From:	ASCC New Claims
To:	Tawnie Rowell (DOC)
Cc:	Trent Rigdon (DOC); Miles S. Morgan; Yolanda Charles (DOC); Kathryn Irby; Mika Tucker
Subject:	CLAIM: John Magness v. ADC, Claim No. 251400
Date:	Monday, April 14, 2025 2:14:00 PM
Attachments:	John Magness v. ADC agency ltr 251400.pdf John Magness Claim form and supporting docs - 251400.pdf

Dear Ms. Rowell,

Please confirm receipt of the attached claim file. The agency may file its response to this claim electronically by sending it to asccpleadings@arkansas.gov, with a copy to the claimant pursuant to the Arkansas Rules of Civil Procedure.

Please contact Mika Tucker with any questions.

Thank you,
Caitlin

Caitlin McDaniel
Administrative Specialist II
Arkansas State Claims Commission
101 East Capitol Avenue, Suite 410
Little Rock, Arkansas 72201
(501) 682-1619

ARKANSAS STATE CLAIMS COMMISSION

(501)682-1619
FAX (501)682-2823

KATHRYN IRBY
DIRECTOR

101 EAST CAPITOL AVENUE
SUITE 410
LITTLE ROCK, AR 72201-3823

April 14, 2025

Ms. Tawnie Rowell (*via email*)
Mr. Miles Morgan
Mr. Trent Rigdon
Arkansas Division of Correction
1302 Pike Avenue, Suite C
North Little Rock, Arkansas 72114

RE: ***John Magness v. Arkansas Division of Correction***
Claim No. 251400

Dear Ms. Rowell, Mr. Morgan, and Mr. Rigdon,

Enclosed please find a copy of the above-styled claim filed against the Arkansas Division of Correction. Pursuant to the Arkansas Rules of Civil Procedure, as well as Claims Commission Rule 2.2, you have **thirty days from the date of service** in which to file a responsive pleading.

Your responsive pleading should include your agency number, fund code, appropriation code, cost center, and activity/section/unit/element that this claim should be charged against, if liability is admitted, or if the Claims Commission approves this claim for payment. This information is necessary even if your agency denies liability.

Sincerely,

Mika Tucker

ES: cmcdaniel

cc: John Magness (ADC [redacted]), *Claimant* (w/ encl.)

Note to Claimant or Claimant's counsel: The Claims Commission copied you on this correspondence to provide you with confirmation that your claim has been processed and served upon the respondent agency.

Arkansas
State Claims Commission
MAR 19 2025
RECEIVED

3-14-25

Most Respected Mika Tucker,

When filing this completed claim before you; would you also file this MOTION requesting permission to submit additional EXHIBITS to this claim?

If this is in fact the proper procedure; would you place the proper/relative claim No. upon it and forward a file marked copy of both the claim and the motion for my personal records please and thank you so very much?

Most Respectfully Submitted,

John W. Magness

JOHN W. MAGNESS [redacted]

ARKANSAS CLAIMS COMMISSION

(501)682-1619
(501)682-2823 FAX

Questions? Send an email to
ascc.new.claims@arkansas.gov

101 EAST CAPITOL AVENUE, SUITE 410
LITTLE ROCK, ARKANSAS 72201-3823

Arkansas
State Claims Commission
MAR 19 2025
RECEIVED

CLAIM FORM

1. **Claimant Information.**

Mr. Magness John [redacted]
(title) (last name) (first name) (ADC Number)

(addre[redacted]
(city) (zip)

2. **Claimant's Legal Counsel.** An individual claimant may act as his or her own attorney (which is known as proceeding *pro se*). If a claimant is proceeding *pro se*, this section may be left blank.

(title) (last name) (first name) (email)

(address) (AR bar number)

(city) (state) (zip) (primary phone)

3. **State Agency Involved.** The Commission can only receive claims against agencies of the State of Arkansas. Please review the Commission's jurisdictional statutes, including Ark. Code Ann. § 19-10-204 and Ark. Code Ann. § 21-5-701, for more information. This information is required for any claim filed at the Commission. ARKANSAS DEPARTMENT OF CORRECTION DIVISION OF CORRECTION

4. **Date of Incident** PRIOR TO 1-19-25 AND AFTER (PERPETUALLY)

5. **Location of Incident** GRIMES UNIT

6. **Explanation of Incident.** Please provide an explanation of your claim, including why you believe the above-listed state agency is liable for your damages under Arkansas law. You may attach additional pages to this form. Please note that a claimant who is an inmate of the Division of Correction or the Division of Community Correction at the time the claim is filed is subject to the page limitations set forth on page 4 of this form (*see* Ark. Code Ann. § 19-10-208(f)).

I'm being, "Tormented" by the act(s), action(s) and/or inaction(s) of Dep. Dir., Ms. A. Culclager (Health and Correctional Programs); an A.D.C. employee that I assert, has repeatedly/consistantly failed to require and/or demand that these, "contracted" employees under her direct supervision uphold A.D.C. policy and procedure and/or Arkansas State Law concerning the Act 290 "Compassionate release" Program.

I actively submitted a grievance (#GR-25-00103) on 1-19-25; having Specificly outlined Dep. Dir., Ms. A. Culclager's allowance of, "Other persons and/or "offices" (whether classified as Medical Institutional Programming or not) to apply other, "Laws or parts of laws" (Such as Act 1805); that are in direct conflict with, and/or to otherwise interfere with the Specificly implemented guidelines of Act 290 at Section 4."

In the body of my grievance I used the figurative statement: "I'm being, "Forced to watch" persons that are deemed (Both) clinicly and legally eligible for Act 290, Suffer and/or die..."

I'm now literally and actively seeking legal interpretation and/or defination of Act 290 at Section 4, from the General Assembly where; I firmly believe that the A.D.C. agency is completely and totally liable before you; of failure(s) to have followed Act 290, as was adopted on February 13, 1995 and;

Upon the General Assembly's own true interpretation and/or defination of Act 290 at Section 4; that they impose and inforce upon the A.D.C. agency, Health and Correctional Programs; the immediate, "Compassionate" release of those persons who qualify for it and; without excuse or delay on behalf of the A.D.C. agency and/or their Arkansas State Health and Correctional Programs Personnel. (*These other, "offices" would include but not be limited to: Centralized Records, I.P.O./I.R.O., etc.).

7. **Amount of Damages, if known:** THE MAXIMUM AMOUNT TO BE ASSESSED AND SET BY THE GENERAL ASSEMBLY.

IMPORTANT!

A claim filed at the Commission is a lawsuit against a state agency. The Commission is the courthouse for these lawsuits. Please note that Commission staff can answer general questions about the claim process but cannot give legal advice. The Commission follows the Arkansas Rules of Civil Procedure and has its own rules of practice and procedure. Both sets of rules may be found in your law library.

STOP HERE!

This signature page must be completed in the presence of a Notary Public. Do not sign until you are directed to do so by the Notary Public. If there is more than one claimant involved in this claim, each claimant must complete a separate signature page.

If you are an ARKANSAS-LICENSED ATTORNEY submitting a claim on behalf of your client, there is a different signature page that must be used. Please call (501)682-1619 and ask for an attorney signature page.

Signature Page for Claim Filed by an Individual Claimant

The undersigned certifies that to the best of my knowledge, information, and belief, this claim is not being presented for any improper purpose; this claim is warranted by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law or for establishing new law; and the factual contentions have evidentiary support of, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery.

John W. Magness
Claimant Signature

ACKNOWLEDGEMENT

State of Arkansas
County of Sharp

On this the 12 day of March, 2025 before me, the undersigned notary, personally appeared JOHN W. MAGNESS known to me (or satisfactorily proven) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

Paul Rivera
Signature of Notary Public

My Commission Expires: 12-4-2034

[Seal of Office]
NOTARY PUBLIC ARKANSAS
PAUL RIVERA
No. 00004451
SHARP COUNTY
Commission Expires 12-4-2034

RECEIVED
JAN 27 2025
GRIEVANCE

UNIT LEVEL GRIEVANCE FORM (Attachment I)

Unit/Center [redacted]

Name JOHN W. MAGNESS

ADC# [redacted] **Brks #** 17 **Job Assignment** NOT A SLAVE

[redacted] CE USE ONLY
GRV [redacted] 25-00103
Date Received: 1-27-25
GRV. Code #: 913

1-19-25 (Date) STEP ONE: Informal Resolution

1-23-25 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)
If the issue was not resolved during Step One, state why: This is a MEDICAL issue that was NOT addressed by medical, in violation of A.D.C. policy and procedure!

_____, (Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm: emergency grievances are not for ordinary problems that are not of serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. In an Emergency, state why: NOTE: I don't know, "another inmate" named, "I'm"... Seems I MUST have been grieving for myself!

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

BRIEFLY state your one complaint/concern and be specific as to the complaint, **date**, place, name of personnel involved and how **you** were affected. (Please Print): The following SHALL be considered as ONE (1) ISSUE RAISED: (I'm) being, "Tormented" by the act(s), action(s) and/or inaction(s) taken by Ms. A. Culclager; an A.D.C. employee designated to uphold the Deputy Director, "office of oversight" concerning Dental, Mental Health and/or Medical Services Programs. The subject matter specifically being raised is the violation(s) of A.D.C. policy and procedure and Ark. St. Law, concerning the issue(s) of (Medical), "compassionate release" of the terminally ill where; (I'm) being, "Forced to watch" persons that are deemed (Both) clinicly and legally eligible for Act 290, suffer and/or die while Dep. Dir., Ms. A. Culclager allows other persons and/or, "offices" (whether classified as Medical/Institutional Programming or not) to apply other, "Laws or parts of laws" (such as Act 1805); that are in direct conflict or to otherwise interfere with the specifically implemented guidelines of Act 290 at section 4., which reads (In whole): "All laws and parts of laws in conflict with this act are hereby repealed." Dep. Dir., Ms. A. Culclager is, therefore, directly responsible for allowing, "Persons and/or offices" to violate (Both) A.D.C. policy and procedure and Ark. St. Law as was adopted under the provisions of Act 290 on Feb. 13, 1995 and still currently active... perpetually.

