord and taped more wire onto them so they will be longer, 2 large size plastic bags, 27 flex pen covers, 1 pair of state glasses that has strings holding them together, 2 free world ink pens, 7 pieces of saran wrap, 1 battery pack with batteries, 1 altered coby radio due to wires being cut, 1 state bowl full of radio parts and wires, 2 free world bowls, 1 free world strainer bowl, 1 altered state pillow, 1 small squirt bottle, and 1 roll of gauze. After Inmate Jarreau saw that I Cpl. Thorne was confiscating these items he began to get upset and stated "bitch you should not even be inventorying property you damn short hair you don't even know what a damn inmate can and can't have." Inmate Jarreau was given a direct order to stop yelling in the max hallway but would not comply therefore, he had to be moved into the isolation 2 area due to his failure to comply with the order. Photos of the items were taken and a confiscation form was done then a copy was taken to Inmate Jarreau by Me Cpl. Thorne and he refused to sign. Inmate Jarreau knows that his actions along with having these items in his possession are direct violations of ADC and UNIT policy. Due to evidence submitted in your appeal, I concur with the Warden's response in which he states in part," The surveillance camera has been watched. At no time was Cpl. Thorne seen on the surveillance camera for the time firm you gave. Cpl. Thorne did however state in his witness statement "Inmate Jarreau had contraband in his property and became angry when I confiscated it". Cpl. Thorne also stated that "Inmate Jarreau received a major disciplinary for the items". Documentation shows that all items were confiscated, pictures were taken and a major disciplinary was written. All protocol was followed. Without further evidence I find your complaint without merit."

Appeal denied

Director

17 M7

5.31.13

Date

Revo. 6/6/13 From Co. Ellis.
Pariceau

UNIT LEVEL	GRIEV	ANCE I N	M (Attachmen	it I) grievance	RECEIV		
Unit/Center E	Ar	Regiona	-MX		1		CE USE ONLY
Name Pae,	Va			APR 1		GRV. #	4m13-0137
ADC# 863		Brks #	169 Job As	signment S	GIONALUNIT	GRV. Code #:	67-2
4-6-13(Date	e) STEP	ONE: Inform	nal Resolution			GRV. Code #:	00
4-6-13 (Date	e) STEP	TWO: Forma	al Grievance (A	dl complaints/	concerns sho	uld first he ha	ndled informally.)
	n me i	ssue was not i	resoivea auring	i Step Une. sta	ite why: The	US COM	JI AT MIT
<b>4-8-13</b> (Date	e) EMER	GENCY GRI	IEVANCE (An	Manier Si	5' <b>CXTCAR</b> tuation is one	in which you	may be subject to
a suostantiai (18	wor bita	sicai naini, en	nergency grieva	ances are not f	or ordinary pi	roblems that a	re not of a serious
attached emerge	marked y	eint If an Em	completed form	to the design			who will sign the
Physi	ical .	hdrm:		Will You		reatene	4 TO SO THE
Is this Grievano	e concer	ning Medical	or Mental Hea	olth Services?	If ves	circle one: n	nedical or mental
BRIEFLY state	your on	e complaint/c	concern and be	specific as to t	the complaint	, date, place,	name of personnel
involved and ho			allitude		DF Apri		horn began
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forming in	ven't		MY Prope	450		ideo 2	.00 HOUR
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ecouse We		COME ON	he rest	I had ex	reess pr	operty	but rather-
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NAS REAL	DIN	G THRO	WETH MY	-	ONAL	PROPER	TYHE
REPLIE	25	IMJU	st Look	ing. C	D. Thoi	-n thei	pickedup
of wals. W	lhen	A THE P	Mad him	PILE OS	+ was	did not	know what
began to	berar	te Me/a	nd decus	e Me of	Advina	XCESS D	roperty
+ this po	int,	ther st		mmended	Thorn	LEGYE MY	preperty to be
nventeried issing a an	DY C	ther pers	compel, N	ext I k	new all	of most	uy stuff is
tered prope	2774/	Savis he	me in 150,2	A ୮୯ଣ ଖ୍ୟ	nour lat	ter, occu	FUCK ME UP
T / CI*	1 1	1 achhea	על	حرا الها الم	Date 4.	2-13	LUKA ME UP
If you are harmed	d/threater	ne because of	vour use of the	grievance proc	ess, report it it	mmediately to 1	he Warden or designee.
This form was re	eceived o	on 4-75-13	CTION TO BE (date), and	determined to	be Step One	F UNLY	nergency Grievance
(Yes or	r No). T	his form was	forwarded to m	edical or men	tal health?		r No). If yes, name
of the person in	that depa	irtment receiv	ing this form:	172	-	A Part I	Date
PRIN I STAFF NAME	(PROBLEM		D Number 5	staff Signature	Tra	ZXX.	Data Desciond
Describe action				dates: O/	FC The	orus Sil	Pate Received
he Co	DAF	scale h	pro pa	ECEIVED	nd of	discorp	linging
was I	NY	rej	- Y	1		1/2	
Sat Bh	erri	H-9	2-13- M	AY 17 2013	dure aut 8	36319	4-11-13
Staff Signature &			INMATE GR	EVANCERSIDER	Signature & I	Date Received	7:17 13
This form was re	eceived o	n 4/11/13					(O (Yes of No)
Staff Who Rece Action Taken:	-	p I wo Grieva	nce:	Greenson C		Date:	11/13
If forwarded, pro			eceiving this for	orm:	Tilcer/ warder	Aco Date	4/11/12
				·			4/1/10
DISTRIBUTIO	N: YEL	LOW & PIN	NK – Inmate Re	eceipts; BLUE	E-Grievance (	Officer; ORIG	INAL-Given back
to Inmate After (	Completi	on of Step Or	ne and Step Tw	0. ,			

