

Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION  
Of the State of Arkansas

RECEIVED

- Mr.
- Mrs.
- Ms.
- Miss

James Fudge, #078875, Claimant

vs.

State of Arkansas, Respondent  
Dept. of Correction

Do Not Write in These Spaces		
Claim No.	14-0697-CC	
Date Filed	March 14, 2014	
	(Month) (Day) (Year)	
Amount of Claim \$	?	
Fund	DOC	

COMPLAINT  
Loss of Property  
Failure to Follow Procedure

James Fudge, #078875, the above named Claimant, of POB 400, Grady, AR 71644  
(Name) (Street or R.F.D. & No.) (City)

(State) (Zip Code) (Daytime Phone No.) County of LINCOLN represented by PRO SE / LOSS PROPERTY  
(Legal Counsel, if any, for Claim)  
of (Street and No.) (City) (State) (Zip Code) (Phone No.) (Fax No.)

State agency involved: ARKANSAS DEPARTMENT OF CORRECTION (ADC) Amount sought:

Month, day, year and place of incident or service: OCTOBER 2nd, 2012 VARNER SUPER MAX UNIT, CELL BLOCK SIX, CELL #636  
Explanation: On Oct. 2nd, 2012 SECURITY Sgt. J. Plummer and Sgt. L. Smith approached and restrained myself I/M Fudge JAMES #78875 of CBG-636 cell of ADC, once pulled outside of assigned location 636 cell, K-9/ERT Security Sgt. B. HAYES, Sgt. D. REAP, Sgt. J. LAWRENCE, Sgt. B. COCKRELL, Sgt. K. GLOVER PRIOR I.D as JOHN DOES 1-5 Capt. CONNER, Lt. JOHNSON ACTING ON RETALIATORY DEMAND OF DEPUTY WARDEN CURTIS MEINZER FOR UNIT LEVEL GRIEVANCE(S) SUBMITTED AND TO HARRASS WITH SEARCH AND SEIZURE ALSO KNOWN AS "SHAKE-DOWN" DID ENTER CBG-636 CELL, STATING "HE'S GOT TO MUCH SHIT" THIS IS TOO MUCH SHIT (VSM12-3792 BY UNDOCUMENTED, UNPROFESSIONAL CONFISCATION AND NONE PHOTOGRAPHIC RECORDINGS ( ) NOW BRINGS HIS LOST OF PROPERTY COMPLAINT (A) LOSS OF BEDDING WHEN K-9 ERT SERGEANT TOOK UTILITY KNIFE TO CUT-OPEN FIRE RESISTANT COVERS OFF FUDGE'S STATE ISSUED PILLOW AND MATTRESS USING THE FIRE RESISTANT COVER OF STATE ISSUED PILLOW AS "TRASH BAG" FOR SMALLER BEIZED UNRECORDED UNDOCUMENTED CONFISCATED MEDICINE PACKAGES, BOXES, BOTTLES, TAPE OF EXHIBIT OF PAIN AIDE (VSM12-3796; VSM12-3797; VSM12-3792; VSM12-3794; (B) When K-9/ERT SERGEANT CONFISCATED AND SEIZED FUDGE'S RECENT DATED UNREAD ARKANSAS DEMOCRAT - GAZETTE NEWS-PAPERS PUTTING HIS UNREAD (C) NEWS PAPERS INSIDE THE FIRE RESISTANT PILLOW COVER ISSUED BY THE STATE FOR K-9/ERT SGT'S TRASH BAG (VSM12-3792; VSM12-3794); (D) FUDGE'S PEN-STORE 10/1 COMMISSARY PURCHASED CO2-CBG BUTTER NEXT-1 BARS OF SOAP K-9/ERT SERGEANT TOOK HIS UTILITY KNIFE AND CHOPPED-HACKED IN HALFS AND CONFISCATED TO PROVOKE INCIDENT ALSO WAS ULTERIOR ACTS TO IMPLY THAT FUDGE DOES NOT HAVE STAFF PERMISSION TO FRAY, SOAP BAR POLYING HANDS,

As parts of this complaint, the claimant makes the statements, and answers the following questions, as indicated: (1) Has claim been presented to any state department or officer thereof?  
NO ; when? N/A ; to whom? N/A  
(Yes or No) (Month) (Day) (Year) (Department)  
and that the following action was taken thereon: N/A

and that \$ \_\_\_\_\_ was paid thereon: (2) Has any third person or corporation an interest in this claim? N/A ; if so, state name and address  
(Name) (Street or R.F.D. & No.) (City) (State) (Zip Code)  
and that the nature thereof is as follows: LOSS OF PROPERTY  
: and was acquired on \_\_\_\_\_, in the following manner:

THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verily believes that they are true.

JAMES C. FUDGE # 78875  
(Print Claimant/Representative Name)

James Charles Fudge # 78875  
(Signature of Claimant/Representative)

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

(SEAL) on this 14 day of March 2014  
(Date) (Month) (Year)

Jelena Leggett  
(Notary Public)

My Commission Expires: 31 2021  
(Month) (Day) (Year)

SP1-R/09

BEFORE THE STATE CLAIMS COMMISSION  
of the STATE of Arkansas

James Fudge, ADC # 078875

Claimant

Vs.

state of Arkansas,

Respondent (s)

Do Not Write in These SPACES		
Claim No.	_____	
Date Filed	_____	
	(Month)	(DAY) (YEAR)
Amount of Claim \$	_____	
Fund	_____	