Inmate Signature John W. Magness Date 1-19-25

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

THIS SECTION TO BE FILLED OUT BY STAFF ONLY

This form was received on 1-19-25 (date), and determined to be **Step One** and/or an Emergency Grievance (Yes or No). This form was forwarded to medical or mental health? Yes (Yes or No). If yes, name of the person in that department receiving this form: _____ Date _____

Received FEB 03 2025 Deputy Director Health & Correctional Programs

Joyce Carey [redacted] 1-19-25
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Date Received

Describe action taken to resolve complaint, including **dates:** You cannot grieve on behalf of another Inmate.

1/22/25 Inmate refused to Sign
Staff Signature & Date Returned Inmate Signature & Date Received

This form was received on _____ (date), pursuant to **Step Two**. Is it an Emergency? _____ (Yes or No).
Staff Who Received Step Two Grievance: _____ Date: _____
Action Taken: _____ (Forwarded to Grievance Officer/Warden/Other) Date: _____
If forwarded, name of person receiving this form: _____ Date: _____

Received FEB 03 2025 Deputy Director Health & Correctional Programs

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

ADCF-15 www.acicatalog.com

Attachment II
00

ACKNOWLEDGEMENT OR REJECTION OF UNIT LEVEL GRIEVANCE

TO: Inmate Magness, John W. **ADC#:** [redacted]
FROM: Brown, Shurika R **TITLE:** ADC Inmate Grievance Coord
DATE: 01/27/2025 **GRIEVANCE #** [redacted]-25-00103

Please be advised, I have received your Grievance dated 01/19/2025 on 01/27/2025.
Your grievance was rejected as either non-grievable, untimely, duplicative, frivolous, or vexatious.

Received
FEB 03 2025
Deputy Director
Health & Correctional Programs

SIGNATURE OF ADC INMATE GRIEVANCE COORD

Shurika Brown ☑

SHURIKA BROWN, ADC INMATE GRIEVANCE COORD
JAN 27, 2025 08:38:25 CST

CHECK ONE OF THE FOLLOWING

- This Grievance will be addressed by the Warden/Center Supervisor or designee.
- This Grievance is of a medical nature and has been forwarded to the Health Services Administrator who will respond.
- This Grievance involves a mental health issue and has been forwarded to the Mental Health Supervisor who will respond.
- This Grievance has been determined to be an emergency situation, as you so indicated.

- This Grievance has been determined to not be an emergency situation because you would not be subject to a substantial risk of personal injury or other serious irreparable harm. Your Grievance will be processed as a Non-Emergency.
- ● This Grievance was REJECTED because it was either non-grievable (Submitted by inmate on behalf of another inmate), untimely, was a duplicate of , or was frivolous or vexatious.

INMATE'S APPEAL

If you disagree with a rejection, you may appeal this decision within five working days by filling in the information requested below and mailing it to the appropriate Chief Deputy/Deputy/Assistant Director. If you do not receive communication regarding your grievance by the date listed above, you may move to the next level of the process. To do so, indicate in the Inmate's Appeal Section below that you did not receive a response and mail it to the appropriate Chief Deputy/Deputy/Assistant Director within five working days. Keep in mind that you are appealing the decision to reject the original complaint. Address only the rejection; do not list additional issues, which were not a part of your original grievance as they will not be addressed. Your appeal statement is limited to what you write in the space provided below.

The name of the alleged inmate I'm supposed to be grieving on the behalf of has been omitted... Why is that? And you continue to, "torment..." and now mock me!

INMATE SIGNATURE

John W. Magness

1-27-25

If appealing a rejection, please include both the Unit Level Grievance Form (Attachment I) and the Rejection (Attachment II)

ACKNOWLEDGEMENT OF GRIEVANCE APPEAL OR REJECTION OF APPEAL

Attachment V
00

TO: Inmate Magness, John W.
FROM: Culclager, Aundrea F
RE: Receipt of Grievance [redacted]-25-00103

ADC#: [redacted]
TITLE: Deputy Director
DATE: 02/03/2025

Please be advised, the appeal of your grievance dated 01/19/2025
was received in my office on this date 02/03/2025

Your grievance appeal is being returned pursuant to the Administrative Directive on Inmate Grievances due to one of the following:

- ☐ The time allowed for appeal has expired
- ☐ The matter is non-grievable and does not involve retaliation:
  - ☐ (a) Parole and/or Release matter
  - ☐ (b) Transfer
  - ☐ (c) Job Assignment (Unrelated to Medical Restriction)
  - ☐ (d) Disciplinary matter
  - ☐ (e) Matter beyond the Division's control and/or matter of State/Federal law
  - ☐ (f) Involves an anticipated event
  - ☐ (g) Publication
- ☐ You did not send the proper Attachments:
  - ☐ (a) Unit Level Grievance Form (Attachment 1)
  - ☐ (b) Warden's/Center Supervisor's Decision (Attachment III); or Health Services Response (Attachment IV for Health Issues Only)
  - ☐ (c) Acknowledgement and/or Rejection form (Attachment II)
  - ☑ (d) Step Two was appropriately rejected
  - ☐ (e) Did not give reason for disagreement in space provided for appeal
  - ☐ (f) Did not complete Attachment III or IV by signing your name, ADC#, and/or the date
  - ☐ (g) Unsanitary form(s) or documents received
- ☐ This appeal was REJECTED because it was a duplicate of , or was frivolous or vexatious

ARKANSAS STATE CLAIMS COMMISSION

Arkansas
State Claims Commission
MAR 19 2025
RECEIVED

JOHN W. MAGNESS — CLAIMANT

V. CLAIM NO. _____

ARKANSAS DEPARTMENT OF CORRECTION
DIVISION OF CORRECTION et. al. — DEFENDANT

MOTION
(A.C.A.§19-10-208(f)(2))

COMES NOW, John W. Magness, pro se claimant and for his Motion for the filing of additional documents does so state:

1) Your claimant is in need of filing additional evidentiary documents before the Commission, in an effort to fully explain his claim through those EXHIBITS that have been obtained by those efforts towards seeking a civil resolution where;

2) The claim being filed before you is sufficiently complex in nature and these EXHIBITS are necessary for Your Claimant to be able to explain his claim before the commission fully, as the steps taken prior to the filing of this claim, involved several persons and/or "offices of oversight."

WHEREFORE, John W. Magness, pro se claimant does most respectfully request from the Commission, that you GRANT his MOTION for the filing of additional evidentiary documents as described here-to-fore.

Most Respectfully Submitted,

John W. Magness 3-14-25
Signature / Date

JOHN W. MAGNESS
[redacted]

ARKANSAS CLAIMS COMMISSION

(501)682-1619
(501)682-2823 FAX

Questions? Send an email to
ascc.new.claims@arkansas.gov

101 EAST CAPITOL AVENUE, SUITE 410
LITTLE ROCK, ARKANSAS 72201-3823

Arkansas
State Claims Commission
MAR 19 2025
RECEIVED

CLAIM FORM

1. **Claimant Information.**

Mr. Magness John [redacted]
(title) (last name) (ADC Number)

[redacted]

2. **Claimant's Legal Counsel.** An individual claimant may act as his or her own attorney (which is known as proceeding *pro se*). If a claimant is proceeding *pro se*, this section may be left blank.

(title) (last name) (first name) (email)

(address) (AR bar number)

(city) (state) (zip) (primary phone)

3. **State Agency Involved.** The Commission can only receive claims against agencies of the State of Arkansas. Please review the Commission's jurisdictional statutes, including Ark. Code Ann. § 19-10-204 and Ark. Code Ann. § 21-5-701, for more information. This information is required for any claim filed at the Commission. ARKANSAS DEPARTMENT OF CORRECTION DIVISION OF CORRECTION

4. **Date of Incident** PRIOR TO 1-19-25 AND AFTER (PERPETUALLY)

5. **Location of Incident** GRIMES UNIT

6. **Explanation of Incident.** Please provide an explanation of your claim, including why you believe the above-listed state agency is liable for your damages under Arkansas law. You may attach additional pages to this form. Please note that a claimant who is an inmate of the Division of Correction or the Division of Community Correction at the time the claim is filed is subject to the page limitations set forth on page 4 of this form (*see* Ark. Code Ann. § 19-10-208(f)).

I'm being, "Tormented" by the act(s), action(s) and/or inaction(s) of Dep. Dir., Ms. A. Culclager (Health and Correctional Programs); an A.D.C. employee that I assert, has repeatedly/consistantly failed to require and/or demand that those, "contracted" employees under her direct supervision uphold A.D.C. policy and procedure and/or Arkansas State Law concerning the Act 290 "Compassionate release" Program.

I actively submitted a grievance (# GR-25-00103) on 1-19-25; having Specificly outlined Dep. Dir., Ms. A. Culclager's allowance of, "Other persons and/or "offices" (Whether classified as Medical Institutional Programming or not) to apply other, "Laws or parts of laws" (Such as Act 1805); that are in direct conflict with, and/or to otherwise interfere with the Specificly implemented guidelines of Act 290 at Section 4."

