

TARRANT COUNTY DEPARTMENT OF CORRECTIONS
CONDUCT REPORT

Prisoner Number: 4685	Prisoner Name: Dallas	Facility Code: URF	Lock: R-401	Violation Date: 8/4/2017
Time and Place of Violation: 1829 Round JPay Machine		Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A		

Misconduct Class: I II III Charge(s): Threatening Behavior

Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses):
At 1829 on 8/4/17 Inmate Dallas #314685 sent a JPay letter to "Adele F Demain. Inside of the letter, Dallas states "He is not going to not take care of my baby. He will have another thing coming he better take care Courtney for real or that is the last baby he will have if I have something to do with it. I am not a nice guy when you piss me off. I am not hear for being nice. You and Courtney are my girls you don't want to fuck with that. I will give it the benefit of the doubt but he will perform or he will be down the road ripped in half. This I promised ! I am not in prison for drunk driven and I am not at level 4 and AB for know thing." Inmate Dallas' written words show an intent to physically harm a member of the public.

Identified by MDOC Facesheet and Unit Countboard
My Baby is Courtney not really my baby. fuser of speech. Rithim in halfe another figure of speech. to make courtney and Adele feel Better. Adele My girl of 13yr

Reporting Staff Member's Name (Print) Sgt. Pawley	Reporting Staff Member's Signature <i>[Signature]</i>	Date and Time Written 8/8/2017 @ 1900 My son
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REVIEW

Location/Verification/Condition of Evidence:
is 17 I have No baby!

Elevated to Class I at review: No Yes If "yes", explain reason:

COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT

Status Pending Hearing: Bond Segregation Confinement to Cell/Room Other *I am 42*
Reason if Non-Bond: Non-Bond List Bond Revoked (must give reason)

Date and Time Given this Status: _____ Who Notified in Housing Unit of Status: _____

Hearing Investigator Requested? No Yes Witnesses Requested? No Yes
If yes, list: _____

Relevant Documents Requested? No Yes
If yes, list: _____

Additional Comments: _____ Prisoner Waives 24 Hour Notice of Hearing? No Yes
Hearing Date: _____

Reviewing Officer's Name (Print)	Reviewing Officer's Signature	Review Date and Time
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I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.	Prisoner's Signature	Date
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WAIVER OF CLASS II OR III HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.	Prisoner's Signature	Date
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SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)

_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)
_____ Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)
_____ Hours Extra Duty	Begins: _____	Ends: _____	


Property Disposition If Applicable: _____

Employee Accepting Plea and Imposing Sanction (Print)	Employee's Signature	Date
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Hearing Investigator's Name (Print)	Hearing Investigator's Signature	Date
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CLASS I MISCONDUCT HEARING REPORT

12407

Prisoner 314685	Prisoner Name Dallas	Facility Code URF	Lock R 401	Violation Date 08/04/2017
Charge(s) Threatening Behavior				
If Charge Changed by Hearing Officer			Plea <input type="checkbox"/> Guilty <input checked="" type="checkbox"/> Not Guilty	
Misconduct Report Read to and Discussed with Prisoner		<input checked="" type="checkbox"/> (check if applies)		No Hearing Investigation Requested
Hearing Investigation Read to and Discussed with Prisoner		<input checked="" type="checkbox"/> (check if applies)		<input type="checkbox"/> (check if applies)
EVIDENCE/STATEMENTS IN ADDITION TO MISCONDUCT REPORT				
<p>Unless other wise noted all documents are one page. The prisoner is present and the misconduct report is reviewed with him along with his statement he did write it but it was to make his girlfriend and daughter feel protected and to motivate the guy who knocked up his daughter, and the JPAY Message (2 pg). Prisoner Dallas admits he wrote it but states he was not going to do it it was to motivate the guy who got his daughter pregnant as he has no job and does drugs and he wanted to make his girlfriend and daughter feel protected. He states since he did not name who it was he can not be guilty. Prisoner has nothing further to add. No further evidence is needed. Prisoner was informed of the findings, sanctions and sanction dates and told he will receive the report later.</p>				
REASONS FOR FINDINGS				
<p>Based on the uncontested facts, Prisoner Dallas wrote a letter to his girlfriend saying that the guy who impregnated his daughter better take care of her or he will make sure it is the last baby he has and be ripped in half on 8-4-17 at 1829 hrs. I find that this statement by its very nature expresses an intent to physically harm the guy who impregnated his daughter. It is not a defense that he did not give the guys name as he is clear he was threatening to harm a person and who it is is not necessary. It is not a defense that he did not intend to actually do it because the statement itself expresses the intent to physically harm. The Sergeant is clear and factual in his statement and is found to be credible. The charge is upheld.</p>				
PROPERTY DISPOSITION (for contraband see PD 04.07.112)				
FINDINGS				
Charge No. 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code <u>012</u>
Charge No. 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
Charge No. 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
Charge No. 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
DISPOSITION (select one or more) (Toplock & LOP Sanctions End at 6:00 am)				
		Begins	Ends	
_____ Days of Detention				_____ Days Credit
<u>30</u> Days Top Lock		<u>10/25/2017</u>	<u>11/24/2017</u>	_____ Hours Extra Duty
<u>30</u> Days Loss of Privileges		<u>11/24/2017</u>	<u>12/24/2017</u>	\$ _____ Restitution
Misconduct Hearing Report personally handed to Prisoner by Hearing Officer on this date: _____ (Check if Applies) <input type="checkbox"/>		Hearing Report given to Staff Member by Hearing Officer for Delivery to Prisoner this date: <u>8/11/2017</u> (Check if Applies) <input checked="" type="checkbox"/>		
Date of Hearing 08/11/2017		Name of Staff Member McCollum		
Hearing Officer's Name		Hearing Officer's Signature		Date
O'Brien 052				8-11-17

MISCONDUCT REPORT

Prisoner Number: 314685	Prisoner Name: Dallas	Facility Code: URF	Lock: R-422	Violation Date: 08/25/2017
Time and Place of Violation: 1945 Round Unit Yard		Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A		
Misconduct Class: <input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III Charge(s): Fighting				
Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses): At 1945, I directly observed inmate Dallas #314685 swing a closed fist blow to the head and neck area of prisoner Murray #859649 who swung back at Dallas. Both inmates were attempting to cause physical harm to one another. Inmates then squared off in a boxing style stance with fists clenched, until orders were given by staff to stop fighting and be restrained. Identified by OTIS face sheet/ Round Unit master count boards.				
Reporting Staff Member's Name (Print) Bosbous		Reporting Staff Member's Signature		Date and Time Written 08/25/2017 2105