- CONTINUED COMPLAINT -

OF THE COMMISSARY/PEN STORE SHAPED COA-COA BUTTER NEXT-ONE (1) BAR OF BATH SOAP THAT COMMONLY LOOSE SHAPE /ALTERS WITH WATER AND USE (VSM12 - 3766; VSM12 - 3793; SEE CLAIMANT'S PAGES 3 of 5 (ADC + VSM CANTEEN RECEIPTS OF PURCHASED COCOA BUTTER SOAP 5 OZ. NEARLY EVERY MONTH, CAPTAIN CONNER, LT. JOHNSON, LT. J. PLUMMER, SGT. L. SMITH, B. HAYES, D. REAP, J. LAWRENCE, B. COCKRELL, K. GLOVER, REFUSED ANY (ADC PROPERTY CONFISCATION FORMALITY AT ALL TO CONCEAL THE DEPRIVATIONS MOTIVATED BY RETALIATION AND HARRASSMENT FOR SUBMITTED AND EXERCISED UNIT LEVEL GRIEVANCE (S) IN (VSM12 - 3793 CHIEF DEPUTY DIRECTOR'S RESPONSE STATES ACCORDING TO REVIEW "A Inter-OFFICE - COMMUNICATION" WAS FORWARD TO CLAIMANT, STATING PROPER POLICY PROCEDURE SHOULD HAVE BEEN COMPLETED AND AFFORD TO CLAIMANT WITHIN 72 HOURS, YET CLAIMANT ONLY RECIEVED Pages 4 of 5 AND 5 of 5 IN THE HERE DESCRIBED PERSONAL PROPERTY ALSO STATE ISSUED PROPERTY LOST DURING THE OCTOBER 2nd, 2012 UN RECORDED, UNDOCUMENTED VIOLATIONS OF ADC POLICY PROCEDURAL PROVISIONS TO DEPRIVE FUDGE OF HIS RIGHTS AND PROPERTY WHERE FORE CLAIMANT PRAYS THIS CLAIM COMMISSION GRANTS HIM THE AMOUNT OF \$ 84.00 EIGHTY-FOUR DOLLARS FROM EACH NAMED RESPONDENT FOR THE COCOA NEXT-1 SOAP CONFISCATED, \$ 30.00 THIRTY DOLLARS FROM EACH DEMOCRAT-GAZETTE NEWS PAPER CONFISCATED AND ANY ALL PROPER RELIEF ON AWARDED SUM DEEMED JUST FOR CONFISCATED BEDDING OF MATTRESS AND PILLOW FOR TEN (10) CALENDAR DAYS. RESPECTFULLY SUBMITTED, PRO SE JAMES C. FUDGE 78875:

JAMES C. FUDGE #78875 PRO SE  
(PRINT CLAIMANT / REPRESENTATIVE NAME)

James Charles Fudge #78875  
SIGNATURE OF CLAIMANT / REPRESENTATIVE

SWORN TO and Subscribed before me at \_\_\_\_\_  
(City) (STATE)  
ON this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
(year)

(SEAL)

\_\_\_\_\_  
(NOTARY PUBLIC)

MY COMMISSION Expires: \_\_\_\_\_  
(MONTH) (DAY) (YEAR)

Arkansas ADC 48 HR. WELFARE  
 Varner Unit VSM Canteen  
**INDIGENT**  
 04/12/12

Fudge, James  
 Customer Number: 078875  
 Housing Location: CB06/636

Initial Balance: 12.00  
 Ending Balance: 3.78

**INDIGENT RECEIPT**

Item	Qty	Price
Royal Crown Hair		
[075610018103]	1 @ 2.10	2.10
→ Soap Next Cocoa Butter		
[087381220968]	2 @ 0.84	1.68
TOP FLIGHT LEGAL PADS		
[075755411142]	1 @ 1.19	1.19
SECURITY BLACK PEN		
[087381212994]	1 @ 0.42	0.42
STAMPED ENVELOPE		
[121]	5 @ 0.49	2.45

Subtotal 7.84  
 Sales Tax 0.38  
 Total 8.22

April 11, 2012 01:19:55 PM

Arkansas ADC **INDIGENT**  
 Varner Unit VSM Canteen 05/09/12

Fudge, James  
 Customer Number: 078875  
 Housing Location: CB06/636

Initial Balance: 12.00  
 Ending Balance: 0.14

**INDIGENT RECEIPT**

Item	Qty	Price
TOP FLIGHT LEGAL PADS		
[075755411142]	1 @ 1.19	1.19
Baby Powder 4oz		
[087381223761]	1 @ 1.11	1.11
→ Soap Next Cocoa Butter		
[087381220968]	2 @ 0.84	1.68
SECURITY BLACK PEN		
[087381212994]	6 @ 0.42	2.52
STAMPED ENVELOPE		
[121]	10 @ 0.49	4.90

Subtotal 11.40  
 Sales Tax 0.46  
 Total 11.86

May 09, 2012 11:08:52 AM

X \_\_\_\_\_

Arkansas ADC  
 Varner Unit VSM Canteen  
**INDIGENT WELFARE**  
 JUNE 2012

Fudge, James  
 Customer Number: 078875  
 Housing Location: CB06/636

Initial Balance: 12.00  
 Ending Balance: 0.28

**INDIGENT RECEIPT**

Item	Qty	Price
→ Soap Next Cocoa Butter		
[087381220968]	2 @ 0.84	1.68
SECURITY BLACK PEN		
[087381212994]	9 @ 0.42	3.78
STAMPED ENVELOPE		
[121]	12 @ 0.49	5.88

Subtotal 11.34  
 Sales Tax 0.38  
 Total 11.72

June 13, 2012 10:15:01 AM

Arkansas ADC  
 Varner Unit VSM Canteen  
**INDIGENT**  
 July Welfare

Fudge, James  
 Customer Number: 078875  
 Housing Location: CB06/636

Initial Balance: 12.00  
 Ending Balance: 0.06

**INDIGENT RECEIPT**

Item	Qty	Price
→ Soap Next Cocoa Butter		
[087381220968]	1 @ 0.84	0.84
NEW DAY BATH/SHOWER POWDER 4oz		
[087381260001]	1 @ 1.40	1.40
SECURITY BLACK PEN		
[087381212994]	2 @ 0.42	0.84
TOP FLIGHT LEGAL PADS		
[075755411142]	1 @ 1.19	1.19
STAMPED ENVELOPE		
[121]	6 @ 0.49	2.94

Subtotal 11.35  
 Sales Tax 0.59  
 Total 11.94

July 11, 2012 10:52:11 AM

X \_\_\_\_\_

Arkansas ADC  
 Varner Unit VSM Canteen  
**INDIGENT WELFARE**  
 AUGUST WELFARE 2012

Fudge, James  
 Customer Number: 078875  
 Housing Location: CB06/636

Initial Balance: 12.00  
 Ending Balance: 0.30

**INDIGENT RECEIPT**

Item	Qty	Price
→ Soap Next Cocoa Butter		
[087381220968]	1 @ 0.84	0.84
SECURITY BLACK PEN		
[087381212994]	10 @ 0.42	4.20
STAMPED ENVELOPE		
[121]	13 @ 0.49	6.37

Subtotal 11.41  
 Sales Tax 0.35  
 Total 11.76

August 08, 2012 10:53:24 AM

Arkansas ADC  
 Varner Unit VSM Canteen  
**Welfare**  
 Fudge, James  
 Sept 2012  
 Customer Number: 078875  
 Housing Location: CB06/636

Initial Balance: 12.00  
 Ending Balance: 0.26

**INDIGENT RECEIPT**

Item	Qty	Price
TOP FLIGHT LEGAL PADS		
[075755411142]	1 @ 1.19	1.19
SECURITY BLACK PEN		
[087381212994]	10 @ 0.42	4.20
→ Soap Next Cocoa Butter		
[087381220968]	1 @ 0.84	0.84
STAMPED ENVELOPE		
[121]	10 @ 0.52	5.20