In the body of my grievance I used the figurative statement: "I'm being, "Forced to watch" persons that are deemed (Both) clinicly and legally eligible for Act 290, Suffer and/or die..."

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Upon the General Assembly's own true interpretation and/or defination of Act 290 at Section 4; that they impose and inforce upon the A.D.C. agency, Health and Correctional Programs; the immediate, "Compassionate" release of those persons who qualify for it and; without excuse or delay on behalf of the A.D.C. agency and/or their Arkansas State Health and Correctional Programs Personnel. (*These other, "offices" would include but not be limited to: Centralized Records, I.P.O./I.R.O., etc.).

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IMPORTANT!

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Signature Page for Claim Filed by an Individual Claimant

The undersigned certifies that to the best of my knowledge, information, and belief, this claim is not being presented for any improper purpose; this claim is warranted by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law or for establishing new law; and the factual contentions have evidentiary support of, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery.

John W. Magness
Claimant Signature

ACKNOWLEDGEMENT

State of Arkansas
County of Sharp

On this the 12 day of March, 2025, before me, the undersigned notary, personally appeared JOHN W. MAGNESS known to me (or satisfactorily proven) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal.

Paul Rivera
Signature of Notary Public

My Commission Expires: 12-4-2034

[Seal of Office]
NOTARY PUBLIC ARKANSAS
PAUL RIVERA
No. 00004451
SHARP COUNTY
Commission Expires 12-4-2034

RECEIVED
JAN 27 2025
GRIEVANCE

UNIT LEVEL GRIEVANCE FORM (Attachment I)

Unit/Center [redacted]

Name JOHN W. MAGNESS

ADC# [redacted] **Brks #** 17 **Job Assignment** NOT A SLAVE

[redacted] USE ONLY
GR [redacted] 25-00103
Dat [redacted] 1-27-25
GRV. Code #: 913

1-19-25 (Date) STEP ONE: Informal Resolution

1-23-25 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)
If the issue was not resolved during Step One, state why: This is a MEDICAL issue that was NOT addressed by medical, in violation of A.D.C. policy and procedure!

_____, (Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm: emergency grievances are not for ordinary problems that are not of serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. In an Emergency, state why: NOTE: I don't know, "another inmate" named, "I'm"... Seems I MUST have been grieving for myself!

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

BRIEFLY state your one complaint/concern and be specific as to the complaint, **date**, place, name of personnel involved and how **you** were affected. (Please Print): The following SHALL be considered as ONE (1) ISSUE RAISED: I'm being, "Tormented" by the act(s), action(s) and/or inaction(s) taken by MS. A. Culclager; an A.D.C. employee designated to uphold the Deputy Director, "office of oversight" concerning Dental, Mental Health and/or Medical Services Programs. The subject matter specifically being raised is the violation(s) of A.D.C. policy and procedure and Ark. St. Law, concerning the issue(s) of (Medical), "compassionate release" of the terminally ill where; I'm being, "Forced to watch" persons that are deemed (Both) clinicly and Leagally eligible for Act 290, suffer and/or die while Dep. Dir., MS. A. Culclager allows other persons and/or, "offices" (whether classified as Medical Institutional Programming or not) to apply other, "Laws or parts of laws" (such as Act 1805); that are in direct conflict or to otherwise interfere with the specifically implemented guidelines of Act 290 at section 4., which reads (In whole); "All laws and parts of laws in conflict with this act are hereby repealed." Dep. Dir., MS. A. Culclager is, therefore, directly responsible for allowing, "Persons and/or offices" to violate (Both) A.D.C. policy and procedure and Ark. St. Law as was adopted under the provisions of Act 290 on Feb. 13, 1995 as still currently active... perpetually.

Inmate Signature John W. Magness Date 1-19-25

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

THIS SECTION TO BE FILLED OUT BY STAFF ONLY

This form was received on 1-19-25 (date), and determined to be **Step One** and/or an Emergency Grievance Yes (Yes or No). This form was forwarded to medical or mental health? Yes (Yes or No). If yes, name of the person in that department receiving this form: _____ Date _____

SGT Bryan Gray [redacted] _____ 1-19-25
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Date Received

Describe action taken to resolve complaint, including **dates:** You cannot grieve on behalf of another Inmate.

_____ 1/22/25 Inmate refused to Sign
Staff Signature & Date Returned Inmate Signature & Date Received

This form was received on _____ (date), pursuant to **Step Two**. Is it an Emergency? _____ (Yes or No).
Step Who Received Step Two Grievance: _____ Date: _____
Action Taken: _____ (Forwarded to Grievance Officer/Warden/Other) Date: _____
If forwarded, name of person receiving this form: _____ Date: _____

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

ADCF-15

Received FEB 03 2025 Deputy Director Health & Correctional Programs

Received FEB 07 2025 Deputy Director Health & Correctional Programs

Attachment II
00

ACKNOWLEDGEMENT OR REJECTION OF UNIT LEVEL GRIEVANCE

TO: Inmate Magness, John W. **ADC#:** [redacted]
FROM: Brown, Shurika R **TITLE:** ADC Inmate Grievance Coord
DATE: 01/27/2025 **GRIEVANCE #** [redacted]25-00103

Please be advised, I have received your Grievance dated 01/19/2025 on 01/27/2025.
Your grievance was rejected as either non-grievable, untimely, duplicative, frivolous, or vexatious.

Received
FEB 03 2025
Deputy Director
Health & Correctional Programs

SIGNATURE OF ADC INMATE GRIEVANCE COORD

Shurika Brown ☑

SHURIKA BROWN, ADC INMATE GRIEVANCE COORD
JAN 27, 2025 08:38:25 CST

CHECK ONE OF THE FOLLOWING

- ○ This Grievance will be addressed by the Warden/Center Supervisor or designee.
- ○ This Grievance is of a medical nature and has been forwarded to the Health Services Administrator who will respond.
- ○ This Grievance involves a mental health issue and has been forwarded to the Mental Health Supervisor who will respond.
- ☐ This Grievance has been determined to be an emergency situation, as you so indicated.

- ○ This Grievance has been determined to not be an emergency situation because you would not be subject to a substantial risk of personal injury or other serious irreparable harm. Your Grievance will be processed as a Non-Emergency.
- ● This Grievance was REJECTED because it was either non-grievable (Submitted by inmate on behalf of another inmate), untimely, was a duplicate of , or was frivolous or vexatious.

INMATE'S APPEAL

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INMATE SIGNATURE

John W. Magness

1-27-25

If appealing a rejection, please include both the Unit Level Grievance Form (Attachment I) and the Rejection (Attachment II)

ACKNOWLEDGEMENT OF GRIEVANCE APPEAL OR REJECTION OF APPEAL

Attachment V
00

TO: Inmate Magness, John W.
FROM: Culclager, Aundrea F
RE: Receipt of Grievance [redacted]-25-00103

ADC#: [redacted]
TITLE: Deputy Director
DATE: 02/03/2025

Please be advised, the appeal of your grievance dated 01/19/2025
was received in my office on this date 02/03/2025

Your grievance appeal is being returned pursuant to the Administrative Directive on Inmate Grievances due to one of the following:

- ☐ The time allowed for appeal has expired
- ☐ The matter is non-grievable and does not involve retaliation:
  - ☐ (a) Parole and/or Release matter
  - ☐ (b) Transfer
  - ☐ (c) Job Assignment (Unrelated to Medical Restriction)
  - ☐ (d) Disciplinary matter
  - ☐ (e) Matter beyond the Division's control and/or matter of State/Federal law
  - ☐ (f) Involves an anticipated event
  - ☐ (g) Publication
- ☐ You did not send the proper Attachments:
  - ☐ (a) Unit Level Grievance Form (Attachment 1)
  - ☐ (b) Warden's/Center Supervisor's Decision (Attachment III); or Health Services Response (Attachment IV for Health Issues Only)
  - ☐ (c) Acknowledgement and/or Rejection form (Attachment II)
  - ☑ (d) Step Two was appropriately rejected
  - ☐ (e) Did not give reason for disagreement in space provided for appeal
  - ☐ (f) Did not complete Attachment III or IV by signing your name, ADC#, and/or the date
  - ☐ (g) Unsanitary form(s) or documents received
- ☐ This appeal was REJECTED because it was a duplicate of , or was frivolous or vexatious

From: Yolanda Charles (DOC)
To: ASCC New Claims; Tawnie Rowell (DOC)
Cc: Trent Rigdon (DOC); Miles S. Morgan; Kathryn Irby; Mika Tucker
Subject: RE: CLAIM: John Magness v. ADC, Claim No. 251400
Date: Monday, April 14, 2025 2:21:06 PM
Attachments: image001.png

Received thank you

Yolanda Charles
Administrative Specialist III
Arkansas Department of Corrections
Division of Community Correction
Legal Division
1302 Pike Avenue, Suite B
North Little Rock, Arkansas 72114
501-682-6054
Yolanda.charles@doc.arkansas.gov



Confidentiality Notice: The information contained in this email message and any attachment(s) is the property of the State of Arkansas and may be protected by state and federal laws governing disclosure of private information. It is intended solely for the use of the entity to whom this email is addressed. If you are not the intended recipient, you are hereby notified that reading, copying or distributing this transmission is STRICTLY PROHIBITED. The sender has not waived any applicable privilege by sending the accompanying transmission. If you have received this transmission in error, please notify the sender by return email and delete the message and attachment(s) from your system.