REVIEW

Location/Verification/Condition of Evidence:

Elevated to Class I at review: No Yes If "yes", explain reason:

COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT

Status Pending Hearing: <input type="checkbox"/> Bond <input type="checkbox"/> Segregation <input type="checkbox"/> Confinement to Cell/Room <input type="checkbox"/> Other	Reason if Non-Bond: <input type="checkbox"/> Non-Bond List <input type="checkbox"/> Bond Revoked (must give reason)
Date and Time Given this Status: _____	Who Notified in Housing Unit of Status: _____
Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes	Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list: _____
Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list: _____	
Additional Comments:	Prisoner Waives 24 Hour Notice of Hearing? <input type="checkbox"/> No <input type="checkbox"/> Yes Hearing Date: _____
Reviewing Officer's Name (Print)	Reviewing Officer's Signature
I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.	Prisoner's Signature

WAIVER OF CLASS II OR III HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.	Prisoner's Signature	Date
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SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)

_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)
_____ Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)
_____ Hours Extra Duty	Begins: _____	Ends: _____	
Property Disposition If Applicable: _____			
Employee Accepting Plea and Imposing Sanction (Print)	Employee's Signature	Date	
Hearing Investigator's Name (Print)	Hearing Investigator's Signature	Date	

CLASS I MISCONDUCT HEARING REPORT

Prisoner 314685	Prisoner Name Dallas	Facility Code URF	Lock S 422	Violation Date 08/25/2017
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Charge(s)
Fighting

If Charge Changed by Hearing Officer	Plea <input type="checkbox"/> Guilty <input checked="" type="checkbox"/> Not Guilty
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Misconduct Report Read to and Discussed with Prisoner <input checked="" type="checkbox"/> (check if applies)	Hearing Investigation Read to and Discussed with Prisoner <input checked="" type="checkbox"/> (check if applies)	No Hearing Investigation Requested <input type="checkbox"/> (check if applies)
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EVIDENCE/STATEMENTS IN ADDITION TO MISCONDUCT REPORT

The hearing is commenced by the watching of the video that is found to be confidential for the security of the facility. The video shows both Murray and Dallas swinging at the other with a closed fist. The prisoner is informed. Unless otherwise noted all documents are one page. The prisoner is present and the misconduct report is reviewed with him along with his statement that he just backed away and put up his arms, Misconduct Assessment Form, Misconduct Screening Form, Memo regarding the Video that is found to be confidential for the security of the facility, and Prisoner Murray' Misconduct Report and refusal of the hearings investigator. Prisoner Dallas states that they argued and Murray swung on him so he put his arms up to block. Prisoner has nothing further to add. No further evidence is requested or is needed. Prisoner is informed of the findings, sanctions and sanction dates and told that he will receive the report later.

REASONS FOR FINDINGS

Prisoners Murray and Dallas swung at each other with closed fists on 8-25-17 at 1945 hrs. I find that this was a physical confrontation that was done out of anger as it was during an argument. Prisoner Dallas' statement is not believed because he is seen on video swinging at Murray with a closed fist. The Officer is clear and factual in his statement and is found to be credible. The charge is upheld.

PROPERTY DISPOSITION (for contraband see PD 04.07.112)

FINDINGS				
Charge No. 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code 014
Charge No. 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
Charge No. 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
Charge No. 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____

DISPOSITION (select one or more) (Toplock & LOP Sanctions End at 6:00 am)

<u>10</u> Days of Detention	Begins <u>09/05/2017</u>	Ends <u>09/15/2017</u>	Days Credit _____
Days Top Lock _____	Hours Extra Duty _____		
Days Loss of Privileges _____	\$ _____	Restitution _____	

Misconduct Hearing Report personally handed to Prisoner by Hearing Officer on this date: _____ (Check if Applies) <input type="checkbox"/>	Hearing Report given to Staff Member by Hearing Officer for Delivery to Prisoner this date: <u>9/5/2017</u> (Check if Applies) <input checked="" type="checkbox"/>
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Date of Hearing 09/05/2017	Name of Staff Member McCullum
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Hearing Officer's Name O'Brien 052	Hearing Officer's Signature 	Date 9-5-17
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MICHIGAN DEPARTMENT OF CORRECTIONS
MISCONDUCT REPORT

CSJ-228
 10/10 4835-3228

Prisoner Number: 314655	Prisoner Name: Dallas	Facility Code: LRT	Lock: R-401	Violation Date: 6/10/17
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Time and Place of Violation: 2038 Round Yard	Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A
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Misconduct Class: <input type="checkbox"/> I <input type="checkbox"/> II <input checked="" type="checkbox"/> III	Charge(s): VPR #19
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Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses):
 I directly observed Dallas # [redacted] sitting inside the red box while four other prisoners were using the phones. Dallas has been warned on multiple occasions not to be the 5th prisoner of the phones.
 ID'd by MDOC ID card

Reporting Staff Member's Name (Print): Belbicez	Reporting Staff Member's Signature: <i>[Signature]</i>	Date and Time Written: 6/10/17 2055
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REVIEW

Location/Verification/Condition of Evidence:

Elevated to Class I at review: <input type="checkbox"/> No <input type="checkbox"/> Yes	If "yes", explain reason:
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COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT

Status Pending Hearing: <input type="checkbox"/> Bond <input type="checkbox"/> Segregation <input type="checkbox"/> Confinement to Cell/Room <input type="checkbox"/> Other
Reason if Non-Bond: <input type="checkbox"/> Non-Bond List <input type="checkbox"/> Bond Revoked (must give reason)

Date and Time Given this Status:	Who Notified in Housing Unit of Status:
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Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes	Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes
Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, list:

Additional Comments:	Prisoner Waives 24 Hour Notice of Hearing? <input type="checkbox"/> No <input type="checkbox"/> Yes
	Hearing Date:

Reviewing Officer's Name (Print): J Meehan	Reviewing Officer's Signature: <i>[Signature]</i>	Review Date and Time: 6-11-17 1545
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I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.	Prisoner's Signature: <i>[Signature]</i>	Date: 6/11/17
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WAIVER OF CLASS II OR III HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.	Prisoner's Signature: <i>[Signature]</i>	Date: 6-15-17
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SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)

<input checked="" type="checkbox"/> Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)
<input type="checkbox"/> Days Loss of Privileges	Begins: 6/10/17	Ends: 6/11/17	<input type="checkbox"/> \$ _____ Restitution (Class II only)
<input type="checkbox"/> Hours Extra Duty	Begins: _____	Ends: _____	