Subtotal 11.43  
 Sales Tax 0.43  
 Total 11.86

September 12, 2012 01:03:27 PM

X \_\_\_\_\_  
 Fudge, James

eOMIS#: 2012-10-010



ADMINISTRATIVE REGULATION  
STATE OF ARKANSAS  
DEPARTMENT OF CORRECTION

Fusion Center #

Section Number 005/409	Page Number 005-3 of 409-9 of 9
Board of Correction Approval Date: 9/27/87	
Supersedes: 005/409 Form	Date: 12/19/85
Attorney General Review Date: 6/11/87	Date filed secy. of state 10/02/87

005  Incident Report

409  Use of Force

SUBJECT: Reporting of Incidents-005; Use of Force 409

Varner

UNIT/DIVISION

REPORTING EMPLOYEE: Hayes Billy R.  
Last First Middle

RANK: K9 Sgt SHIFT ASSIGNMENT: K9

DATE: 10/02/2012 TIME: 7:00pm LOCATION: Varner VSM

INMATE(s) INVOLVED: N/A  
(Names and ADC Numbers)

EMPLOYEE(s) INVOLVED: Sgt.B.Hayes,Sgt.D.Reap,Sgt.K.Glover,Sgt.J.Lawrence,and Sgt.B.Cockrell/"K9 Missi"  
(Names, Titles, Rank)

INMATE(s) PRESENT: N/A  
(Names and ADC Numbers)

EMPLOYEE(s) PRESENT: Sgt.B.Hayes,Sgt.D.Reap,Sgt.K.Glover,Sgt.J.Lawrence,and Sgt.B.Cockrell/"K9 Missi"  
(Names, Titles, Rank)

OTHERS PRESENT/INVOLVED: (Specify) N/A  
(Names and Addresses)

EXTENT OF INJURY TO INMATE(s): N/A

TREATMENT AFFORDED TO INMATE(s): N/A

EXTENT OF INJURIES TO OFFICER(s): N/A

TREATMENT AFFORDED TO OFFICER(s): N/A

STATEMENT OF FACTS (If force used, state type and explain: \_\_\_\_\_)

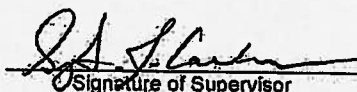
On the 2nd day of Oct, 2012 at approx. 7:00pm the K9 Team consisting of Sgt. B. Hayes, Sgt. D. Reap, Sgt. K. Glover, Sgt. J. Lawrence, and Sgt. B. Cockrell/"K9 Missi" conducted a search of the Varner Unit VSM 6 cellblock per A/W Meinzer. The following cells were searched and alerts/finds are as follow.  
Cell 636: No Alert (lots of Nuisance Contraband).

Cell 639: No Alert.

END OF STATEMENT.....

  
Signature of Reporting Employee

10/02/2012  
Date

  
Signature of Supervisor

10-2-12  
Date

Reviewed by (Signature) Warden/Center  
Supervisor/Administrator

Date

RECOMMENDATION: \_\_\_\_\_

Reviewed by (Signature) Assistant Director

Date

RECOMMENDATION: \_\_\_\_\_

Reviewed by (Signature) Director

Date

DISTRIBUTION OF COPIES

Original to Assistant Director, then to Director, and then to Inmate Institutional File.  
Assistant Director  
Warden/Center Supervisor/Administrator

INCR1 db

(Revised)

**UNIT LEVEL GRIEVANCE FORM (Attachment I)**

Unit/Center VARNER SUPER MAX

Name JAMES C. Fudge

ADC# 78875 Brks # CB6/636 Job Assignment Lev. Program

10/04/12 (Date) STEP ONE: Informal Resolution

10/09/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)  
If the issue was not resolved during Step One, state why: Destroyed Religious Symbol is undisputed and Not addressed at all in step - one

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why: \_\_\_\_\_

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

**BRIEFLY** state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print): ON Tuesday October 2nd, 2012 in CB6 of VSMU

OF ADC AT cell # 636 Assigned to myself inmate Fudge, James # 78875 PLACED WITHIN VSM BEHAVIOR Modification incentive level Program (B-MIL) Program that restricts Religious Practices, That Capt Conner, Sgt. J. Plummer, Sgt. L. Smith used a Exaggerated Cause of Chaplain's Need of inmate Fudge, J # 7887 FOR Family Emergency to allow UNKNOWN K-9 TEAM OF Five Members too Enter Inmate Fudge, J # 78875 cell where K-9 Team Leader produced an all purpose utility knife From his pocket and Issued it to an Africa-american OR (BLACK) K-9 male member whom Took the Shaped Soap-Bar carved Praying Hands of Commissary purchase coaco-butter next-one soap and sawed those Joined Praying Hands apart Separating one Left hand From one Right hand, then throwing both detailed shaped Hands into a cult-opened STATE. Issued PILLOW Evil K-9 Team Members SEIZURE And Destruction of My Religious Symbol.



I am very Affected by the acts to deny me any reminders too Pray this day No matter How that day tend to go, or who do or Say what to Look and see those Self shaped hands on my Bible. Encouraged my Practice of Studying and Praying

Inmate Signature James C. Fudge #78875

Date Thurs October 04, 2012

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 \_\_\_\_\_ (date), and determined to be Step One and/or an Emergency Grievance \_\_\_\_\_ (Yes or No). This form was forwarded to medical or mental health? \_\_\_\_\_ (Yes or No). If yes, name of the person in that department receiving this form: \_\_\_\_\_ Date \_\_\_\_\_

PRINT STAFF NAME (PROBLEM SOLVER) Co' D. Hill ID Number 88832 Staff Signature Co' D. Hill Date Received 10-7-12

Describe action taken to resolve complaint, including dates: Nothing concerning his religious belief

Staff Signature & Date Returned \_\_\_\_\_ Inmate Signature & Date Received James Fudge 10/9/2012

This form was received on 10-11-12 (date), pursuant to Step Two. Is it an Emergency? NO (Yes or No)  
Staff Who Received Step Two Grievance: \_\_\_\_\_ Date: 10-11-12

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

RECEIVED  
OCT 24 2012

FOR OFFICE USE ONLY  
GRV. # Usm12-3766  
Date Received: 10-11-12  
GRV. Code #: 505