From: ASCC New Claims <ASCC.New.Claims@arkansas.gov>
Sent: Monday, April 14, 2025 2:15 PM
To: Tawnie Rowell (DOC) <Tawnie.Rowell@doc.arkansas.gov>
Cc: Trent Rigdon (DOC) <Trent.Rigdon@doc.arkansas.gov>; Miles S. Morgan <Miles.S.Morgan@doc.arkansas.gov>; Yolanda Charles (DOC) <Yolanda.Charles@doc.arkansas.gov>;

Kathryn Irby <Kathryn.Irby@arkansas.gov>; Mika Tucker <Mika.Tucker@arkansas.gov>
Subject: CLAIM: John Magness v. ADC, Claim No. 251400

Dear Ms. Rowell,

Please confirm receipt of the attached claim file. The agency may file its response to this claim electronically by sending it to asccpleadings@arkansas.gov, with a copy to the claimant pursuant to the Arkansas Rules of Civil Procedure.

Please contact Mika Tucker with any questions.

Thank you,
Caitlin

Caitlin McDaniel
Administrative Specialist II
Arkansas State Claims Commission
101 East Capitol Avenue, Suite 410
Little Rock, Arkansas 72201
(501) 682-1619

Arkansas
State Claims Commission
APR 23 2025
RECEIVED

STATE OF ARKANSAS)
) § CLAIM NO: 251400
COUNTY OF JACKSON)

AFFIDAVIT

I, JOHN W. MAGNESS, after first being duly sworn, do hereby swear, depose and state that: I did mail copies of the additional (enclosed) documents; that I requested permission to file before the Commission on 3-19-25, to the Respondent on the date beside my signature below, with enough postage attached to ensure delivery to: Arkansas Division of Correction, Legal Department 1302 Pike Avenue, Suite C North Little Rock, AR. 72114.

I further swear that the statements, matters and things contained herein are true and accurate to the best of my knowledge, information and belief.

4-18-25
DATE

John W. Magness
AFFIANT

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public, on this 18 day of April, 2025.

NOTARY PUBLIC

My Commission Expires: 1-5-2033

MICHAEL MORRIS
WHITE COUNTY
NOTARY PUBLIC - ARKANSAS
My Commission Expires 1-5-2033
Commission No. 12723798

ARKANSAS STATE CLAIMS COMMISSION

Arkansas
State Claims Commission
MAR 19 2025
RECEIVED

JOHN W. MAGNESS — CLAIMANT

V. CLAIM NO. 251400

ARKANSAS DEPARTMENT OF CORRECTION
DIVISION OF CORRECTION et. al. — DEFENDANT

MOTION
(A.C.A.§19-10-208(f)(2))

COMES NOW, John W. Magness, pro se claimant and for his Motion for the filing of additional documents does so state:

1) Your claimant is in need of filing additional evidentiary documents before the Commission, in an effort to fully explain his claim through those EXHIBITS that have been obtained by those efforts towards seeking a civil resolution where;

2) The claim being filed before you is sufficiently complex in nature and these EXHIBITS are necessary for Your Claimant to be able to explain his claim before the commission fully, as the steps taken prior to the filing of this claim, involved several persons and/or "offices of oversight."

WHEREFORE, John W. Magness, pro se claimant does most respectfully request from the Commission, that you GRANT his MOTION for the filing of additional evidentiary documents as described here-to-fore.

Most Respectfully Submitted,

John W. Magness 3-14-25
Signature / Date

JOHN W. MAGNESS
[redacted]

RECEIVED
JAN 28 2025
GRIEVANCE

UNIT LEVEL G[redacted] FORM (Attachment I)
Unit/Center _____
Name JOH[redacted]GNESS
ADC# [redacted] **Brks #** 17 **Job Assignment** NOT A SLAVE

FOR OFFICE USE ONLY
GRV [redacted]-25-0012
Date Received: 1-28-25
GRV. Code #: 7117

1-22-25 (Date) STEP ONE: Informal Resolution

1-27-25 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)
If the issue was not resolved during Step One, state why: THIS griev. was written over Medical Personnel failing to follow policy & procedure! Can Medical provide the name of the _____, (Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm: emergency grievances are not for ordinary problems that are not of serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. In an Emergency, state why: inmate I'm supposed to be grieving for?

Is this Grievance concerning Medical or Mental Health Services? (YES) *If yes, circle one:* (*medical*) *or mental*
BRIEFLY state your one complaint/concern and be specific as to the complaint, **date**, place, name of personnel involved and how **you** were affected. (Please Print): **THIS** (The violation of A.D.C. (Med) policy and procedure) **SHALL** be considered as ONE(1) ISSUE RAISED: Medical's own H.S.A., Ms. L. Teague and/or the Med. Dept. Rep. appointed by her; did violate A.D.C (Med.) policy and procedure at; AR-835-IV-E(6-8) when she/they having received my (clearly marked) (medical) grievance as was dated 1-19-25, did thereafter (In violation) forward both the white and blue copies to Griev. Coord., Ms. S. Brown, who did, in supportive effort(s) to, "cover" Dep. Dir. (over Med.) Ms. A. Culclager's own reported violation(s) of A.D.C. (Med.) policy and procedure; did herself (Ms. Brown) violate AR-835-IV-K(3) by interfering with my already initiated (Med.) griev. when she instructed Sgt. Gray to write a falsly generated statement that implied I was grieving for another inmate as (Part of) the step one resolution response but where; my (medical) grievance began with the words: "I'm being tormented. and thereafter stated: "I'm being, "Forced to watch"..." The word(s) "I'm" being specifically underlined twice upon the 1-19-25 grievance itself as is indicated above... The evidence presented here-to-for SHALL speak for itself Medical needs to process THIS grievance AND the one written on 1-19-25.

John W. Magness
Inmate Signature

1-22-25
Date

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

THIS SECTION TO BE FILLED OUT BY STAFF ONLY

This form was received on 1-22-25 (date), and determined to be **Step One** and/or an Emergency Grievance Yes (Yes or No). This form was forwarded to medical or mental health? Yes (Yes or No). If yes, name of the person in that department rec[redacted] Date 1-22-25

PRINT STAFF NAME (PROBLEM SOLVER) [redacted] Staff Signature Date Received 1-22-25

Describe action taken to resolve complaint, including **dates:** This is not a medical grievance. You are grieving on behalf of another inmate.

Staff Signature & Date Returned 1/27/25

John W. Magness 1-27-25
Inmate Signature & Date Received

Received
FEB 10 2025
Deputy Director
Health & Correctional Programs

This form was received on _____ (date) pursuant to **Step Two**. Is it an Emergency? _____ (Yes or No).
Staff Who Received Step Two Grievance: _____ Date: _____
Action Taken: _____ (Forwarded to Grievance Officer/Warden/Other) Date: _____
If forwarded, provide name of person receiving this form: _____ Date: _____

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

ADCF-15 www.aclcatalog.com

Attachment III
00

WARDEN'S/CENTER SUPERVISOR'S DECISION

INMATE NAME: Magness, John W. **ADC #:** [redacted] **GRIEVANCE #:** [redacted]25-00112

WARDEN/CENTER SUPERVISOR'S DECISION:
I received your grievance dated January 22, 2025. You stated, "THIS (The violation of A.D.C. (Med) policy and procedure) SHALL be considered as ONE (1) ISSUE RAISED: Medical's own H.S.A., Ms. L. Teague and/or the Med. Dept. Rep. appointed by her; did violate A.D.C. (Med) policy and procedure at ; AR-835-IV-E-(6-8) when she/they having received my (clearly marked) medical grievance as was dated 1-19-25, did thereafter (In violation) forward both the white and blue copes to Griev. Coord. Ms. S. Brown, who did, in supportive effort(s) to, "cover" Dep. Dir. (Over Med.) Ms. A. Culclager's own reported violation(s) of A.D.C. (Med) policy and procedure; did herself (Ms. Brown) violate AR-835-IV-K-(3) by interfering with my already initiated (Med) griev. when she instructed Sgt. Gray to write a falsely generated statement that implied I was grieving for another inmate as (Part of) the step one resolution response but where; my medical grievance began with the words: "'I'm being tormented..." and thereafter stated: "I'm being, "Forced to watch"..." The word(s) "I'm" being specificly underlines twice upon the 1-19-25 grievance itself as is indicated above....The evidence presented here-to-for SHALL speak for itself!....".

You are attempted to grieve multiple issues. However, your attempt to grieve on behalf of another inmate was rejected at level two and appeal level. Policy was not violated, and I find this grievance is without merit.

SIGNATURE OF WARDEN/SUPERVISOR OR DESIGNEE

Chi Budnik

2-4-25 Warden

Date Title

INMATE'S APPEAL

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

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? 1) In direct conflict with the allegation(s) made by Warden, Mr. Budnik above; my griev. began with the words, "THIS (The violation of A.D.C. (Med.) policy and procedure) SHALL be considered as ONE(1) ISSUE RAISED:"; 2) There has been a failure on behalf of Medical D.O.N., Ms. A. Jackson and/or Warden, Budnik to provide the name of inmate, "I'm" where; 3) When this Medical grievance, forwarded to Medical and answered by Medical, received a step two response from me, it should have been forwarded BACK to Medical and where; 4) Warden, Budnik's response IS his own rejection at level two and this is only NOW the appeal level submission I'm entering but where; 5) Warden, Budnik has failed to state WHICH policy wasn't violated and failed to present documented, "proof(s)" as I have that they were!