Property Disposition If Applicable:

Employee Accepting Plea and Imposing Sanction (Print): C. J. [redacted]	Employee's Signature: <i>[Signature]</i>	Date: 6/10/17
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Hearing Investigator's Name (Print):	Hearing Investigator's Signature: <i>[Signature]</i>	Date:
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MICHIGAN DEPARTMENT OF CORRECTIONS
MISCONDUCT REPORT

CSJ-228
 10/10 4835-3228

Prisoner Number:	Prisoner Name:	Facility Code:	Lock:	Violation Date:
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Time and Place of Violation:	Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input type="checkbox"/> N/A
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Misconduct Class:	<input type="checkbox"/> I <input checked="" type="checkbox"/> II <input type="checkbox"/> III	Charge(s):
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Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses):

11/11/17

Reporting Staff Member's Name (Print)	Reporting Staff Member's Signature	Date and Time Written
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REVIEW

Location/Verification/Condition of Evidence:

Elevated to Class I at review:	If "yes", explain reason:
<input type="checkbox"/> No <input type="checkbox"/> Yes	

COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT

Status Pending Hearing:	<input type="checkbox"/> Bond <input type="checkbox"/> Segregation <input type="checkbox"/> Confinement to Cell/Room <input type="checkbox"/> Other	Reason if Non-Bond:
	<input type="checkbox"/> Non-Bond List <input type="checkbox"/> Bond Revoked (must give reason)	

Date and Time Given this Status:	Who Notified in Housing Unit of Status:
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Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes	Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes
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Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, list:
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Additional Comments:	Prisoner Waives 24 Hour Notice of Hearing? <input type="checkbox"/> No <input type="checkbox"/> Yes
	Hearing Date: _____

Reviewing Officer's Name (Print)	Reviewing Officer's Signature	Review Date and Time
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I have received a copy of this report. My signature does not necessarily mean that I agree with the report.	Prisoner's Signature	Date
<input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.		

WAIVER OF CLASS II OR III HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.	Prisoner's Signature	Date
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SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)

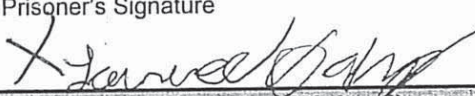
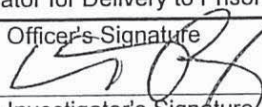
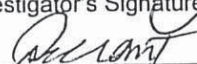
_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)
_____ Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)
_____ Hours Extra Duty	Begins: _____	Ends: _____	

Property Disposition If Applicable: _____

Employee Accepting Plea and Imposing Sanction (Print)	Employee's Signature	Date
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Hearing Investigator's Name (Print)	Hearing Investigator's Signature	Date
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CLASS II AND III MISCONDUCT HEARING REPORT

GENERAL INFORMATION			
Prisoner Number 314685	Prisoner Name Dallas	Facility Code URF	Violation Date 06/10/17
MISCONDUCT VIOLATION			
Hearing Class Class II <input checked="" type="checkbox"/> Class III <input type="checkbox"/>	Misconduct Charges Interference with the admistration of rules		
Misconduct Charge if Changed by Hearing Officer		Plea <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty	
WAIVER OF HEARING			
I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.		Prisoner's Signature 	Date 6/14/2017
HEARING REPORT (Do Not Complete If Hearing Waived)			
Evidence and/or prisoner statement in addition to misconduct report: Prisoner pleads guilty.			
Reasons for findings: Prisoner has been afforded all rights of due process. The description of the violation meets the criteria of the charge. I find the officers statement to be credible and in doing so find the prisoner guilty of the charge.			
FINDINGS			
Charge 1	<input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty	CMIS Code	<u>423</u>
Charge 2	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty	CMIS Code	_____
Charge 3	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty	CMIS Code	_____
Charge 4	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty	CMIS Code	_____
SANCTIONS (Hearing Investigator enters begin and end dates)			
_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only) <input type="checkbox"/> \$ _____ Restitution (Class II only)
<u>10</u> Days Loss of Privileges	Begins: <u>8/26/17</u>	Ends: <u>9/5/17</u>	
_____ Hours Extra Duty	Begins: _____	Ends: _____	
Property Disposition if Applicable: _____			
Misconduct Hearing Report given to Hearing Investigator for Delivery to Prisoner this date: _____			
Hearing Officer's Name (Print) Lt. J. Burke	Hearing Officer's Signature 		Hearing Date 6/14/2017
Hearing Investigator's Name (Print) <u>H. Durort</u>	Hearing Investigator's Signature 		Date <u>6/19/17</u>

MICHIGAN DEPARTMENT OF CORRECTIONS
MISCONDUCT REPORT

CSJ-228
 10/10 4835-3228

Prisoner Number:	Prisoner Name:	Facility Code:	Lock: <u>141</u>	Violation Date: <u>10/10</u>
Time and Place of Violation:		Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A		
Misconduct Class: <input type="checkbox"/> I <input checked="" type="checkbox"/> II <input type="checkbox"/> III		Charge(s): _____		
Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses): 				
Reporting Staff Member's Name (Print)		Reporting Staff Member's Signature		Date and Time Written
REVIEW				
Location/Verification/Condition of Evidence:				
Elevated to Class I at review: <input type="checkbox"/> No <input type="checkbox"/> Yes		If "yes", explain reason:		
COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT				
Status Pending Hearing: <input type="checkbox"/> Bond		<input type="checkbox"/> Segregation		<input type="checkbox"/> Confinement to Cell/Room
Reason if Non-Bond: <input type="checkbox"/> Non-Bond List		<input type="checkbox"/> Other		
Date and Time Given this Status:		Who Notified in Housing Unit of Status:		
Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes		Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes		
Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, list:		
Additional Comments:		Prisoner Waives 24 Hour Notice of Hearing? <input type="checkbox"/> No <input type="checkbox"/> Yes		
Reviewing Officer's Name (Print)		Reviewing Officer's Signature		Review Date and Time
I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input checked="" type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.		Prisoner's Signature		Date
WAIVER OF CLASS II OR III HEARING				
I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.		Prisoner's Signature		Date
SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)				
_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)	
_____ Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)	
_____ Hours Extra Duty	Begins: _____	Ends: _____		
Property Disposition If Applicable: _____				
Employee Accepting Plea and Imposing Sanction (Print)		Employee's Signature		Date
Hearing Investigator's Name (Print)		Hearing Investigator's Signature		Date

CLASS II AND III MISCONDUCT HEARING REPORT

GENERAL INFORMATION			
Prisoner Number 314685	Prisoner Name Dallas	Facility Code URF	Violation Date 06/10/17

MISCONDUCT VIOLATION	
Hearing Class II <input checked="" type="checkbox"/> Class III <input type="checkbox"/>	Misconduct Charges Insolence

Misconduct Charge if Changed by Hearing Officer	Plea <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
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WAIVER OF HEARING		
I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.	Prisoner's Signature <i>Lawrence Dallas</i>	Date 6/14/2017

HEARING REPORT (Do Not Complete If Hearing Waived)

Evidence and/or prisoner statement in addition to misconduct report: Prisoner pleads guilty.