037

INMATE NAME: Fudge, James

ADC #: 078875B

GRIEVANCE #: VSM12-03766

WARDEN/CENTER SUPERVISOR'S DECISION

In response to your grievance: Inmate Fudge, you state in your complaint, "On Tuesday October 2nd, 2012 in CB6 of VSMU of ADC at cell #636 assigned to myself inmate Fudge, James 78875 placed within VSM Behavior Modification incentive Level Program (B-MIL) Program that restricts religious practice, That Capt Conner, Sgt J Plummer, Sgt L Smith used a exaggerated cause of Chaplain's need of inmate Fudge, J 7887 for family emergency to allow unknown K-9 team of five member to enter Inmate Fudge, J #78875 cell where K-9 team Leader produced an all purpose utility knife from his pocket and issued it to an Africa-American or (Black) K-9 male member whom took the shaped soap-bar carved praying hands of commissary purchase coaco-butter next-one soap and sawed those joined praying hands apart separating one left hand from one right hand, then throwing both detailed shaped hands into a cutt-opened STATE Issued pillow Evil K-9 tem members SEIZURE and Destruction of my religiois symbol I am very affected by the acts to deny me any reminders to Pray this day no matter how that day tend to go, or who do or say what to look and see those self shaped hands on my Bible Encouraged my practice of studying and Praying"

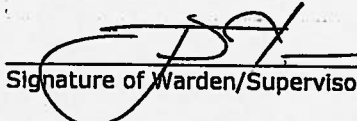
PER AD: 11-24 Searches of Inmates, Unit Searches and Control on Contraband - It shall be the policy of the Arkansas Department of Correction (ADC) to have procedures in place to detect and deter the introduction, manufacture, possession and/or conveyance of contraband.

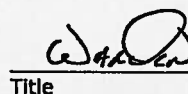
A. "Contraband" means any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to the following:

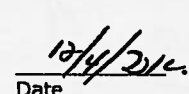
2. Articles in excess of established facility limits, articles that have been altered or used for unauthorized purposes, and/or articles in an inmate's possession in an unauthorized area.

Inmate Fudge by your own admission you state " the shaped soap-bar carved praying hands of commissary purchase coaco-butter " which means you altered the bar of soap from its original purpose thereby making it contraband.

Therefore, I find this issue without merit.

  
Signature of Warden/Supervisor or Designee

  
Title

  
Date

RECEIVED

INMATE'S APPEAL

DEC 10 2012

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? ALL SOAP BARS ARE ALTERED THE SECOND A DROPP OF WATER MAKES CONNECTION AND/OR CONTACT WITH THAT UNWRAPPED BAR OF SOAP ALTERING IT FROM ITS ORIGINAL SHAPE /SIZE ECT. ECT K-9 DIDNT SAW ALL BARS OF SOAP IN MY CELL IN HALF NOR CONFISCATE THAT ALTERED BAR OF SOAP IN MY SOAP DISH THAT CLEARLY WAS ALTERED FROM ITS ORIGINAL PURPOSE.

NAME: James E Fudge ADC# 78875 DATE: 12/05/2012

7

INMATE NAME: Fudge, James

ADC #: 078875

GRIEVANCE#:VSM12-03766

You state that a K-9 Team Member destroyed your religious symbol.

Based on the Warden's response in which he states in part, "PER AD: 11-24 Searches of Inmates, Unit Searches and Control on Contraband -

It shall be the policy of the Arkansas Department of Correction (ADC) to have procedures in place to detect and deter the introduction, manufacture, possession and/or conveyance of contraband.

A.  Contraband  means any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to the following:

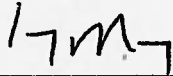
2. Articles in excess of established facility limits, articles that have been altered or used for unauthorized purposes, and/or articles in an inmate's possession in an unauthorized area.

Inmate Fudge by your own admission you state " the shaped soap-bar carved praying hands of commissary purchase coaco-butter " which means you altered the bar of soap from its original purpose thereby making it contraband.

Therefore, I find this issue without merit."

I find that I concur with the unit's response.

Appeal denied .



Director

Date

1.17.13

**UNIT LEVEL GRIEVANCE FORM (Attachment I)**

Unit/Center VARNER SUPER MAX

Name JAMES Fudge

ADC# 78875 Brks # ISO M<sup>4</sup>/5 Job Assignment (B-MILL) Pan. progr

10/10/12 (Date) STEP ONE: Informal Resolution

10/15/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)

If the issue was not resolved during Step One, state why: PER ADC #005: K-9 STAFF B. HAYES, D. REAP, K. GLOVER, J. LAWRENCE AND B. COCKRELL SENT IN REPRISAL BY DIV. G. MEINER FOR DERE/GRIEV.

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why: \_\_\_\_\_

FOR OFFICE USE ONLY  
GRV. 15mia-3792  
Date Received: 10-15-12  
GRV. Code #: 512

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

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

ON TUESDAY Oct 2nd, 2012 in CB6 at cell #636 of VSMU OF ADC LOCATION Assigned to INMATE Fudge, JAMES #78875 DURING K-9 Members Conducting of Search and Seizure of I/M Fudge's Cell Area, K-9 STAFF JOHN DOE #1 USING A Pocket Knife, and State Issued PILLOW cover, CONFISCATED INMATE FUDGE'S UNREAD ARKANSAS Democrat-Gazette Newspapers, using this STATE ISSUED PILLOW cover AS A TRASH Bagg Basically,

I AM Affected that K-9 STAFF JOHN DOE #1, CONFISCATED MY NEWSPAPER WITHOUT JUSTIFICATION OR CAUSE AS HARRASSMENT AND PROVOCATIONAL OVERTONES WHILE I WAS ASSIGNED To CB6-686 CELL closed FRONT CONFINEMENT, OF ADC NEVER HAVE I BEEN ACCUSED OF HAVING STARTED A FIRE, MY NEWSPAPERS WERE UNDER MY FIRE RESISTANT MATTRESS IN WHICH I SLEPT ON UNTIL I WORKED AROUND TO READING THEM, ON REGULAR OBSERVATION FROM OUT SIDE CELL DOOR THEY COULD NOT BE SEEN AT ALL! OR INSIDE CELL, ONE HAD TO LIFT FIRE RESISTANT MATTRESS TO SEE THREE (3) NEWSPAPERS

James C. Fudge # 78875  
Inmate Signature

Wednesday, October 10, 2012  
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 \_\_\_\_\_ (date), and determined to be Step One and/or an Emergency Grievance \_\_\_\_\_ (Yes or No). This form was forwarded to medical or mental health? \_\_\_\_\_ (Yes or No). If yes, name of the person in that department receiving this form: \_\_\_\_\_ Date: \_\_\_\_\_

PRINT STAFF NAME (PROBLEM SOLVER) Smith ID Number 20032 Staff Signature Smith Date Received 10/15/12

Description of action taken to resolve complaint, including dates: According to K-9 Officer Gary De Stales, Fay Hobbs was allowed to carry a knife. He Open the pillow up because it was an inmate issue pillow.  
10/10/12

Staff Signature & Date Returned RECEIVED Inmate Signature & Date Received James Fudge 10-12-2012

This form was received on 10-15-12 (date), pursuant to Step Two. Is it an Emergency? No (Yes or No).