Attachment III

INMATE NAME: Jarreau Pae J.

ADC #: 086319B

GRIEVANCE #: EAM13-01137

### WARDEN/CENTER SUPERVISOR'S DECISION

I/m P. Jarreau you grieved that on April 5, 2013 Cpl. Thorne was displaying a menacing attitude towards you threaten to do you harm and stole your property. Your complaint has been noted. Camera footage was reviewed and at no time did it show that Cpl. Thorne had a menacing attitude towards you. Cpl. Thorne stated "I did not have a menacing attitude towards inmate Jarreau". Without further evidence I found your complaint without merit.

Signature of Warden/Sipervisor or Designee

WAND

5/9/13

#### **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.

NHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? The response from the Warden is as I'CH YOU WELLEME ACCORDED TO EXPECT. NOT THAT MY NEW ISSUE IS THAT I RECOGNIZE A CORRUPTION AMONG THE SECURITY AND ADMINISTRATIVE STAFF. I'M only making NOTE of ither because it is here— in this above response— so brazenly obvious, implied—That There's members of staff here who knows— and is able to verify verbal Threats Were in-fact made towards me, by Thorn's Staff was present and witnessed the incidents; twice in one day.) officers and Warden Burl are attempting to cover-up for Thorns misconduct in regard to This issue of Threatening me. I ask That he be not treated for his Threats irregardless of his denials. The Warden's response is irresponsible. And it borders on MORE Nepotic intimodation by its negligence and direlection. Inmate Signature St. Parreau ADC# 86319

Date 5/10/13

RECEIVED

MAY 17 2013

INMATE GRIEVANCE SUPERVISOR ADMINISTRATION BUILDING IGTT430 3GD

Attachment VI

INMATE NAME: Jarreau, Pae J.

ADC #: 086319

GRIEVANCE#:EAM13-01137

Inmate Jarreau, I have received your formal grievance dated 4/6/2013, where you allege on 4/5/2013, COII Thorne was displaying a menacing attitude towards you ;threaten to do you harm and stole your property.

After reviewing all supporting documentation, I find you have submitted mulitiple issues in your grievance, however I will only address one issue which is COII Thorne displaying a menacing attituse toward you. I find you have failed to provide any evidence to substantiate your allegations. COII Thorne denies your allegations. Therefore, I concur with the Warden's response in which he states in part, "Camera footage was reviewed and at no time did it show that Cpl. Thorne had a menacing attitude towards you. Cpl. Thorne stated "I did not have a menacing attitude towards inmate Jarreau". Without further evidence I found your complaint without merit.

Appeal denied

17M7

Director

6.19.13

Date

RCV 6/24/13 PCV 6/24/13 COHINASOZ

APR 1 0 2015

## BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

RECEIVED

PAE JARREAU (ADC 086319)

**CLAIMANT** 

V.