Reasons for findings: Prisoner has been afforded all rights of due process. The description of the violation meets the criteria of the charge. I find the officers statement to be credible and in doing so find the prisoner guilty of the charge.

FINDINGS

Charge 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code 426
Charge 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code _____
Charge 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code _____
Charge 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code _____

SANCTIONS (Hearing Investigator enters begin and end dates)

_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only) <input type="checkbox"/> \$ _____ Restitution (Class II only)
15 Days Loss of Privileges	Begins: 8/11/17	Ends: 8/26/17	
_____ Hours Extra Duty	Begins: _____	Ends: _____	

Property Disposition if Applicable:
 Misconduct Hearing Report given to Hearing Investigator for Delivery to Prisoner this date: _____

Hearing Officer's Name (Print) Lt. J. Burke	Hearing Officer's Signature <i>[Signature]</i>	Hearing Date 6/14/2017
Hearing Investigator's Name (Print) <i>M. Durant</i>	Hearing Investigator's Signature <i>[Signature]</i>	Date 6/19/17

CLASS II AND III MISCONDUCT HEARING REPORT

GENERAL INFORMATION			
Prisoner Number 314685	Prisoner Name Dallas	Facility Code URF	Violation Date 06/10/17

MISCONDUCT VIOLATION

Hearing Class II <input checked="" type="checkbox"/>	Misconduct Charges Out of place	Plea <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
Hearing Class III <input type="checkbox"/>	Misconduct Charge if Changed by Hearing Officer	

WAIVER OF HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.	Prisoner's Signature <i>X [Signature]</i>	Date 6/14/2017
--	--	--------------------------

HEARING REPORT (Do Not Complete If Hearing Waived)

Evidence and/or prisoner statement in addition to misconduct report: Prisoner pleads guilty.

Reasons for findings: Prisoner has been afforded all rights of due process. The description of the violation meets the criteria of the charge. I find the officers statement to be credible and in doing so find the prisoner guilty of the charge.

FINDINGS

Charge 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code <u>436</u>
Charge 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code _____
Charge 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code _____
Charge 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	CMIS Code _____

SANCTIONS (Hearing Investigator enters begin and end dates)

_____ Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only) <input type="checkbox"/> \$ _____ Restitution (Class II only)
<u>20</u> Days Loss of Privileges	Begins: <u>9/5/17</u>	Ends: <u>9/25/17</u>	
_____ Hours Extra Duty	Begins: _____	Ends: _____	

Property Disposition if Applicable: _____
 Misconduct Hearing Report given to Hearing Investigator for Delivery to Prisoner this date: _____

Hearing Officer's Name (Print) Lt. J. Burke	Hearing Officer's Signature <i>[Signature]</i>	Hearing Date 6/14/2017
Hearing Investigator's Name (Print) <i>41. Durant</i>	Hearing Investigator's Signature <i>[Signature]</i>	Date 6/19/17

MISCONDUCT REPORT

Prisoner Number: 314685	Prisoner Name: Dallas	Facility Code: URF	Lock: R-401	Violation Date: 6/28/2017															
Time and Place of Violation: 1600 Round Unit D wing		Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A																	
Misconduct Class: <input type="checkbox"/> I <input checked="" type="checkbox"/> II <input type="checkbox"/> III Charge(s): Out of place																			
Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses): While conducting formal count inmate Dallas #314685 was off his bunk sitting at his table. Inmate Dallas did not have staff authorization to be out of his bed at count time.																			
Inmate Dallas was ided by door card and unit count board.																			
Reporting Staff Member's Name (Print) C/O Robbins		Reporting Staff Member's Signature		Date and Time Written 6/28/2017 2100															
REVIEW																			
Location/Verification/Condition of Evidence:																			
Elevated to Class I at review: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		If "yes", explain reason:																	
COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT																			
Status Pending Hearing: <input type="checkbox"/> Bond <input type="checkbox"/> Segregation <input type="checkbox"/> Confinement to Cell/Room <input type="checkbox"/> Other																			
Reason if Non-Bond: <input type="checkbox"/> Non-Bond List <input type="checkbox"/> Bond Revoked (must give reason)																			
Date and Time Given this Status:		Who Notified in Housing Unit of Status:																	
Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes		Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes																	
Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, list:																	
Additional Comments:		Prisoner Waives 24 Hour Notice of Hearing? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Hearing Date: 6/30/2017																	
Reviewing Officer's Name (Print) Sgt Pawley		Reviewing Officer's Signature <i>[Signature]</i>		Review Date and Time 6/29/17 1135															
I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.		Prisoner's Signature <i>[Signature]</i>		Date															
WAIVER OF CLASS II OR III HEARING																			
I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.		Prisoner's Signature <i>[Signature]</i>		Date															
SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)																			
<table style="width:100%; border: none;"> <tr> <td style="width:20%;">Days Toplock</td> <td style="width:20%;">Begins: _____</td> <td style="width:20%;">Ends: _____</td> <td style="width:20%;"><input type="checkbox"/> Counseling/Reprimand (Class III only)</td> <td style="width:20%;"></td> </tr> <tr> <td>Days Loss of Privileges</td> <td>Begins: _____</td> <td>Ends: _____</td> <td><input type="checkbox"/> \$ _____ Restitution (Class II only)</td> <td></td> </tr> <tr> <td>Hours Extra Duty</td> <td>Begins: _____</td> <td>Ends: _____</td> <td></td> <td></td> </tr> </table>					Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)		Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)		Hours Extra Duty	Begins: _____	Ends: _____		
Days Toplock	Begins: _____	Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)																
Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)																
Hours Extra Duty	Begins: _____	Ends: _____																	
Property Disposition If Applicable: _____																			
Employee Accepting Plea and Imposing Sanction (Print) Sgt Pawley		Employee's Signature <i>[Signature]</i>		Date 6/20/17															
Hearing Investigator's Name (Print)		Hearing Investigator's Signature		Date															