Staff Who Received Step Two Grievance: Sgt. Red Date: 10-15-12

Action Taken: \_\_\_\_\_ (Forwarded to Grievance Officer/Warden/Other) Date: \_\_\_\_\_  
If forwarded, provide name of person receiving this form: \_\_\_\_\_ Date: \_\_\_\_\_

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

INMATE NAME: Fudge, James

ADC #: 078875B

GRIEVANCE #: VSM12-03792

WARDEN/CENTER SUPERVISOR'S DECISION

In response to your grievance: Inmate Fudge, you state in your complaint, "On Tuesday Oct 2nd, 2012 in CB 6 at cell 636 of VSMU of ADC location assigned to Fudge, James 78875 during K-9 members conducting of search and seizure of I/m Fudge's cell area, K-9 staff John Doe #1 using a pocket knife, and state issued pillow cover, confiscated inmate Fudge's unread Arkansas Democrat- Gazette newspaper, using this state issued pillow cover as a trash bagg basically.

I am affected that K=9 staff John doe #1 confiscated my newspaper without justification or cause as harassment and provocational overtones while I assigned to CB6-636 cell closed front confinement, of ADC never have I been accused of having started a fire, my newspapers where under my fire resistant mattress in which I slept on until I work around to reading them, on regular observation form outside cell door they could not be seen at all: or inside cell, one had to lift fire resistant mattress to see three (3) newspapers."

PER AD:11-24 Searches of Inmates, Unit Searches, and Control of Contraband - It shall be the policy of the Arkansas Department of Correction (ADC) to have procedures in place to detect and deter the introduction, manufacture, possession and/or conveyance of contraband.

A. "Contraband" means any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to the following: Articles in excess of established facility limits, articles that have been altered or used for unauthorized purposes, and/or articles in an inmate's possession in an unauthorized area.

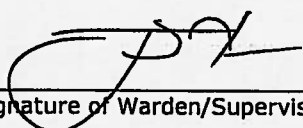
Searches may include but are not limited to the following elements: 1. Searches of inmates on or off ADC property, including search of persons, clothing, and other personal items;

Staff advises your mattress cover was removed due to several cuts in it which raised suspicion of possible contraband possibly being concealed within the mat. It was also noted that homemade pillow which had been opened and sewn back up by hand was also searched for possible contraband. VSM Staff was advised that you needed a replacement mat.

Therefore, I find this issue without merit.

RECEIVED

DEC 10 2012

  
Signature of Warden/Supervisor or Designee

INMATE GRIEVANCE ADMINISTRATION Title Warden

12/4/2012  
Date

**INMATE'S APPEAL**

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

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? NO HOME MADE PILLOW WAS IN MY CELL AT ALL, THE PILLOW WAS A "STATE ISSUED PILLOW CUT -OPEN AND ITS FIRE RESISTANT COVER USED AS A TRASH BAGG. INWHICH CONFISCATED ITEMS WAS PLACED INSIDE THAT "STATE ISSUED FIRE RESISTANT PILLOW COVER." SAME ACT CONDUCTED WITH STATE ISSUED MATTRESS. COVER CUT OFF !!!

NAME: James Charles Fudge ADC: 78875 DATE: DEC 05, 2012

INMATE NAME: Fudge, James

ADC #: 078875

GRIEVANCE#:VSM12-03792

You state that a K-9 member confiscated your Arkansas Democrat - Gazette newspapers using a state issued pillow cover as a trash bag.

Based on the Warden's response in which he states in part, "PER AD:11-24 Searches of Inmates, Unit Searches, and Control of Contraband - It shall be the policy of the Arkansas Department of Correction (ADC) to have procedures in place to detect and deter the introduction, manufacture, possession and/or conveyance of contraband.

A.  Contraband  means any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to the following: Articles in excess of established facility limits, articles that have been altered or used for unauthorized purposes, and/or articles in an inmate's possession in an unauthorized area.

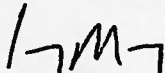
Searches may include but are not limited to the following elements: 1. Searches of inmates on or off ADC property, including search of persons, clothing, and other personal items;

~~Staff advises your mattress cover was removed due to several cuts in it which raised suspicion of possible contraband possibly being concealed within the mat. It was also noted that homemade pillow which had been opened and sewn back up by hand was also searched for possible contraband. VSM Staff was advised that you needed a replacement mat.~~

Therefore, I find this issue without merit."

I find that I concur with the unit's response.

Appeal denied



Director

Date

1.17.13

**UNIT LEVEL GRIEVANCE FORM (Attachment I)**

Unit/Center YARNER SUPER MAX

Name JAMES FUDGE

ADC# 78875 Brks # 130 MX 1/5 Job Assignment (B-MIL) PUN-PROG

FOR OFFICE USE ONLY	
GRV. #	<u>13m12-3793</u>
Date Received:	<u>10-15-12</u>
GRV. Code #:	<u>512</u>

10/10/12 (Date) STEP ONE: Informal Resolution

10/15/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)

If the issue was not resolved during Step One, state why: PER ADC #05: K-9 STAFF B. HAYES, D REAP, K. GLOVER, J. LAWRENCE and B. COCKRELL SENT IN REPRISAL BY NW C. MEINZER FOR NO REC. EVID DERE-GRIEV.

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why: \_\_\_\_\_

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

**BRIEFLY** state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print): ON TUESDAY Oct 2nd 2012 in CBG at cell # 636 of VSMU OF ADC Assigned Location of Myself Inmate, Fudge, James #78875 WHEN AND DURING A K-9 TEAM MEMBER SHAKE-DOWN OR SEARCH AND SEIZURE K-9 STAFF JOHN DOE #1 PRODUCED A POCKET KNIFE, AND ISSUED THE POCKET-KNIFE TO K-9 STAFF JOHN-DOE #2 WHOM CHOPPED INTO HALFS INMATE FUDGE, JAMES #78875 COMMISSARY PURCHASED BAR OF SOAP THEN, CONFISCATED SAID BAR OF SOAP AFTER CUTTING THE BAR INTO HALFS. NO CONFISCATION FORM F-401 HAS BEEN AFFORD ED OR PROVIDED TO MYSELF INMATE FUDGE, JAMES #78875 PER ADC POLICY AND PROCEDURE'S K-9 TEAM JOHN DOE #1, 2, 3 OR 4 HADD (72) SEVENTY-TWO HOURS TO PROVIDE INMATE FUDGE, JAMES #78875 WITH AN (ADC CONFISCATED FORM - AREA OR PERSON F-401) FORMALITY AND DID NOT. I AM AFFECT BY FAILURE TO PROVIDE INSTITUTIONAL DEPARTMENTAL FORMALITY OF RECEIPT OF ARTICLES SEIZED description and number of items WITH WRITTEN I.D OF OFFICER (S) conducting SEARCH ON DATE, TIME, AREA INFORMATION THAT VSM SECURITY HAVE RESPONDED TO HAVE NO KNOWLEDGE OF PURSUANT TO: Capt CONNER, Sgt J. PLUMMER, Sgt L. SMITH present during the unknown K-9 five member search NOT Recording Articles CONFISCATED NOR INMATE COPY AFFORDED INMATE FUDGE PUR ADC policy.