INMATE SIGNATURE

John W. Magness

2-04-25

Date

Received

FEB 10 2025

Deputy Director
Health & Correctional Programs

If appealing, please submit both the Unit Level Grievance Form (Attachment I) and the Warden's Decision (Attachment III)

Attachment VI
00

DEPUTY/ASSISTANT DIRECTOR'S DECISION

INMATE NAME: Magness, John W. **ADC #:** [redacted] **GRIEVANCE#:** [redacted]-00112

CHIEF DEPUTY/DEPUTY/ASSISTANT DIRECTOR'S DECISION:
On January 22, 2025, you grieved "THIS (The violation of A.D.C. (Med) policy and procedure) SHALL be considered as ONE (1) ISSUE RAISED: Medical's own H.S.A., Ms. L. Teague and/or the Med. Dept. Rep. appointed by her; did violate A.D.C. (Med) policy and procedure at ; AR-835-IV-E-(6-8) when she/they having received my (clearly marked) medical grievance as was dated 1-19-25, did thereafter (In violation) forward both the white and blue copes to Griev. Coord. Ms. S. Brown, who did, in supportive effort(s) to, "cover" Dep. Dir. (Over Med.) Ms. A. Culclager's own reported violation(s) of A.D.C. (Med) policy and procedure; did herself (Ms. Brown) violate AR-835-IV-K-(3) by interfering with my already initiated (Med) griev. when she instructed Sgt. Gray to write a falsely generated statement that implied I was grieving for another inmate as (Part of) the step one resolution response but where; my medical grievance began with the words: "'I'm being tormented..." and thereafter stated: "I'm being, "Forced to watch"..." The word(s) "I'm" being specificly underlines twice upon the 1-19-25 grievance itself as is indicated above....The evidence presented here-to-for SHALL speak for itself!...."

The Warden responded, "You are attempted to grieve multiple issues. However, your attempt to grieve on behalf of another inmate was rejected at level two and appeal level. Policy was not violated, and I find this grievance is without merit."

Your appeal states "1) In direct conflict with the allegation(s) made by Warden, Mr. Budnik above; my griev. began with the words, "This (The violation of ADC (med) policy and procedure) shall be considered as ONE (1) ISSUE RAISED!"; 2) There has been a failure on behalf of medical D.O.N. Ms. A. Jackson and/or Warden Budnik to provide the name of inmate, "I'm" where; 3) when this medical grievance forwarded to medical and answered by medical, received a step two response from me, it should have been forwarded BACK to medical and where; 4) Warden Budnik's response is his own rejection and level two and this is only NOW the appeal level submission I'm entering hut where; 5) Warden Budnik has failed to state WHICH policy wasn't violated and failed to present documented, "proof(s)" as I have that they were!"

The response you received to your January 19, 2025 grieved was correct. You are not involved in the ACT 290 process; therefore, you cannot grieve any issues with it. The merits of this grievance will not be addressed due to your failure to follow policy and stating how ACT 290 is directly affecting you.

DIRECTOR

Andrea Culclager 2/10/2025

Please be advised that if you appeal this decision to the U.S. District Court, a copy of this Chief Deputy/Deputy/Assistant Director's Decision must be attached to any petition or complaint or the Court may dismiss your case without notice. You may also be subject to paying filing fees pursuant to the Prison Litigation Act of 1995.

Please send me a file marked copy for my records.

Thank you.

John W. Magner

From: Miles S. Morgan
To: ASCC Pleadings
Subject: John Magness v. ADC 251400
Date: Thursday, May 1, 2025 9:07:21 AM
Attachments: Answer-Magness 251400.pdf
image001.png

Answer.

Thanks,



BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN MAGNESS (ADC [redacted]) **CLAIMANT**

v. **NO. 251400**

ARKANSAS DEPARTMENT OF CORRECTIONS, DIVISION OF CORRECTION **RESPONDENT**

ANSWER

COMES NOW the Respondent, Arkansas Department of Corrections, 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 an investigation by internal affairs, if warranted, 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
3. The Respondent states that the Arkansas State Claims Commission does not have jurisdiction to hear this matter pursuant to Ark. Code Ann. § 19-10-204.

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 an investigation by Internal Affairs if warranted.

Respectfully submitted,

/s/ Miles S. Morgan
Miles S. Morgan Ark. Bar No. 2017049
Arkansas Department of Corrections
1302 Pike Avenue, Suite C
North Little Rock, AR 72114
Miles.S.Morgan@doc.arkansas.gov

CERTIFICATE OF SERVICE

I certify that a copy of the above pleading has been served this 1st day of May 2025, on the Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

John Magness (ADC [redacted])
[redacted]

/s/ Miles S. Morgan
Miles S. Morgan

Please send me a file marked copy for my records.

Thank you.

John W. Magness

Arkansas
State Claims Commission
MAY 16 2025
RECEIVED

Please see the enclosed:

CLAIMANT'S REPLY TO RESPONDENT'S ANSWER for CLAIM NO. 251400 and CLAIM NO. 251401

Arkansas
State Claims Commission
MAY 16 2025
RECEIVED

ARKANSAS CLAIMS COMMISSION

JOHN W. MAGNESS — CLAIMANT

V. CLAIM NO. 251400

ARKANSAS DEPARTMENT OF CORRECTION

DIVISION OF CORRECTION — RESPONDENT

CLAIMANT'S REPLY TO RESPONDENT'S ANSWER

COMES NOW, John W. Magness, pro Se claimant and as to his Reply to Respondent's Answer does so state:

1. Respondent's denial of liability is not opperative as a defense, nor does it grant entitlement of motion to dismiss when the Claimant's pleading alone is in question but where;

2. Claimant asserts possession of those necessary proof(s) required to support each issue raised and where;

3. Claimant would/will freely participate in the A.C.A. § 19-10-207 Power to examine but where;

4. Respondent has only alluded to willful enactment of an internal investigation and where;

5. Respondent asserts the Commission does not have jurisdiction pursuant to A.C.A. § 19-10-204 but where;

6. Your Claimant asserts that he has properly plead a

sovereign immunity claim that is based upon the fault-based liability and/or tortious liability of the Respondent and where;

7. Claimant asserts that Respondent's prayer to have claimant's complaint dismissed with prejudice, is a prayer that should rightly fall on deft ears as they have not provided the Commission with a true Answer of defense.

WHEREFORE, John W. Magness, pro se claimant does make request that Respondent's Answer be DENIED for their failure to present facts opperative as a defense before the Commission and that these matters be allowed to proceed.

CERTIFICATE OF SERVICE:

I, John W. Magness, pro se claimant do certify that a true copy of Claimant's Reply has been forwarded to the Respondent at: Arkansas Department of Correction Legal Division 1302 Pike Ave., Suite C North Little Rock, AR. 72114 on the date beside my Signature below, with enough postage attached to ensure delivery.

John W. Magness 5-13-25

JOHN W. MAGNESS #[redacted]
[redacted]
[redacted]
[redacted]

From: Misty Scott on behalf of ASCC Pleadings
To: Tawnie Hughes (DOC); Miles S. Morgan; Trent Rigdon (DOC); Taylor Reavis (DOC)
Cc: ASCC Pleadings; Yolanda Charles (DOC); Mika Tucker
Subject: ORDERS: John Magness v. ADC, Claim Nos. 251400 and 251401
Date: Friday, August 15, 2025 11:27:36 AM
Attachments: John Magness v. ADC2.pdf
John Magness-order251400.pdf
John Magness-order251401.pdf
magness-motion251400.pdf
Magness-motion251401.pdf

Dear Counselors:

Please see attached. Contact Mika Tucker with any questions.

Thank you,

Misty

Misty Scott
Arkansas State Claims Commission

ARKANSAS STATE CLAIMS COMMISSION

(501) 682-1619
FAX (501) 682-2823

KATHRYN IRBY
DIRECTOR

101 EAST CAPITOL AVENUE
SUITE 410
LITTLE ROCK, ARKANSAS
72201-3823

August 15, 2025

Mr. John Magness (ADC [redacted]

Ms. Tawnie Rowell *(via email)*
Mr. Miles Morgan
Mr. Trent Rigdon
Ms. Taylor Reavis
Arkansas Division of Correction
1302 Pike Avenue, Suite C
North Little Rock, Arkansas 72114

Re: ***John Magness v. Arkansas Division of Correction***
Claim Nos. 251400 and 251401

Dear Mr. Magness, Ms. Rowell, Mr. Morgan, Mr. Rigdon, and Ms. Reavis:

Enclosed please find the Orders entered on August 7, 2025, by the Arkansas State Claims Commission. Pursuant to the Orders, I am also enclosing a copy of Mr. Magness' April 23, 2025, motions to the ADC. If you have any questions, please do not hesitate to contact my office.

Sincerely,

Mika Tucker

ES: msscott

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN MAGNESS (ADC [redacted]) **CLAIMANT**

V. **CLAIM NO. 251400**

ARKANSAS DIVISION OF CORRECTION **RESPONDENT**

ORDER

Now before the Arkansas State Claims Commission (the "Commission") is the motion filed by John Magness (the "Claimant") to file additional documents in support of his complaint against Arkansas Division of Correction (the "Respondent"). Based upon a review of the motion, the arguments made therein, and the law of Arkansas, the Commission hereby finds as follows:

The Commission notes that Claimant is not required to seek leave of the Commission to supplement his claim under the Arkansas Rules of Civil Procedure and will accept the additional supporting documents as part of Claimant's claim. However, this order does not constitute any determination as to the validity of Claimant's claim.

The Commission further notes that Claimant's motion does not contain a certificate of service. Because the Commission is uncertain whether Respondent has received copies of these filings, it will transmit a copy to Respondent. However, the Commission cautions Claimant that any subsequent filings must contain a certificate of service and must be served as set forth in that certificate. Failure to comply with this requirement may result in the Commission striking the filing.