MICHIGAN DEPARTMENT OF CORRECTIONS
CLASS I MISCONDUCT HEARING REPORT

CSJ-240B
 Rev. 10/10

Prisoner Number 314685	Prisoner Name Dallas	Facility Code ARF	Lock N-226	Violation Date 12/09/2016
Charge(s) ASSAULT AND BATTERY TIME 1907				
If Charge Changed by Hearing Officer			Plea <input type="checkbox"/> Guilty <input checked="" type="checkbox"/> Not Guilty	
Misconduct Report Read to and Discussed with Prisoner Hearing Investigation Read to and Discussed with Prisoner			<input checked="" type="checkbox"/> (check if applies) <input checked="" type="checkbox"/> (check if applies)	
			<input type="checkbox"/> No Hearing Investigation Requested <input type="checkbox"/> (check if applies)	
EVIDENCE/STATEMENTS IN ADDITION TO MISCONDUCT REPORT				
This hearing commenced by this hearing officer viewing video footage. It is marked confidential due to facility security and to protect camera capability)				
Prisoner is present. The hearing is conducted via web cam. Documents reviewed: prisoner's statement (1 pg); memo from HI McCollum regarding prisoner's transfer to WCC (1 pg); memo from officer Connors (1 pg); memo from HI McCollum regarding video footage (1 pg) (memo is marked confidential due to facility security and to protect camera capability); screening and assessment forms (2 pgs) (marked confidential due to mental health information); relist hearing report (1 pg); video still (1 pg) (marked confidential for facility security and to protect camera capability); and lock history (1 pg).				
Prisoner's statements: He admits he was at WCC (inpatient facility) from 12/12/16 to 1/3/17. He is asked why they put him on the ground. He states he had been getting a bunch of frivolous tickets. He told them to take him to the hole. They were escorting me. The handcuffs were too tight. SEE PAGE TWO				
REASONS FOR FINDINGS				
MENTAL HEALTH: I find the assessment is detailed that any mental health issues of prisoner are not of the nature nor would impair his understanding or complying with directives of staff. He discusses the incident in a lucid manner. While I recognize he then went to an inpatient facility, I am unconvinced he is not responsible for his behavior in this incident. DUE PROCESS: The days prisoner was at the inpatient facility and the days of travel are good cause for delay. This incident occurred on 12/9/2016. Prisoner went to the inpatient facility on 12/12/2016. He arrived at this facility on 1/3/2017. This hearing is timely. Next, prisoner requested no witnesses. I find the three statements in the record along with the video footage is sufficient. I find prisoner did not reasonably cooperate with the investigator in requesting evidence. I find prisoner had an opportunity to read his statement at hearing and declined and had ample opportunity to make statements at the two hearings. He again submitted no evidence to the investigator nor requested any evidence. There is no due process violation by the absence of any evidence. ASSAULT AND BATTERY: Assault and battery includes physical resistance or physical interference with an employee. (See policy 03.03.105). SEE PAGE TWO				
PROPERTY DISPOSITION (for contraband see PD 04.07.112)				
FINDINGS				
Charge No. 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code 008
Charge No. 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code
Charge No. 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code
Charge No. 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code
DISPOSITION (select one or more) (Toplock & LOP Sanctions End at 6:00 am)				
Days of Detention		Begins		Days Credit
Days Top Lock		Ends		Hours Extra Duty
25	Days Loss of Privileges	02/09/2017	03/06/2017	\$ Restitution
Misconduct Hearing Report personally handed to Prisoner by Hearing Officer on this date: _____ (Check if Applies) <input type="checkbox"/>			Hearing Report given to Staff Member by Hearing Officer for Delivery to Prisoner this date: 1/11/2017 (Check if Applies) <input checked="" type="checkbox"/>	
Date of Hearing 01/10/2017			Name of Staff Member HI Edmond	
Hearing Officer's Name Jacobsen 050		Hearing Officer's Signature /s/ Jacobsen		Date 01/11/2017

DISTRIBUTION Record Office Central Office File Prisoner Counselor File Hearing Investigator

RECEIVED - MDOC
 RECEIVED - MDOC
 JAN 27 2017
 MAR 06 2017
 REHEARINGS

CSJ-418
 REV. 10/10
 4835-3418

MICHIGAN DEPARTMENT OF CORRECTIONS
REQUEST FOR REHEARING

- INSTRUCTIONS REHEARINGS
- This form is to be used only to request a re-hearing by the Director of a hearing officer on one of the following:
 - Class 1 Misconduct.
 - Notice of Intent to Classify to Administrative Segregation.
 - Visitor restriction.
 - High or very high risk classification.
 - Excess legal property hearing.
 - Special Education Individual Education Planning Committee (IEPC) hearing.
 - You MUST attach a copy of the hearing report to this request and, if appealing a misconduct hearing, a copy of the Class 1 Misconduct Report. If they are not attached, this form may be returned to you without a decision. You do not have to include a copy of the hearing investigation packet.
 - Submit the completed form to: Hearings Administrator, Department of Corrections, Office of Legal Affairs, P.O. Box 30003, Lansing, Michigan 48909. This form must be received by the Hearings Administrator within 30 calendar days of the date of the decision by the hearing officer.

022

PRISONER'S NUMBER 314685	PRISONER'S NAME Lawrence Dallas	INSTITUTION ARF
DATE OF MISCONDUCT 12/9/2016	TYPE OF HEARING (IF MISCONDUCT, LIST CHARGES ALSO) CLASS 1 MISCONDUCT	
DATE OF HEARING 1/10/2017	ASSAULT + 3 BATTERY STAFF VIC	
Briefly explain why you believe a re-hearing should be ordered: 1/ There was NO ^(Resistance) Resistance or physical interference. 2/ There was no chance for evidence from me and I never and never seen HI, to see Evendece. 3/ There is some due process violations now that I look at the hearing report and the hearing hand book. 4/ I did have reason to move and it did make a difference; Till they threw me on my face. 5/ This is not normal behavior for me in the past. Need This Documentation to support record. memorandum of law in support / Brief of Documented DP ACI - ADRIAN Correctional Institution 05.03.116 A See Attached.		

SIGNATURE OF PERSON REQUESTING REHEARING Lawrence Dallas	DATE 1/18/2017
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DECISION

Disapproved **See Attached**

Approved - Rehearing Ordered

Returned without action - Not filed within 30 calendar days

HEARINGS ADMINISTRATOR Richard Russell / 4	DATE MAILED APR 21 2017
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Prisoner Number: 314685	Prisoner Name: Dallas	Facility Code: URF	Lock: R-401	Violation Date: 7-14-17
Time and Place of Violation: 1955 Round Unit TV room		Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A		

Misconduct Class: I II III Charge(s): Interference with the administrative rules

Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses):
I directly observed prisoner Wilson #587957 plug prisoner Dallas's #314685 jpay tablet into the Jpay machine in the TV room. Prisoner Dallas is currently on sanctions from 7/8/17 to 8/7/17. This act intended to impede and disrupt the disciplinary process for staff.