James Charles Fudge #78875  
Inmate Signature

Wednesday October 10, 2012  
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 \_\_\_\_\_ (date), and determined to be Step One and/or an Emergency Grievance \_\_\_\_\_ (Yes or No). This form was forwarded to medical or mental health? \_\_\_\_\_ (Yes or No). If yes, name of the person in that department receiving this form: \_\_\_\_\_ Date \_\_\_\_\_

PRINT STAFF NAME (PROBLEM SOLVER) [Signature] ID Number [Signature] Staff Signature [Signature] Date Received 10/15/12

Describe action taken to resolve complaint, including dates: According to K-9 officer Reap there was was know (Commissary to his knowledge

Staff Signature & Date Returned [Signature] RECEIVED James Fudge 10-12-2012 Inmate Signature & Date Received

This form was received on 10-15-12 (date), pursuant to Step Two. Is it an Emergency? No (Yes or No).

Staff Who Received Step Two Grievance [Signature] Date: 10-15-12

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.

INMATE NAME: Fudge, James

ADC #: 078875B

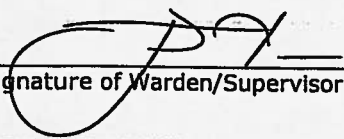
GRIEVANCE #: VSM12-03793


WARDEN/CENTER SUPERVISOR'S DECISION

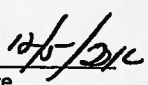
In response to your grievance: Inmate Fudge, you state in your complaint, "On Tuesday Oct 2nd 2012 in CB 6 at cell 636 of VSMU of ADC assigned location of myself Inmate Fudge, James 78875 when and during a K-9 team member shake-down or search and seizure K-9 staff John Doe #1 produced a pocket knife, and issued the pocket knife to K-9 staff John Doe 2 whom chopped into halves Fudge, James 78875 commissary purchased bar of soap then, confiscated said bar of soap after cutting the bar into halves no confiscation form F-401 has been afforded or provided to myself Fudge, James 78875 per ADC policy and procedure K-9 team John Doe #1, 2, 3, or 4 hadd (72) seventy-hours to provide inmate Fudge, James 78875 with an (ADC confiscated form-area or person F-401) formality and did not: I am affect by failure to provide institutional departmental formality of receipt of articles seized description and number of items with written that VSM security have responded to have no knowledge of pursuant to Capt. Conner, Sgt J Plummer, Sgt L Smith present during the unknown K-9 five members search not recording articles confiscated nor inmate copy afforded inmate Fudge per ADC policy."

~~Inmate Fudge, you are correct that you should have been afforded a 401 Confiscation Form for the altered bar of soap that was confiscated during a search. However, you should have also been written a disciplinary for being in possession contraband and you did not receive one.~~

Therefore, I find this issue resolved.

  
Signature of Warden/Supervisor or Designee

  
Title

  
Date

RECEIVED

INMATE'S APPEAL

DEC 10 2012

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? BEING DENIED THE NAMES OF THE OFFICIALS K-9 TEAM MEMBERS CONFISCATION OF ITEMS FROM MY ASSIGNED CELL / LOCATION AND AREA BY DENIAL OF ADC 401 AND OR ADC 841 FORMALITY DEPRIVES ACCESS TO COURT WHERE A PLAINTIFF IS UNABLE TO IDENTIFY THE WRONG-DOER WHOM VIOLATED HIS PERSONS, PROPERTY AND LIBERTY WITH OUT DUE PROCESS AND EQUAL PROTECTION OF LAW PURSUANT TO ARK. CONST. 23 B AS WELL THE U.S. CONST. AMEND 14: XIV I SHOULDVE BEEN PROVIDED THE IDENTITY OF WHO CONFISCATED WHAT; WHEN, WHERE AND HOW MANY IN WHICH DENYS ME OF MY RIGHTS STATE AND FEDERAL PROTECTION OF THE CONST. LAW, REG. ORDINANCE OF THIS STATE: DISCIPLINARY ARE NOT AN GRIEVABLE ISSUE:

  
Inmate Signature

78875  
ADC#

12/05/2012  
Date



UNIT LEVEL GRIEVANCE FORM (Attachment I)

Unit/Center VARNER SUPER MAX

Name JAMES Fudge

ADC# 78875 Brks # ISO, MX4/5 Job Assignment (B-MILL) pun progr

FOR OFFICE USE ONLY	
GRV. #	<u>VSM-12379</u>
Date Received:	<u>10/15/2012</u>
GRV. Code #	<u>VSM-12379</u>

10/10/12 (Date) STEP ONE: Informal Resolution

10/15/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)

If the issue was not resolved during Step One, state why: PER ADC #005; K-9 Sgt B. Hayes, D. REAP, K. GLOVER; J. LAWRENCE and B. Cockrell Sent in Reprisal By D/W CURTIS MEINER FOR DERE/GRIV.

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why: VSM TREATMENT

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

**BRIEFLY** state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print): ON Tuesday Oct 2nd<sup>nd</sup> in CB6 at cell #636 of VSMU of ADC Assigned Location of myself Inmate Fudge, James #78875 OBSERVED ADC K-9 TEAM MEMBER JOHN DOE #1, 2, 3, 4 AND 5 IN Green Attire Camoflodge Conducting Search and SEIZURE OR SHAKE DOWN when K-9 TEAM STAFF JOHN DOE #1 CONFISCATED INMATE FUDGE'S MEDICATION EXHIBIT OF A PAIN PILL /CAPSUL Box WITH INMATE FUDGE, JAMES #78875 I.D. ON THE EXTERIOR OF THE BOX WITH NAME OF DOCTOR AND DATE; WHEN ISSUED, K-9 TEAM STAFF JOHN DOE #3 CONFISCATED INMATE FUDGE JAMES #78875 BOTTLED MEDICATION EYE DROPP SOLUTION WITH BLACK TOP WHILE CAPT. CONNER, SGT. J. PLUMMER AND SGT. L. SMITH OBSERVED WITH INMATE FUDGE, JAMES #78875 AS K-9 TEAM MEMBER JOHN DOE #1 USED CUTT-OPEN PILLW COVER FOR CONFISCATION SACK OF ARTICLES AND ITEMS SEIZED WITHOUT JUSTIFICATION. I AM AFFECTED THAT VSMU SECURITY ALLOWED K-9 TEAM TOO GROSSLY USE SHAKE DOWN /SEARCH AND SEIZURE AS HARRASSMENT AND RETALIATION FOR INMATE FUDGE, JAMES USE OF THE UNIT GRIEVANCE PROCEDURE CONFISCATING EMPTY MEDICINE CONTAINERS WITH I.D. AND DATES ON THEM TO BE USED AS LEGAL EXHIBITS OF PROOF OF INJURIES TREATMENTS DISPOSAL