NO. 15-0648-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

Attorney Supervisor Post Office Box 8707

Pine Bluff, AR 71611

(870)267-6844 Office

(870)267-6373 Facsimile

CERTIFICATE OF SERVICE

9 day of 9 I certify that a copy of this pleading has been served this 2014, on the Claimant by placing a copy of the same in the U. S. Mail, regular poslage to:

Pae Jarreau (ADC 086319) East Arkansas Max Unit PO Box 970 Marianna, AR 72360-0970

## STATE CLAIMS COMMISSION DOCKET OPINION

OPINI	ON
486,782.00	
Amount of Claim \$	Claim No. 15-0648-CC
Pae Jarreau # 086319	Attorneys D
Pae Jarreau # 080319  Claimant	Pro se Claimant
vs.  AR Department of Corrections	Lisa Wilkins, Attorney
State of Arkansas Respondent	Respondent
March 4, 2015  Date Filed	Loss of Property, Mental Stress,  Type of Claim Negligence, Pain & Suffering
FINDING OF	FACTS
This claim was filed for the loss of property, in the amount of \$486,782.00 against Arkans	mental stress and negligence and pain and suffering as Department of Corrections.
Present at a hearing December 9, 2015, was the represented by Lisa Wilkins, Attorney.	he Claimant, pro se, and the Respondent,
The Claims Commission hereby unanimously Claimant's failure to prove by a preponderance part of the Respondent.	denies and dismisses this claim for see of the evidence any liability on the
Therefore, this claim is hereby unanimously	y dismissed.
IT IS SO ORDERED.	
(See Back of Opinio	on Form)
CONCLUSION	ON
Upon consideration of all the facts, as stated ald denied and dismissed this claim for Claimar the evidence any liability on the part of the limits.	it's failure to prove by a preponderance of
Date of HearingDecember 9, 2015	1.11.
December 9, 2015  Date of Disposition	furt My
Tate of Disposition	Rul — Chairman

Commissioner

Commissioner

## STATE CLAIMS COMMISSION, DOCKET OPINION

Amount of Claim \$ 486,782.00		Claim No.	15-0648-CC
		Attorneys	
Pae Jarreau, #086319 vs.	Claimant	Pro.se	Claimant
AR Dept. of Correction	Respondent	Lisa Wilkins, Attorney	Respondent
State of Arkansas			
Date Filed March 25, 2015		Type of ClaimClaims 1: Loss of F	roperty, Negligence

#### FINDING OF FACTS

The Claims Commission hereby unanimously denies Claimant's "Motion for Reconsideration" for the Claimant's failure to offer evidence that would change the prior decision of the Claims Commission. Therefore, the Commission's December 9, 2015 order remains in effect.

IT IS SO ORDERED.

(See Back of Opinion Form)

### CONCLUSION

The Claims Commission hereby unanimously denies Claimant's "Motion for Reconsideration" for the Claimant's failure to offer evidence that would change the prior decision of the Claims Commission. Therefore, the Commission's December 9, 2015 order remains in effect.

Date of Hearing	January 14, 2016		
Date of Disposition	January 14, 2016	MStraffier	Chairman
		Bill Fave	Commissioner
			Commissioner

Claims Review Sub committee

Re: 015-0648

State Claims Commission

Notice of APPEAL Against: Order to Dasmiss Arkansas Claims Commission FEB 0 1 2016 RECEIVED

Enters here pursuant to ACA 3 19-10-211 et seq for Leave to reverse Claims Commission Dec. 9, 2015 Hearing's opinion of the above styled 015-648cc case; Recount Newly presented evidence here (attached) documents of Property Inventory Records forms detailing / showing of existing TRUE possession of items listing consistent with those I denoted as Lossed I as a direct result of determined Malice/ommission (Neglect and Thett) committed by State employed staff (Security officers) assigned to perform/ while claim was housed in Special Status Housing pending L301 days changeding) of status. Please note date, 4-5-13, on (white-cop) you inventory form; all of said property chaimant has been deprived of 33 menths as of to-date, 1/29/16, Astarisks placed on White and pink copy by Appellant to indicate the said possession of -18, (eighteen) Legal file Envelopes (9/10-inch by 12-or 14 inch) containing Law case Study files; and Bookdraft; personal Photes stated as lossed

or stalen. officer fatsified disciplinary for contiscation of a radio and two sets of headphones. Claimant asserts as to intellectual properties Ewritten and contained in missing/stolen/lossed envelopes I recorded as legal-material or Legal Mail on the here attached Property Inventory torms.

Claimants attempt to disclose and exhibit these recently (aquired Sept. 2015) evidences at his 12-9-15 Hearing, were (abruptly interrupted after a 30-second verbal/ opening remark by your petitioner) and Hearing was haulted and ended.