In reviewing the filings in this matter, the Commission finds that Claimant may be asserting a claim regarding his release, which would be outside the jurisdiction of the Commission. The Commission finds it to be prudent and efficient to address any jurisdictional concerns now to avoid any surprises after the parties and the Commission have expended more time and resources.

Therefore, the Commission directs the parties to file briefs within 40 days of this Order, addressing whether the Commission has jurisdiction over this claim. This claim will be placed in abeyance until the Commission enters an order on the jurisdictional issue. The Commission declines to set this claim for hearing at this time.

IT IS SO ORDERED.

ARKANSAS STATE CLAIMS COMMISSION
Dee Holcomb

ARKANSAS STATE CLAIMS COMMISSION
Henry Kinslow

ARKANSAS STATE CLAIMS COMMISSION
Paul Morris, Chair

DATE: August 7, 2025

Notice(s) which may apply to your claim

(1) A party has forty (40) days from transmission of this Order to file a Motion for Reconsideration or a Notice of Appeal with the Claims Commission. Ark. Code Ann. § 25-44-211(a)(1). If a Motion for Reconsideration is denied, that party then has twenty (20) days from transmission of the denial of the Motion for Reconsideration to file a Notice of Appeal with the Claims Commission. Ark. Code Ann. § 25-44-211(a)(1)(B)(ii). A decision of the Claims Commission may only be appealed to the General Assembly. Ark. Code Ann. § 25-44-211(a)(3).

(2) If a Claimant is awarded less than $15,000.00 by the Claims Commission at hearing, that claim is held forty (40) days from the date of disposition before payment will be processed. *See* Ark. Code Ann. § 25-44-211(a). Note: This does not apply to agency admissions of liability and negotiated settlement agreements.

(3) Awards or negotiated settlement agreements of $15,000.00 or more are referred to the General Assembly for approval and authorization to pay. Ark. Code Ann. § 25-44-215(b).

From: Miles Morgan (DOC)
To: ASCC Pleadings
Subject: John Magness v. ADC 251400
Date: Monday, August 25, 2025 2:42:58 PM
Attachments: image001.png
Brief JX-Magness.pdf

Brief on jurisdiction.

Thanks,



BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN MAGNESS (ADC [redacted]) **CLAIMANT**

V. **CLAIM NO. 251400**

ARKANSAS DIVISION OF CORRECTION **RESPONDENT**

BRIEF IN SUPPORT OF DISMISSAL

COMES NOW, Respondent, and for its Brief in Support of Dismissal, states:

1. Claimant filed a claim with this Commission on August 3, 2024, alleging that he is being forced to watch inmates suffer and/or die that should be released pursuant to the Act 290 "compassionate release" program.

2. Respondent filed a timely answer, denying liability.

3. On August 7, 2025, this Commission entered an order for briefs on whether the Commission has jurisdiction to hear this matter.

4. Respondent believes that the Commission does not have jurisdiction to hear this matter.

5. Claimant claims that Deputy Director Culclager is refusing to release certain inmates that allegedly qualify for release under the "compassionate release" program. The Commission does not have jurisdiction or authority to order the release of inmates. Furthermore, the Claimant's allegations that he is being "tormented" by watching these inmates "suffer and/or die" are allegations of cruel and unusual punishment.

6. "After incarceration, only the unnecessary and wanton infliction of pain constitutes cruel and unusual punishment forbidden by the Eighth Amendment." Jackson v. Gutzmer, 866 F.3rd 969, 974 (8th Cir. 2017).

7. Because the doctrine of sovereign immunity does not bar plaintiff from litigating his 42 U.S.C. § 1983 claim against defendant individually in state or federal courts of general jurisdiction, the Arkansas Claims Commission has no jurisdiction over the constitutional claim. Smith v. Johnson, 779 F.3d 867 (8th Cir. 2015).

6. The Commission does not have jurisdiction over Constitutional matters such as a violation of the 8th Amendment. Ark. Code Ann § 19-10-204.

7. As this Commission does not have jurisdiction to hear constitutional claims, this matter must be dismissed.

Respectfully submitted,

BY: /s/ MILES S. MORGAN
Miles S. Morgan, Ark. Bar No. 2017049
Deputy General Counsel
Arkansas Department of Corrections
1302 Pike Avenue, Suite C
North Little Rock, AR 72114
(501) 682-9540
Miles.S.Morgan@doc.arkansas.gov

CERTIFICATE OF SERVICE

I certify that a copy of the above pleading has been served this 25th day of August 2025 on the below Claimant by placing a copy of the same in the U.S. Mail, regular postage to:

John Magness (ADC [redacted]

/s/ Miles S. Morgan
Miles S. Morgan

9-09-25

Arkansas
State Claims Commission
SEP 12 2025
RECEIVED

Most Respected Mika Tucker,

Would you be so kind as to filing these two (2) documents for me and forwarding me copies for my records please and thank you so very much.

The first document is a CLAIMANT'S BRIEF and is to be filed under the CLAIM NO. 251400.

The second document is a MOTION FOR DISCOVERY and is to be filed under the CLAIM NO. 251401.

Thank you again!

Most Respectfully,
John W. Magness

Arkansas
State Claims Commission
SEP 12 2025
RECEIVED

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN W. MAGNESS — CLAIMANT

V. CLAIM NO. 251400

ARKANSAS DIVISION OF CORRECTION — RESPONDENT

CLAIMANT'S BRIEF

COMES NOW, John W. Magness, pro se Claimant and as to Claimant's Brief does so state;

1. On 8-07-25, the Commission entered an ORDER for the filing of briefs on the above styled case;

2. The ORDER was not forwarded by the Commission itself until 8-15-25, and where;

3. Your Claimant didn't receive said ORDER until the Grimes Unit Mailroom Received Date of 8-18-25, where;

4. Your Claimant is not asserting a claim regarding his personal release and where;

5. Your Claimant is not asserting an 8th Amendment, "unnecessary and wanton infliction of pain that would constitute as cruel and unusual punishment" but rather;

6. Your Claimant is asserting that the Respondent

is failing to uphold current Arkansas State law, as is clearly defined and stipulated under Act 290, Section 4 of the, "Compassionate Release" program;

7. As such, Your Claimant strongly asserts that the Commission does have jurisdiction to consider this matter of Sovereign immunity, which is based upon the fault-based liability of the Respondent where;

8. Your Claimant does, therefore, humbly request that the Commission set this matter for hearing, that discovery might begin in the above styled case.

WHEREFORE, John W. Magness, pro se Claimant does pray that the Commission GRANT the Claimant's Brief on the above grounds as Stated.

Most Respectfully,
John W. Magness

CERTIFICATE OF SERVICE:

I certify that a copy of the above has been served this 9th day of September 2025, on the below Respondent, by placing of the same in the U.S. Mail, with sufficient postage attached to ensure delivery to:
Arkansas Division of Correction Legal Division
1302 Pike Avenue, Suite C North Little Rock, AR. 72114

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN W. MAGNESS — CLAIMANT

V.

CLAIM NO. 251400

ARKANSAS DIVISION OF CORRECTION — RESPONDENT

MOTION TO COMPEL

COMES NOW, John W. Magness, pro se claimant and as to his MOTION TO COMPEL does so state:

1. The ADC state agency and/or Respondent has, "TOTAL CONTROL" over Your Claimant's incomming and outgoing legal mail correspondence and Where;

2. Your Claimant has valid reason(s) to conclude that the ADC state agency is interfering with His outgoing legal mail, as is intended for filing before the Commission and;

3. Your Claimant does suspect and alledge, that the ADC state agency is thereby seeking to sabotage His properly lodged claim, by purposely failing to mail out His timely prepared pleadings as intended for receipt by the Commission.

WHEREFORE, Your Claimant does make formal request of this Most Honorable Court, to GRANT His request for copies of all the documents, pleadings and/or motions that are currently filed by Him, before the Commission, in the above styled claim.

Respectfully Submitted,

JOHN [redacted]

CERTIFICATE OF SERVICE:

I, John W. Magness, do certify that a copy of the above pleading has been served this 01st day of December, 2025 by placing it into the U.S. Mail with sufficient postage to ensure delivery to the Respondent at Arkansas Division of Correction Legal Division 1302 Pike Avenue, Suite C North Little Rock, AR. 72114.

Arkansas
State Claims Commission
JAN 14 2026
RECEIVED

CLAIM NO. 251400

1-10-26

Most Respected Mika Tucker,

Would you be so kind as to filing this, my AFFIDAVIT IN SUPPORT ; with a CERTIFICATE OF SERVICE date of January 10th 2026 upon the Respondent written on the back thereof ; and in forwarding me a file marked copy for my records please and thank you so very much!

Most Respectfully,

John W. Magness

JOHN W. MAGNESS #[redacted]

[redacted]

Arkansas
State Claims Commission
JAN 14 2026
RECEIVED

CLAIM NO. 251400

STATE OF ARKANSAS)
) §§
COUNTY OF Jackson)

AFFIDAVIT IN SUPPORT

I, JOHN W. MAGNESS, after first being duly sworn, do hereby swear, depose and state that: Your Claimant is NOT receiving file marked copies from the Commission; of those completed documents as requested by the Commission itself. EXAMPLE: On the date of August 07, 2025 the Commission signed an ORDER giving the parties fourty (40) days in which to file Briefs. CLAIMANT'S BRIEF was mailed to (Both) the Commission and to the Respondent on the CERTIFICATE OF SERVICE date of September 09, 2025 but Your Claimant still hasn't received a file marked copy of his BRIEF from the Commission. Your Claimant hereby asserts, "foul play" by the Respondent, until the Commission forwards a file marked copy thereof.