James Charles Fudge #78875  
Inmate Signature

Wednesday Oct 10, 2012  
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 \_\_\_\_\_ (date), and determined to be Step One and/or an Emergency Grievance \_\_\_\_\_ (Yes or No). This form was forwarded to medical or mental health? \_\_\_\_\_ (Yes or No). If yes, name of the person in that department receiving this form: \_\_\_\_\_ Date \_\_\_\_\_

PRINT STAFF NAME (PROBLEM SOLVER) W Smith ID Number 72035 Staff Signature W Smith Date Received 10/15/12

Describe action taken to resolve complaint, including dates: According to the K-9 Officer you had a lot of stuff that was not stated. I remade a comment & it was turned over to Sgt. Plummer, Conner, & Johnson 10/2/12

Staff Signature & Date Returned James C. Fudge 10-12-2012 RECEIVED Inmate Signature & Date Received

This form was received on 10-15-12 (date), pursuant to Step Two. Is it an Emergency? NO (Yes or No). Staff Who Received Step Two Grievance DEC 10 2012 at P.M. Date: 10-15-12

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.

637

INMATE NAME: Fudge, James

ADC #: 078875B

GRIEVANCE #: VSM12-03794

WARDEN/CENTER SUPERVISOR'S DECISION

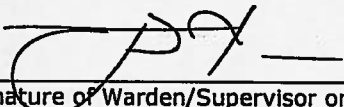
In response to your grievance: Inmate Fudge, you state in your complaint, "On Tuesday Oct 2nd, 2012 in CB6 at cell 636 of VSMU of ADC K-9 team member John Doe #1, 2, 3, 4, and 5 in green attire camouflage conducting search and seizure or shakedown when K-9 team staff John Doe #1 confiscated inmate Fudge's medication exhibit of a pain pill/capsil box with name of doctor and date; when issued, K-9 team staff John doe #3 confiscated inmate Fudge James 78875 bottled medication eye dropp solution Fudge, James 78875 as K-9 Team member John Doe #1 used cutt-open pillow cover for confiscation sack of articles and items seized without justification. I am affected that VS MU security allowed K-9 Team too grossly use shake down/ search and seizure as harassment and retaliation for inmate Fudge, James use of the Unit grievance procedure confiscating empty medicine containers with I.D. and dates on them to be used as Legal exhibits of proof of injures treatments disposal."

AD 11-24 - Searches of Inmates, Unit Searches and Control of Contraband - A. "Contraband" means any item or items determined by the Board of Corrections or ADC to jeopardize the safety, security, or good order of its institutions, including but not limited to the following:

1. Nuisance Contraband - Any item or article which may be or may have been authorized for possession, but which is now prohibited because excessive quantities present health or fire hazards or have become a housekeeping problem.
2. Articles in excess of established facility limits, articles that have been altered or used for unauthorized purposes, and/or articles in an inmate's possession in an unauthorized area.

Staff advises that no medication was confiscated; the medication bottles were empty and no longer being used to hold medication. They were confiscated as contraband.

Therefore, I find this issue without merit.

  
\_\_\_\_\_  
Signature of Warden/Supervisor or Designee

  
\_\_\_\_\_  
Title

12/4/2012  
\_\_\_\_\_  
Date

RECEIVED

INMATE'S APPEAL

DEC 10 2012

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

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? I WAS HOLDING ON TO THE EMPTY BOXES/BOTTLES OF PROSCRIBED MEDICATION CONTAINERS AS EVIDENCE OF TREATMENTS FOR INJURIES CAUSED BY VSMU / SECURITY STAFF'S DELIBERENT INDIFFERENCE AND DERELICTION OF DUTY THAT CAUSED ME HEALTH INJURIES THESE BOXES AND BOTTLES HAD DATE OF ISSUANCE BY DOCTOR'S NAME TO INMATE FUDGE, JAMES # 78875, THESE WERE MY LAWSUIT EXHIBITS AND K-9 TEAM MEMBERS WERE NOT JUSTIFIED TO CONFISCATE THEM.

NAME: James Charles Fudge ADC # 78875 DATE: 12/05/2012

16



**UNIT LEVEL GRIEVANCE FORM (Attachment I)**

Unit/Center Vision & Support Mgmt

Name James Fudge

ADC# 78875 Brks # \_\_\_\_\_ Job Assignment \_\_\_\_\_

FOR OFFICE USE ONLY	
GRV. #	<u>VSM12-3922</u>
Date Received:	<u>10/23/12</u>
GRV. Code #:	<u>512</u>

10/15/12 (Date) STEP ONE: Informal Resolution

10/22/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)

If the issue was not resolved during Step One, state why: LACK OF TIMELY RESPONSE FORWARD PINK COPY PER ADC POLICY AND PROCEDURE ACCORDINGLY

(Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why: \_\_\_\_\_

Is this Grievance concerning Medical or Mental Health Services? \_\_\_\_\_ If yes, circle one: medical or mental  
BRIEFLY state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print):

On Tues. Oct 2nd 2012 in VSMU of DC at CFC-CEU CFC Captain Conner supervising Retaliative Physical Abuse/DADA of SEARCH AND SEIZURE OF ASSISTANT DEPUTY WARDEN CURTIS MEINER AT (AN ASSIGNED LOCATION and Area and Person) INMATE FUDGE JAMES # 78875 USING K-9 TEAM SGT. R. HAVES, D. RAY, J. LAWRENCE, B. KOCKRELL AND K. GLOVER TO HARASS JIM FUDGE, JAMES # 78875 LEGAL CASE RECD OF CAPITAL MURDER TRANSCRIPTS AND APPALLANT FILES POURING HIS LEGAL PAPERS OUT OF ITS LEGAL ENVELOPES MIXING UP AND BUILDING FIVE OF SIX PILES OF LOOSE LEGAL PAPERS ON THE CELL FLOOR WHILE K-9 OFFICER REPEATS OVER AND OVER "I'VE GOT TOO MUCH SHIT" THIS IS TOO MUCH SHIT" AT WHICH TIME CAPTAIN CONNER SAID "DON'T WORRY ABOUT THAT YOU LEARN YET? YOU CAN'T WIN A SUIT AGAINST US" I AM AFFRATED BY THIS UNRECORDED ACT OF RETALIATION DIRECTED BY DEP. WARDEN CURTIS MEINER FOR HIS PERFORMANCE OF DUTY SUBMITTED GRIEVANCES BY JIM FUDGE AND CAPTAIN CONNER'S SUPERVISOR OF UNRECORDED/UNPHOTOGRAPHIC ITEMS CONFISCATED AS WELL UNCOOPERATIVE NATURE TO GIVE JIM FUDGE 78875 THE NAMES OF K-9 TEAM MEMBERS DURING THE ALTERNATIVE SHAPE DASH WHERE CURTIS MEINER PROMISED TO CONDUCT BY HIS LEGAL FILES UNDER