Appellant feels has request for Full statutory amounts for each photo from each indivisual agency; - is - both descring and proper, due to the malicious/intentional Theft, which could very well have been thwarted were it

not so callensly disregarded.

These are not losses by "Accident" which is more-over a reason for Full and stiff penalties. Adding justification to the sums requested (100.00-dollars per-day payment) from Max. Sec. Unit, at Brickeys, Ar. for the delinquent, and protracted 33-months denials, while property is Missing - unexplained. \* For all of the afore stated reasonings,
The Order of dismissal should here at this
Instance be reversed and, an EXTENSION
of time issued per-joined to these fore-going
Motions (actions) of Appeal <> so that
Claimant may suit the eminent purpose of
his complaint — and give full Pleading
at a Full and Fair hearing of attaining matters.

In concluding;

Claimant is beleagued by Threats/subtle

threats, to discourage him:

While Respondents Attorney admits cupability

in the citing of ACA 19-10-305(a),

"State of Arkansas is immune from suit or

liability, except employees are covered by

Commiss liability insurance for causing

damage or loss — by acts of ommission

in the course of, and scope of their

employment.... No open admission:

Yet Theft of claimants property was an intended,

deliberate and Malicious act by staff.

Agencies are thus to be blamed and

held accountable.

Respectfully, Submitted

Sae. Garreau E. Ar. Regional MX. P.O. Box - 976 14 Marianna, Ar., 72360

## ADC INMATE PERSONAL PROPERTY INVENTORY RECORD

		N	lon-Expen	dable Items			
ITEM	#	DESCRIPTION	CODE	ITEM	#	DESCRIPTION	CODE
Blanket				Pants			
Body Support Device				Photos			
Books				Photo Album			
lowls		Y		Pillow Case			
/agazines				Pillow			
Cap/Hat				Prosthetic			
lock				Radio			
Comb				Religious Matérial			
шр				Religious Medal			
)entures				Rings			
arphones				Sheets			1 5
arplugs				Shirts			
verlasses				Shoes			
loves				Shower Shoes			
vm Shoes				Socks			
air Braids				Stockings			
air Dressing				Sweat Pants	-1		
eadphones	$\rightarrow$			Sweat Shirts			
mate ID Badge	-			Toothbrush	$\rightarrow$		-
acket/Coat	$\rightarrow$	,		Towels			-
aundry Bag	-						-
				Towels-Hand			
egal Materials				Undergarments			-
fail Legal				Undershirts			-
fail Personal	$\rightarrow$			Under shorts		1	
fattress				Wash Cloths			-
1irror				Watch-Pocket			
ail Clippers				Watch-Wrist			
adlock				Wallet			
			Expenda	ble Items			
ITEM	#	#/DESCRIPTION	CODE	ITEM	#	#/DESCRIPTION	CODE
enture Adhesive				Prescriptions			
eodorant				Razor-Safety			
lex Pen				Shampoo			_
ood Items				Shaving Cream			
lygiene Items				Soap			_
7.0				304	$\neg$		+
			Otl	her			
ITEM	#	#/DESCRIPTION	CODE	ITEM	#	#/DESCRIPTION	CODE
1 1 10 3	11 6						
ther state that I do no	Il of my prot have in i	operty is listed on this my possession the leg	s inventory a al materials	nd disposition of all pl belonging to any other	roperty list inmate."	ed on this inventory i	s correct.
gnature of Official Re	eceiving P	roperty Date	Locat	ion Stored In	nate's Sigr	ature	Date
y		-L 22-1	20041			inmate refuses to sig	
gnature of Official Re	eturning Pr	roperty Date	Witness Sig	nature Date In	mate's Sig	nature	Date
I should die during r	ny incarce	ration, I designate the	individual I	isted below to receive	my person	al property."	

F-841-1

St. Why necessary is this done day prior?