I further swear that the statements, matters and things contained herein are true and accurate to the best of my knowledge, information and belief.

1-10-26
DATE

John W. Magness
AFFIANT

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public, on this 10TH day of January, 2026.

Paul Rivera
NOTARY PUBLIC

My Commission Expires: 12-4-2034

NOTARY PUBLIC ARKANSAS
PAUL RIVERA
No. 00004451
SHARP COUNTY
Commission Expires 12-4-2034

Respectfully Submitted,
John W. Magness
JOHN W. MAGNESS [redacted]

CERTIFICATE OF SERVICE:

I certify that a copy of the foregoing was served this 10th day of January 2026, on the Respondent by placing it in the U.S. Mail, regular postage to: Arkansas Division of Correction 1302 Pike Avenue, Suite C North Little Rock, AR. 72114.

From:	Misty Scott on behalf of ASCC Pleadings
To:	Tasha Tidwell; Miles Morgan
Cc:	Yolanda Charles; ASCC Pleadings; Mika Tucker
Subject:	ORDERS: John Magness v. ADC, Claim Nos. 251400 and 251263
Date:	Monday, February 9, 2026 12:04:12 PM
Attachments:	John Magness v. ADC251400and251263.pdf John Magness-order251400.pdf John Magness-order251263.pdf

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Ms. Tidwell and Mr. Morgan:

Please see attached. Contact Mika Tucker with any questions.

Thank you,

Misty

Misty Scott
Arkansas State Claims Commission

ARKANSAS STATE CLAIMS COMMISSION

(501) 682-1619
FAX (501) 682-2823

KATHRYN IRBY
DIRECTOR

101 EAST CAPITOL AVENUE
SUITE 410
LITTLE ROCK, ARKANSAS
72201-3823

February 9, 2026

Mr. John Magness (ADC [redacted]
[redacted]

Ms. Tasha Tidwell *(via email)*
Mr. Miles Morgan
Arkansas Division of Correction
1302 Pike Avenue, Suite C
North Little Rock, Arkansas 72114

Re: ***John Magness v. Arkansas Division of Correction***
Claim Nos. 251400 and 251263

Dear Mr. Magness, Ms. Tidwell, and Mr. Morgan:

Enclosed please find the Orders entered on February 5, 2026, by the Arkansas State Claims Commission. Pursuant to the Commission's order in Claim No. 251263, I am also enclosing the claim file in in that matter to Mr. Magness only. If you have any questions, please do not hesitate to contact my office.

Sincerely,

Mika Tucker

ES: msscott

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN MAGNESS (ADC [redacted]) **CLAIMANT**

V. **CLAIM NO. 251400**

ARKANSAS DIVISION OF CORRECTION **RESPONDENT**

ORDER

Now before the Arkansas State Claims Commission (the "Commission") is the claim filed by John Magness (the "Claimant") against the Arkansas Division of Correction (the "Respondent"). Based upon a review of the filings, the arguments made therein, and the law of Arkansas, the Commission hereby finds as follows:

1. Claimant filed his claim on March 19, 2025, seeking unspecified damages related to his allegation that Claimant is being "forced to watch" individuals being denied "compassionate release" for medical issues.

2. Respondent filed an answer denying liability, and Claimant filed a motion to supplement his claim

3. In its order dated August 7, 2025, the Commission accepted the supplemental documents submitted by Claimant and noted that Claimant's claim may be outside the jurisdiction of the Commission and found it prudent and efficient to address any jurisdictional concerns before the parties and the Commission expended more time and resources. The Commission directed the parties to file briefs addressing whether the Commission has jurisdiction over this claim and placed the claim in an abeyance pending a decision on the jurisdictional issue.

4. Respondent filed a brief in response to the Commission's directive, arguing, *inter alia*, Claimant's claim relates to a constitutional matter and the Commission does not have jurisdiction over such claims.

5. Claimant filed a brief in response to the Commission's directive, arguing, *inter alia*, that Respondent is violating Arkansas state law regarding the "Compassionate Release program."

6. The Commission agrees with Respondent that dismissal of this claim is proper. Claimant's claim involves constitutional issues and release issues. For these reasons, this claim is beyond the scope and purpose of the Commission.

7. If Claimant believes that he was deprived of due process or has claims of constitutional violations, those claims can be brought in a court of general jurisdiction. *See* Ark. Code Ann. § 25-44-204.

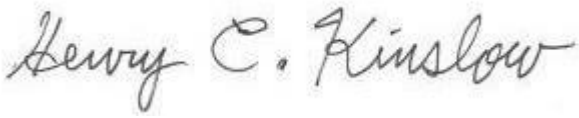
8. As such, pursuant to Ark. Code Ann. § 25-44-204 and Ark. R. Civ. P. 12(h)(3), Claimant's claim is DISMISSED.

9. Any pending motions are denied as moot.

IT IS SO ORDERED.



ARKANSAS STATE CLAIMS COMMISSION
Dee Holcomb



ARKANSAS STATE CLAIMS COMMISSION
Henry Kinslow, Chair



ARKANSAS STATE CLAIMS COMMISSION
Sylvester Smith

DATE: February 5, 2026

Notices which may apply to this claim

(1) A party has forty (40) days from transmission of this Order to file a Motion for Reconsideration or a Notice of Appeal with the Commission. Ark. Code Ann. § 25-44-211(a)(1). If a Motion for Reconsideration is denied, that party then has twenty (20) days from the transmission of the denial of the Motion for Reconsideration to file a Notice of Appeal with the Commission. Ark. Code Ann. § 25-44-211(a)(1)(B)(ii). A decision of the Commission may only be appealed to the General Assembly. Ark. Code Ann. § 25-44-211(a)(3).

(2) If a Claimant is awarded $15,000.00 or less by the Commission at hearing, that award is held forty (40) days from the date of disposition before payment will be processed to allow either party to utilize its remedies under Ark. Code Ann. § 25-44-211(a). Note: This does not apply to agency admissions of liability and negotiated settlement agreements.

(3) Awards or negotiated settlement agreements of more than $15,000.00 are referred to the General Assembly for approval and authorization to pay. Ark. Code Ann. § 25-44-215(b).

Arkansas
State Claims Commission
MAR 07 2026
RECEIVED
3-04-26

CLAIM NO. 251400

Most Respected Mika Tucker,

Would you be so kind as to filing this, my RECONSIDERATION motion, in reference to CLAIM NO. 251400, and in forwarding me a file marked copy for my personal records please and thank you?

Most Respectfully,

John W. Magness

JOHN W. MAGNESS [redacted]

[redacted]

[redacted]

[redacted]

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN W. MAGNESS **CLAIMANT**

V. **CLAIM NO. 251400**

ARKANSAS DIVISION OF CORRECTION **RESPONDENT**

RECONSIDERATION

COMES NOW, John W. Magness, Pro Se Claimant and as to his RECONSIDERATION request does so state:

1) On March 19, 2025, your claimant filed his Claim No. 251400 before the commission, where he fully asserts that venue would/could ONLY be defined as, "proper" before the commission's own venue, due to the specific issues he had raised within his claim where;

2) Your Claimant did not/ was not/ is not, "seeking (personal) damages" but rather, he has purposely left any, "related damages" unspecified for the sole purpose of allowing assessment of any would-be damages incurred by the A.D.C. State Agency (Against the State of Arkansas and the laws imposed by the General Assembly) to be left up to the determination of the General Assembly themselves but where;

3) Your Claimant was/is seeking the resolution relief he clearly stated within his claim as follows: "I'm now literally and actively seeking legal interpretation and/or definition of Act 290 at Section 4, from the General Assembly; I firmly believe that the A.D.C. agency is completely and totally liable before you; of failure(s) to have followed Act 290, as was adopted on February 13, 1995..." (These are crimes being committed against the currently imposed laws of the State of Arkansas, not against me.) and where;

4) Your Claimant had also stated that; "Upon the General Assembly's own true interpretation and/or definition of Act 290 at Section 4; that they impose and enforce upon the A.D.C agency..." (The imposition of fines and/or to which state department they should be paid out to [other than the A.D.C. of course] should also be determined by the General Assembly and are NOT intended for my personal gain, which is why damages were, "unspecified.") and where;

5) The Respondent simply has NOT advanced in truth and/or with accuracy, a constitutional, "release nor due process" claim upon your claimant, as Act 290 does NOT apply to him personally at all and where;

6) Your Claimant has NOT advanced an, "unnecessary and wanton infliction of pain that would constitute as a cruel and unusual punishment" claim; Neither here, nor in the Federal Courts,

as an 8th Amendment Claim cannot prevail under 42 U.S.C § 1983 where; "mental or emotional" damage is the deciding factor, but only where; "Actual physical injury" is clearly involved and proven but where;

7) Your Claimant remains unconvinced, that the Respondent has advanced defensive proof(s) of factual documentary evidence before the commission; that would, "sway" them into drawing the conclussion that your Claimant's figurative expressions of: "I'm being tormented" or "forced to watch" were somehow intended to be accepted as literal acts of unconstitutional conduct by the Respondent and where;

8) It would be improper of your Claimant to advance my claim in a venue outside of the commission's own; when seeking interpretation of Arkansas state laws that have been imposed by the General Assembly and willfully violated by the A.D.C. State Agency; in malice intent, while feigning ignorance of the specific meaning of Act 290 "Compassionate Release" as outlined under current Arkansas State Law.