Reporting Staff Member's Name (Print) J Meehan	Reporting Staff Member's Signature <i>J Meehan</i>	Date and Time Written 7-14-17 2100
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REVIEW

Location/Verification/Condition of Evidence:

Elevated to Class I at review: No Yes If "yes", explain reason:

COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT

Status Pending Hearing: <input type="checkbox"/> Bond <input type="checkbox"/> Segregation <input type="checkbox"/> Confinement to Cell/Room <input type="checkbox"/> Other
Reason if Non-Bond: <input type="checkbox"/> Non-Bond List <input type="checkbox"/> Bond Revoked (must give reason)
Date and Time Given this Status: _____ Who Notified in Housing Unit of Status: _____
Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list: _____
Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list: _____

Additional Comments: Prisoner Waives 24 Hour Notice of Hearing? No Yes
Hearing Date: 7-16-17

Reviewing Officer's Name (Print) <i>Sgt Stuenkel</i>	Reviewing Officer's Signature <i>Sgt Stuenkel</i>	Review Date and Time 7-15-17 @ 1505
I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.	Prisoner's Signature <i>X Refused</i>	Date <i>X</i>

WAIVER OF CLASS II OR III HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.

Prisoner's Signature _____ Date _____

SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)

_____ Days Toplock Begins: _____ Ends: _____	<input type="checkbox"/> Counseling/Reprimand (Class III only)
_____ Days Loss of Privileges Begins: _____ Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)
_____ Hours Extra Duty Begins: _____ Ends: _____	

Property Disposition. If Applicable: _____

Employee Accepting Plea and Imposing Sanction (Print)	Employee's Signature	Date
Hearing Investigator's Name (Print) <i>D. Meehan</i>	Hearing Investigator's Signature <i>D. Meehan</i>	Date <i>7/24/17</i>

MICHIGAN DEPARTMENT OF CORRECTIONS

CSJ-240D 12/90
4835-4243**Class I Misconduct** HEARING REPORT – Continuation Page No. 2

(Type of Hearing)

Prisoner Number	Prisoner Name	Institution	Violation/Notice Date
314685	Dallas	ARF	12/9/2016

EVIDENCE CONT:

He asked them to move the cuffs or loosen the cuffs. He is told the video shows him being escorted and it looks like at one point he raises his shoulder He said he may have twitched. He is asked about the third person and he states it was a sergeant. He names Sgt. Davis. He said he had two officers one on each arm and Sgt. Davis.

He is informed the hearing is adjourned to obtain another statement. This hearing officer also wants to re-review the video footage. Adjourned on 1/9/17.

The investigator was called to expedite obtaining information and asked to obtain a statement from the sergeant who was present on the scene.

HEARING IS RECONVENED on 1/10/2017. Prisoner is present. This hearing is conducted via web cam.

Document reviewed: statement of Sgt. Davidson (1 pg).

Prisoner's statements: He is asked if staff said to stop resisting and he states "no" appearing to refer to the sergeant. He then states he had issues with the sergeant. He wrote him another misconduct. He cannot remember the charge. He is asked for what and he states he was looking at him and he questioned the sergeant why he was looking at him like that. He then admits the officers told him to stop resisting. He is asked why they would make these statements if he was not doing the same and he states he does not know. He states maybe it was a reason to throw him on the ground. It is discussed that his shoulder can be seen moving. He is asked why this is and he states it probably moved when he was moving the cuffs. He cites to a written statement. He is told he can read it. He is asked what else he has to say about this particular incident. He then indicates he does not need to read it. He is asked if he has anything to add and prisoner states he has nothing really to add. Prisoner is informed of the decision, sanctions, and dates.

REASONS FOR FINDINGS CONT:

Prisoner admits staff told him to stop resisting. He admits it at hearing and includes it in his written statement. Logically, if staff are telling him to stop resisting, he is engaged in some movement other than just holding his arms down and walking along. He admits staff put him on the ground. Again, it is logical to conclude prisoner is then engaged in some behavior which is noncompliant with the staff's directives. Prisoner states the cuffs were too tight. He admits at one point he may have twitched. When asked why his shoulder appeared to move, he said he probably moved when he was moving the cuffs. I am unclear how moving is going to help his situation regarding his cuffs. Three staff are consistent prisoner pulled away during the escort. While there certainly was not an extreme struggle with arms flaying, etc., this is not required for this charge. If prisoner pulled while the officers are escorting, he is physically interfering with the escort. He again should just be walking along with his arms down. I am unpersuaded he could not have done the same. Whether the sergeant wrote him a misconduct on another occasion regarding prisoner looking at him, etc. is not convincing to support this charge is falsified. I recognize he states staff wrote him frivolous misconducts. Each misconduct is the subject of its own hearing. Just because he was written misconducts on other dates is not dispositive. He cites to no issues with the two officers involved in the escort. I find prisoner did physically interfere and resist staff. There are further findings in a supplemental confidential hearing report which is marked confidential for facility security and camera capability. Charge is upheld.

HEARING OFFICER'S NAME & CMIS CODE (Typed) Jacobsen 050	Copy of Hearing Report personally handed to Prisoner by Hearing Officer this date (check if applies) <input type="checkbox"/>
HEARING OFFICER'S SIGNATURE /s/Jacobsen	Copy of Hearing Report Given to Staff Member by Hearing Officer for Delivery to Prisoner this date 1/10/2017 (check if applies) <input checked="" type="checkbox"/>
	Date of Hearing 1/11/2017
	(Name & Clock No. of Staff Member) HI Edmond

DISTRIBUTION: White – Institution; Green – Central Office; Canary – Prisoner; Pink – Visitor/Counselor; Goldenrod – Hearing Investigator

MDOC Nbr: 314685 Name: Dallas, Lawrence Christ Jurisdiction Dates: 5/26/2016 P-Lock: 03.224L:Bot:A
 DOB: 09/22/1974 Location: OAKS CORRECTIONAL FACILITY Officer: GENERAL TRANSFER Active: Yes T-Lock: :