Existence of This form implies Fraud-Sgt. Cole came to my lell said he just \_\_\_\_\_\_ completed invatory that 4/6/13 SAT, America

F-841-1

1 Symmetry			Von-E	Xne	#: 8639 Insti		KILINGE,	
ITEM Blanket	#	DESCRIPTION	10	ODE	ITEM			
Body Support Device	X	V		V	Pants	- 1	DESCRIPTION	COL
		1	6	35	DI		/	M
The Age of the Contract of the	15	HIH GBINIEMIA	11100	16/16	Photo Album		-	X
Bowls High	15	200015	1	2	CAL DOM	- 1	Δ	
Cap/Hat	27	7.		X	Pillow Case	7	pillowase	
Clock	12	(2 ps	- 3	5	Prosthetic	-10	PILLOUS .	K
Comb +1114	0	0		1	Radio Crue	15	1 40.00	X
Cup TWO	一	amos.		3	Religious Material	- 14	1000 C	-137
Dentures 1	10.	Lujos	13	5.	Religious Medal	1	/	1
Earphones	V			1	Rings	1		X
Earplugs	$\Lambda$		X		Sheets one	- 4	Sheats	1/2
Eyeglasses 670	7	616000			Shirts	×	(140+)	1/6
Gloves	2 1	ajeglosses	_   &	3	Shoes	1	State Shoe	X
Gym Shoes	1 11	0 0	1	/	Shower Shoes The	17	State Shoe	1
Hair Braids	11		-11		Socks Piak		Dier Vonto	1
Hair Dressing	V		$ \vee$		Stockings	9	Par Koto	SIE
Headphones	1		1		Sweat Pants	V		1
Immate ID Badge	11		1/		Sweat Shirts	1		A
Jacket/Coat	11		1/1		Toothbrush Sever	17/	TheHarushes	40
Laundry Bag (7)		andred bory	-1/	1	Towels Topo 0	13	Big Towners	1 15
egal Materials Tweene	0	evaluation	1		Towels-Hand	15	Todels	15
Mail Logal	eda.	enterior .	-15		Undergarments	- 1	1 COCCUT	TK
Mail Personal	V		1/	2	Undershirts	IX		- X
/ attress	1	With the second second	- X		Under shorts 514	10	BUCUS	10
Airror HUD	21/	Monor	1/1		Wash Cloths Do	1	washcloth	RE
Jail Clippers	1		11.5		Watch-Pocket	1	The state of the s	115
adlock	X		16	>	Watch-Wrist	X		1
			×	- 1	Wallet			1
ITEM	E .	11 The 18	Expen	dab	ole Items			1/1
enture Adhesive	#	#/DESCRIPTION	CODE		ITEM	#	##DEGGE TEN	
eodorant Ane		CANDOCANY VOOR			Prescriptions	17	#/DESCRIPTION	CODE
lex Pen	· V	ers,	-5	1	Razor-Safety	X	-17.14	V
ood Items One	-17	hill Willeans	5		Shampoo mu	CA	Shampoo	1
ygiene Items	7	THE PARTY OF	5	_ 3	Shaving Cream	VI.	David Cacan	5_
allingue time of	1	Traffin Don	X		Soap troc	4	Lawred Crean	3
		Mainfre	0		INC WILLIAM		except .	3
TTTB 4				)the	er	31		7
ITEM 1	#	#/DESCRIPTION	CODE		ITEM	No.		
ermals three	11	ermal Shirts	0	-	EShirts - WD	1.5	#/DESCRIPTION	CODE
remals three ?	11	atural Paints	7	1/3	prolingerts	12	Storedishid	55
Dark Control of the C	KOL	CKS	5	1	ISSOMEOR PARTY	176	molimonts	5
othere ;			V	Th	350 170			5
hereby certify that all of m	pro	perty is listed on this in	iversory	/ and	disposition of all	16 14	474 TOOK CLORD	8
ther state that do not have	in m	V/possession the legal	material	c ha	disposition of all prope	erty liste	ed on this inventory is c	correct I
00/11		Safe Secretary accessors on the second	major 141	3 00	longing to any other inn	nate.",	ar mak to	
y years 2	$\neg$	14-05-13	man	100	3 Invat	-0 1	arreac	e
nature of Official Receivin	g Pro	perty Date	100	-			efursed to s	10.11
	0	porty Date	TOC	atioi	n Stored Inmate	's Sign	ature	Date
					Or Wit	ness if	inmate refuses to sign	Date
0.000					1	11 000	miliate refuses to sign	
nature of Official Returnin	g Pro	perty Date W	itness S	ionai	Titre Data I		1 11	
					11	's Sign	ature	Date
should die during my inca	rcera	tion. I designate the in-	dividual	12.4				
, ,		and the management of the mana	TIAIGUAI	liste	ed below to receive my	ersona	property "	
					1		r-sporty.	
me		Address		-	City	9 <del></del>	_	200
			-	-	City	Sta	ite Phone	