WHEREFORE, John W. Magness, pro se Claimant does pray that the commission might GRANT his RECONSIDERATION on the foregoing stated grounds of proper A.C.A. § 19-10-204. Jurisdiction before the commission.

Respectfully Submitted,

John W. Magness

John W. Magness #[redacted]
[redacted]
[redacted]
[redacted]

CERTIFICATE OF SERVICE

I certify that I a copy of the above pleading has been served on the Respondent at 1302 Pike Ave., Suite C North Little Rock, AR, 72114 on the 4th day of March, 2026, via U.S. Mail, regular postage.

From:	Misty Scott on behalf of ASCC Pleadings
To:	Tasha Tidwell; Miles Morgan
Cc:	Yolanda Charles; ASCC Pleadings; Mika Tucker
Subject:	ORDER: John Magness v. ADC, Claim No. 251400
Date:	Wednesday, July 15, 2026 12:08:29 PM
Attachments:	John Magness v. ADC3.pdf John Magness-order3.pdf

Ms. Tidwell and Mr. Morgan:

Please see attached. Contact Mika Tucker with any questions.

Thank you,

Misty

Misty Scott
Arkansas State Claims Commission

ARKANSAS STATE CLAIMS COMMISSION

(501) 682-1619
FAX (501) 682-2823

KATHRYN IRBY
DIRECTOR

101 EAST CAPITOL AVENUE
SUITE 410
LITTLE ROCK, ARKANSAS
72201-3823

July 15, 2026

Mr. John Magness (ADC [redacted]
[redacted]

Ms. Tasha Tidwell *(via email)*
Mr. Miles Morgan
Arkansas Division of Correction
1302 Pike Avenue, Suite C
North Little Rock, Arkansas 72114

Re: ***John Magness v. Arkansas Division of Correction***
Claim No. 251400

Dear Mr. Magness, Ms. Tidwell, and Mr. Morgan:

Enclosed please find the Order entered on July 9, 2026, by the Arkansas State Claims Commission. If you have any questions, please do not hesitate to contact my office.

Sincerely,

Mika Tucker

ES: msscott

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN MAGNESS (ADC [redacted]) **CLAIMANT**

V. **CLAIM NO. 251400**

ARKANSAS DIVISION OF CORRECTION **RESPONDENT**

ORDER ON CLAIMANT'S MOTION FOR RECONSIDERATION

Now before the Arkansas State Claims Commission (the "Commission") is a motion filed by John Magness (the "Claimant") for reconsideration of the Commission's February 5, 2026, order dismissing Claimant's claim against the Arkansas Division of Correction (the "Respondent"). Based upon a review of the claim file, the arguments made therein, and the law of Arkansas, the Commission hereby finds as follows:

1. Claimant filed his claim on March 19, 2025, seeking unspecified damages related to his allegation that Claimant is being "forced to watch" individuals being denied "compassionate release" for medical issues.

2. In its order dated August 7, 2025, the Commission noted that Claimant's claim may be outside the jurisdiction of the Commission and directed the parties to file briefs addressing whether the Commission has jurisdiction over this claim.

3. Respondent filed a brief in response to the Commission's directive, arguing, *inter alia*, Claimant's claim relates to a constitutional matter and the Commission does not have jurisdiction over such claims.

4. Claimant filed a brief in response to the Commission's directive, arguing, *inter alia*, that Respondent is violating Arkansas state law regarding the "Compassionate Release program."

5. The Commission agreed with Respondent and dismissed Claimant's claim on February 5, 2026.

6. Claimant then filed the instant motion for reconsideration, arguing, *inter alia*, that he is seeking interpretation of Arkansas state laws.

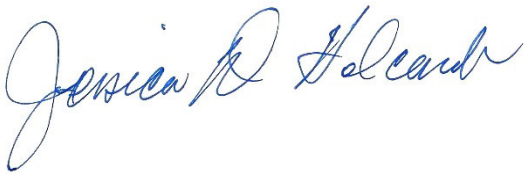
7. Respondent did not respond to the motion for reconsideration.

8. In analyzing a motion for reconsideration, Rule 7.1 of the Commission Rules and Regulations states that motions for reconsideration "will only be entertained if they set forth new or additional evidence which was not [previously] available . . . ."

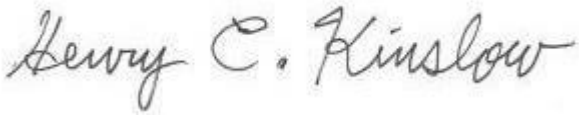
9. The Commission finds that the motion does not set forth new or additional evidence not previously available. If Claimant believes that he was deprived of due process or has claims of constitutional violations, those claims can be brought in a court of general jurisdiction. *See* Ark. Code Ann. § 25-44-204.

10. As such, Claimant's motion for reconsideration is DENIED, and December 4, 2025, Commission order remains in effect.

IT IS SO ORDERED.



ARKANSAS STATE CLAIMS COMMISSION
Dee Holcomb



ARKANSAS STATE CLAIMS COMMISSION
Henry Kinslow, Chair



ARKANSAS STATE CLAIMS COMMISSION
Sylvester Smith

DATE: July 9, 2026

Notices which may apply to this claim

(1) A party has forty (40) days from transmission of this Order to file a Motion for Reconsideration or a Notice of Appeal with the Commission. Ark. Code Ann. § 25-44-211(a)(1). If a Motion for Reconsideration is denied, that party then has twenty (20) days from the transmission of the denial of the Motion for Reconsideration to file a Notice of Appeal with the Commission. Ark. Code Ann. § 25-44-211(a)(1)(B)(ii). A decision of the Commission may only be appealed to the General Assembly. Ark. Code Ann. § 25-44-211(a)(3).

(2) If a Claimant is awarded $15,000.00 or less by the Commission at hearing, that award is held forty (40) days from the date of disposition before payment will be processed to allow either party to utilize its remedies under Ark. Code Ann. § 25-44-211(a). Note: This does not apply to agency admissions of liability and negotiated settlement agreements.

(3) Awards or negotiated settlement agreements of more than $15,000.00 are referred to the General Assembly for approval and authorization to pay. Ark. Code Ann. § 25-44-215(b).

Arkansas
State Claims Commission
JUL 31 2026
RECEIVED 1 of 1

CLAIM NO. 251400 7-27-26

Most Respected Mika Tucker,

Would you be so kind as to filing these, my NOTICE OF APPEAL and DIRECT APPEAL in the above styled claim and in forwarding me file marked copies for my personal records please and thank you?

Most Respectfully,

John W. Magness

JOHN W. MAGNESS [redacted]

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN W. MAGNESS CLAIMANT

V. CLAIM NO. 251400

ARKANSAS DIVISION OF CORRECTION RESPONDENT

Arkansas Claims Commission
JUL 31 2026
RECEIVED

NOTICE OF APPEAL
(A.C.A. § 25-44-211(a)(1)(B)(ii))

COMES NOW, John W. Magness, pro se Claimant and as to his Notice of Appeal does so state:

1. Your Claimant DID NOT receive the Commission's July 09, 2026, ORDER concerning the above styled claim until AFTER July 28, 2026, where;

2. The Commission itself acknowledges that the ORDER (As entered on July 09, 2026) had a notice of typed service date on July 15, 2026, which deprived Your Claimant of EXTREMELY VALUABLE business days in which to prepair his APPEAL and where;

3. Durring the ENTIRE TIME PERIOD (As described above) the Grimes Unit Law Library itself had no scheduled permanent staffing member(s) and the Law Library app. was NOT accessable... Neither were the West Law app. and/or the Legal Network for the entire State of Arkansas (According to staff) and where;

4. Your Claimant HAS BEEN PREJUDICED as a direct result of the foregoing but seeks ("Blindly") to present (Both) his Notice of Appeal and Direct Appeal before the Commission and General Assembly in a "pressured" but timely manner.

Most Respectfully,
John W. Magness
[redacted]

CERTIFICATE OF SERVICE:

I certify that a copy of the above has been served upon the Respondent this 27th day of July, 2026, by placing it in the U.S. Mail, regular postage to: Arkansas Division of Correction 1302 Pike Ave., Ste. C North Little Rock, AR. 72114.

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JOHN W. MAGNESS — CLAIMANT

V. — CLAIM NO. 251400

ARKANSAS DIVISION OF CORRECTION — RESPONDENT

DIRECT APPEAL

COMES NOW, John W. Magness, pro se claimant and as to his Direct Appeal does so state said grounds:

1. Your claimant filed his claim with the Commission on March 19, 2025, seeking primarily the General Assembly's interpretation of Arkansas (state) Law concerning Act 290, section 4, but where;

2. The Commission itself, chose to focus on those (constitutional) issues NOT raised by Your claimant, in an effort to completely avoid addressing the (state Law) issues he HAD raised and where;

3. Your claimant STILL seeks the General Assembly's own interpretation of Arkansas Law concerning Act 290, section 4.

WHEREFORE, John W. Magness, pro se claimant does pray that his Direct Appeal might be GRANTED based upon the foregoing and that true interpretation might be disclosed by the General Assembly which clearly concerns current Arkansas state Law and Act 290, Section 4 and all other relief that might rightly be awarded in this claim by state law.

Most Respectfully,
John W. Magness
JOHN W. MAGNESS #
[redacted]

CERTIFICATE OF SERVICE:

I certify that a copy of the above has been served upon the Respondent this 27th day of July, 2026, by placing it in the U.S. Mail, regular postage to: Arkansas Division of Correction 1302 Pike Ave., Ste. C North Little Rock, AR. 72114.