Misconduct Incident Incident Witnesses Incident Notes

CMIS Record #	Status	Incident Date	Report Date
30	Closed	06/10/2017	06/10/2017
28	Closed	05/30/2017	05/30/2017
29	Closed	05/29/2017	05/29/2017
27	Closed	05/01/2017	05/01/2017
25	Closed	03/04/2017	03/04/2017
26	Closed	03/04/2017	03/04/2017
22	Closed	12/09/2016	12/09/2016
24	Closed	12/08/2016	12/08/2016
21	Closed	12/03/2016	12/03/2016
20	Closed	11/30/2016	11/30/2016
18	Closed	11/24/2016	11/24/2016
19	Closed	11/18/2016	11/18/2016
17	Closed	11/18/2016	11/18/2016
16	Closed	11/16/2016	11/16/2016
14	Closed	10/07/2016	10/07/2016
13	Closed	09/30/2016	09/30/2016
12	Closed	08/31/2016	08/31/2016
11	Closed	08/31/2016	08/31/2016

Charge: 014: Fighting Last Updated by LOAD on 09/07/2017 at 11:45:00 from LOAD19

[Empty area for incident details and notes]

MDOC Nbr.: 314685 Name: Dallas, Lawrence Christ Jurisdiction Dates: 5/26/2016 P-Lock: 03:224L:BotA
 DOB: 09/22/1974 Location: OAKS CORRECTIONAL FACILITY Officer: GENERAL TRANSFER Active: Yes T-Lock: ::

Misconduct Incident

Incident Witnesses

Incident Notes

CMIS Record #	Status	Incident Date	Report Date
36	Closed	08/25/2017	08/25/2017
35	Closed	08/04/2017	08/04/2017
34	Closed	07/14/2017	07/14/2017
33	Closed	06/28/2017	06/28/2017
32	Closed	06/10/2017	06/10/2017
31	Closed	06/10/2017	06/10/2017
30	Closed	06/10/2017	06/10/2017
28	Closed	05/30/2017	05/30/2017
29	Closed	05/29/2017	05/29/2017
27	Closed	05/01/2017	05/01/2017
25	Closed	03/04/2017	03/04/2017
26	Closed	03/04/2017	03/04/2017
22	Closed	12/09/2016	12/09/2016
24	Closed	12/08/2016	12/08/2016
21	Closed	12/03/2016	12/03/2016
20	Closed	11/30/2016	11/30/2016
18	Closed	11/24/2016	11/24/2016
19	Closed	11/18/2016	11/18/2016

Charge: 014: Fighting

Last Updated by LOAD on 09/07/2017 at 11:45:00 from LOAD19

Prisoner Number 314685	Prisoner Name Dallas	Facility Code ARF	Lock N-226	Violation Date 12/09/2016
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Charge(s)
ASSAULT AND BATTERY TIME 1907

If Charge Changed by Hearing Officer	Plea <input type="checkbox"/> Guilty <input checked="" type="checkbox"/> Not Guilty
--------------------------------------	--

Misconduct Report Read to and Discussed with Prisoner <input checked="" type="checkbox"/> (check if applies) Hearing Investigation Read to and Discussed with Prisoner <input checked="" type="checkbox"/> (check if applies)	No Hearing Investigation Requested <input type="checkbox"/> (check if applies)
--	---

EVIDENCE/STATEMENTS IN ADDITION TO MISCONDUCT REPORT

This hearing commenced by this hearing officer viewing video footage. It is marked confidential due to facility security and to protect camera capability)

Prisoner is present. The hearing is conducted via web cam.

Documents reviewed: prisoner's statement (1 pg); memo from HI McCollum regarding prisoner's transfer to WCC (1 pg); memo from officer Connors (1 pg); memo from HI McCollum regarding video footage (1 pg) (memo is marked confidential due to facility security and to protect camera capability); screening and assessment forms (2 pgs) (marked confidential due to mental health information); relist hearing report (1 pg); video still (1 pg) (marked confidential for facility security and to protect camera capability); and lock history (1 pg).

Prisoner's statements: He admits he was at WCC (inpatient facility) from 12/12/16 to 1/3/17.

He is asked why they put him on the ground. He states he had been getting a bunch of frivolous tickets. He told them to take him to the hole. They were escorting me. The handcuffs were too tight. SEE PAGE TWO

REASONS FOR FINDINGS

MENTAL HEALTH: I find the assessment is detailed that any mental health issues of prisoner are not of the nature nor would impair his understanding or complying with directives of staff. He discusses the incident in a lucid manner. While I recognize he then went to an inpatient facility, I am unconvinced he is not responsible for his behavior in this incident.

DUE PROCESS: The days prisoner was at the inpatient facility and the days of travel are good cause for delay. This incident occurred on 12/9/2016. Prisoner went to the inpatient facility on 12/12/2016. He arrived at this facility on 1/3/2017. This hearing is timely. Next, prisoner requested no witnesses. I find the three statements in the record along with the video footage is sufficient. I find prisoner did not reasonably cooperate with the investigator in requesting evidence. I find prisoner had an opportunity to read his statement at hearing and declined and had ample opportunity to make statements at the two hearings. He again submitted no evidence to the investigator nor requested any evidence. There is no due process violation by the absence of any evidence.

ASSAULT AND BATTERY: Assault and battery includes physical resistance or physical interference with an employee. (See policy 03.03.105). SEE PAGE TWO

PROPERTY DISPOSITION (for contraband see PD 04.07.112)

FINDINGS

Charge No. 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code 008
Charge No. 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code
Charge No. 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code
Charge No. 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code

DISPOSITION (select one or more) (Toplock & LOP Sanctions End at 6:00 am)

	Begins	Ends	
Days of Detention	_____	_____	Days Credit
Days Top Lock	_____	_____	Hours Extra Duty
25 Days Loss of Privileges	02/09/2017	03/06/2017	\$ _____ Restitution

Misconduct Hearing Report personally handed to Prisoner by Hearing Officer on this date: _____ (Check if Applies) <input type="checkbox"/>	Hearing Report given to Staff Member by Hearing Officer for Delivery to Prisoner this date: 1/11/2017 (Check if Applies) <input checked="" type="checkbox"/>
--	---

Date of Hearing 01/10/2017	Name of Staff Member HI Edmond
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Hearing Officer's Name Jacobsen 050	Hearing Officer's Signature /s/ Jacobsen	Date 01/11/2017
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MISCONDUCT REPORT

Prisoner Number: 314685	Prisoner Name: DALLAS	Facility Code: URF	Lock: M 143	Violation Date: 09/30/2016
Time and Place of Violation: 1211 hrs. Marquette Unit Lobby		Contraband Removal Record Provided to Prisoner? <input type="checkbox"/> Yes Date _____ <input checked="" type="checkbox"/> N/A		
Misconduct Class: <input type="checkbox"/> I <input checked="" type="checkbox"/> II <input type="checkbox"/> III		Charge(s): Out of Place		
Describe Violation (If contraband involved, describe in detail; identify any other employee witnesses): At the above time and place this officer directly observed prisoner DALLAS 314685 enter the Marquette Unit lobby returning from the chow hall, when this officer asked DALLAS why he went to the chow hall he replied "I was going to eat." DALLAS locks in M-143 and A-wing was not released for chow until 1226 hrs. DALLAS had no callout or staff authorization to leave the housing unit early.				
ID'd by MDOC ID card.				
Reporting Staff Member's Name (Print) C/O Benoit		Reporting Staff Member's Signature C/O [Signature]		Date and Time Written 09/30/2016 @ 1335 hrs.

REVIEW

Location/Verification/Condition of Evidence:

Elevated to Class I at review: No Yes If "yes", explain reason:

COMPLETE THIS SECTION ONLY FOR REVIEW OF CLASS I MISCONDUCT

Status Pending Hearing: <input type="checkbox"/> Bond <input type="checkbox"/> Segregation <input type="checkbox"/> Confinement to Cell/Room <input type="checkbox"/> Other	Reason if Non-Bond: <input type="checkbox"/> Non-Bond List <input type="checkbox"/> Bond Revoked (must give reason)	
Date and Time Given this Status:	Who Notified in Housing Unit of Status:	
Hearing Investigator Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes	Witnesses Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list:	
Relevant Documents Requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list:		
Additional Comments:	Prisoner Waives 24 Hour Notice of Hearing? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Hearing Date: 10/20	
Reviewing Officer's Name (Print) SG P Thompson	Reviewing Officer's Signature SG P Thompson	Review Date and Time 10/16/2016
I have received a copy of this report. My signature does not necessarily mean that I agree with the report. <input type="checkbox"/> Prisoner refused to sign. Copy given to prisoner.	Prisoner's Signature [Signature]	Date

WAIVER OF CLASS II OR III HEARING

I understand I have a right to a hearing. I waive my right to a hearing and plead guilty to all charges. I also waive my right to appeal and accept the sanctions imposed.

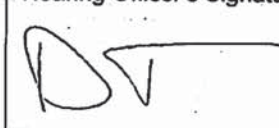
Prisoner's Signature: [Signature] Date: _____

SANCTIONS IMPOSED (Hearing Investigator enters begin and end dates for Class II misconducts)

<u>1</u> Days Toplock	Begins: 10-1-16	Ends: 10-7-16	<input type="checkbox"/> Counseling/Reprimand (Class III only)
Days Loss of Privileges	Begins: _____	Ends: _____	<input type="checkbox"/> \$ _____ Restitution (Class II only)
Hours Extra Duty	Begins: _____	Ends: _____	
Property Disposition If Applicable: _____			
Employee Accepting Plea and Imposing Sanction (Print) SG P Thompson	Employee's Signature [Signature]		Date 10/16
Hearing Investigator's Name (Print) AZ [Signature]	Hearing Investigator's Signature AZ [Signature]		Date 10/16

CLASS I MISCONDUCT HEARING REPORT

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Prisoner 314685	Prisoner Name Dallas	Facility Code URF	Lock M-211	Violation Date 10/07/2016
Charge(s) Threatening Behavior				
If Charge Changed by Hearing Officer			Plea <input type="checkbox"/> Guilty <input checked="" type="checkbox"/> Not Guilty	
Misconduct Report Read to and Discussed with Prisoner <input checked="" type="checkbox"/> (check if applies)		No Hearing Investigation Requested <input type="checkbox"/> (check if applies)		
Hearing Investigation Read to and Discussed with Prisoner <input checked="" type="checkbox"/> (check if applies)				
EVIDENCE/STATEMENTS IN ADDITION TO MISCONDUCT REPORT				
Prisoner is present for the hearing and the misconduct report is reviewed with a statement from prisoner Dallas 1 page, a statement regarding the video that is marked confidential 1 page, a sanction assessment 1 page and a screening form 1 page. Prisoner is informed that there is no video. Prisoner states he does not know how to plea. He states he made no threat to the officer. He states they rusehd him out of the food service. The officer told him he could not take out the sandwich. HE states an officer asked him how was that sandwich? He states that the Sgt told him to go to the control center. He states that the Sgt was looking at me harshly. He states he asked for the camera as his viens were not sticking out No further evidence is requested or is necessary. Prisoner is informed of the sanction and the decision and told that a copy of the hearing report would db e delivered to him.				
REASONS FOR FINDINGS				
The statement regarding the video is marked confidential and I find that there is no video of the incident and that which is not created can not be produced. Pursuant to Pd 03.03105 Threatening Behavior..... words or actions that express an intent to injure..... Prisoner Dallas stated to the reporting officer, You're making a big deal out of nothing and if you don't stop looking at me I'm going make it a big deal for you. I find that prisoner Dallas did express an intent to injure the reporting officer by his above statement and actions. Prisoner Dallas is not believed in his statement that he made no threat to the reporting officer because Sgt Davidson heard and observed prisoner Dallas make the above threat in the control center, his teeth were clenched and veins were bulging from his neck and did ID him by his ID card. I find no credible evidence that the reporting officer has lied or fabricated his statements. The reporting officer is clear and detailed iin his statements and found credible. The charge is upheld.				
PROPERTY DISPOSITION (for contraband see PD 04.07.112)				
FINDINGS				
Charge No. 1	<input checked="" type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code 012
Charge No. 2	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
Charge No. 3	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
Charge No. 4	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Dismissed	Reporting Code _____
DISPOSITION (select one or more) (Toplock & LOP Sanctions End at 6:00 am)				
<u>10</u> Days of Detention	Begins 10/12/2016	Ends 10/22/2016	_____ Days Credit	
<u>3</u> Days Top Lock	_____	_____	_____ Hours Extra Duty	
<u>0</u> Days Loss of Privileges	_____	_____	\$ _____ Restitution	
Misconduct Hearing Report personally handed to Prisoner by Hearing Officer on this date: _____ (Check if Applies) <input type="checkbox"/>		Hearing Report given to Staff Member by Hearing Officer for Delivery to Prisoner this date: 10/12/2016 (Check if Applies) <input checked="" type="checkbox"/>		
Date of Hearing 10/12/2016		Name of Staff Member McCollum		
Hearing Officer's Name Theut 048		Hearing Officer's Signature 		Date 10-12-16