Inmate Signature James Fudge # 78875

Date \_\_\_\_\_

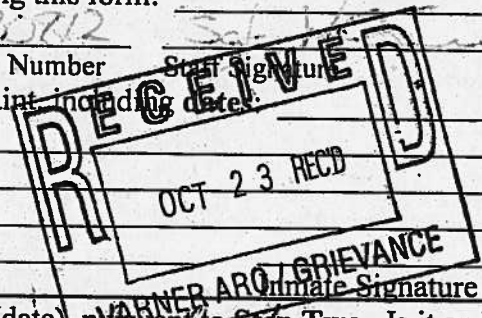
If you are harmed/threatened because of your use of the grievance process, report it immediately to the Warden or designee.

**THIS SECTION TO BE FILLED OUT BY STAFF ONLY**

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

PRINT STAFF NAME (PROBLEM SOLVER) W. Schmick ID Number 83812 Staff Signature \_\_\_\_\_ Date Received 10/23/12

Describe action taken to resolve complaint including date: \_\_\_\_\_ RECEIVED NOV 02 2012



Staff Signature & Date Returned \_\_\_\_\_ ADMINISTRATION BUILDING

This form was received on \_\_\_\_\_ (date) pursuant to Step Two. Is it an Emergency? \_\_\_\_\_ (Yes or No). Staff Who Received Step Two Grievance: \_\_\_\_\_ Date: 10-22-12

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.



**UNIT LEVEL GRIEVANCE FORM (Attachment I)**

Unit/Center VARNER SUPER MAX

Name JAMES FUDGE

ADC# 78875 Brks # CB6/636 Job Assignment RUN-LEV-Program

10/04/12 (Date) STEP ONE: Informal Resolution

10/09/12 (Date) STEP TWO: Formal Grievance (All complaints/concerns should first be handled informally.)

If the issue was not resolved during Step One, state why: UNTIMELY RESPONSE PER ADC POLICY FORWARD PINK-COPY TO STEP TWO

\_\_\_\_\_ (Date) EMERGENCY GRIEVANCE (An emergency situation is one in which you may be subject to a substantial risk of physical harm; emergency grievances are not for ordinary problems that are not of a serious nature). If you marked yes, give this completed form to the designated problem-solving staff, who will sign the attached emergency receipt. If an Emergency, state why: \_\_\_\_\_

Is this Grievance concerning Medical or Mental Health Services? \_\_\_\_\_ If yes, circle one: medical or mental  
**BRIEFLY** state your one complaint/concern and be specific as to the complaint, date, place, name of personnel involved and how you were affected. (Please Print): On Tuesday October 2nd, 2012 in CB6 of VSMU of ADC Capt. Conner, Lt. Johnson, Sgt. J. Plummer and Sgt. L. Smith, in a Conspired meeting of Minds approached My assigned cell #636 lying about Escorting Me to the Chaplain for Family-Emergency to allow K-9 TEAM OF FIVE MEMBERS OF UN NAMED JOHN DOES TO ENTER My cell For Search and Seizure Purposes, where K-9 TEAM LEADER CONFISCATED AND DESTROYED MY STATE ISSUED MATTRESS LEAVING ME CONFINED IN MY ASSIGNED CLOSED FRONT CELL TOO NO MATTRESS AT ALL AFTER SEVERAL REQUEST FOR ANOTHER MATTERESS BE PROVIDED, TO SGT. J. PLUMMER, SGT. L. SMITH AND CAPT. CONNER, CO. 2 RYUS TO NO AVAIL FORCING ME TO BE ON COLD CONCRETE ON PRIOR INJURED BACK. THAT K-9 TEAM LEADER CONFISCATED MEDICINE BOX FOR BACK PAIN IN SEARCH. I AM AFFECTED BY THE ABOVE NAMED ADC OFFICIALS DELIBERATE DERELICTION OF DUTY TO FORCE ME TO BE ON COLD CONCRETE BUNK WITHOUT A MATTRESS HAVING KNOWN THAT MY BACK WAS INJURED IN JULY 27th, 2012 SHOVE DOWN STEEL STAIR CHASE IN THREE COMPONENT BODY RESTRAINTS FROM 2nd TIER TO FLOOR LEVEL WHILE ALLOWING UNNAMED K-9 TEAM OF FIVE JOHN DOES PRODUCE A KNIFE TO CUTT MATTRESS COVER OFF MATTRESS WITHOUT REISSUANCE OF NEW MATTRESS TO FURTHER CAUSE INJURY AND PAIN TO MY BACK IN WHICH I AM MEDICATED FOR.

James C. Fudge # 78875  
Inmate Signature

Thurs October 04, 2012  
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 \_\_\_\_\_ (date), and determined to be Step One and/or an Emergency Grievance \_\_\_\_\_ (Yes or No). This form was forwarded to medical or mental health? \_\_\_\_\_ (Yes or No). If yes, name of the person in that department receiving this form: \_\_\_\_\_ Date \_\_\_\_\_

CO' D. Hill 88832 CO' D. Hill 10-4-12  
PRINT STAFF NAME (PROBLEM SOLVER) ID Number Staff Signature Date Received

Describe action taken to resolve complaint, including dates: Laundry States you should have received a mattress on 10-10-12

D. Smith 10/1/12  
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, provide name of person receiving this form: \_\_\_\_\_ Date: \_\_\_\_\_

**DISTRIBUTION: YELLOW & PINK - Inmate Receipts; BLUE-Grievance Officer; ORIGINAL-Given back**

RECEIVED  
L. Smith  
10/11/12

FOR OFFICE USE ONLY  
GRV. # VSM12-3796  
Date Received: 10-11-12  
GRV. Code #: 512

637

INMATE NAME: Fudge, James

ADC #: 078875B

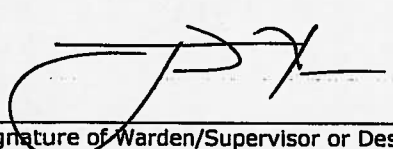
GRIEVANCE #: VSM12-03796

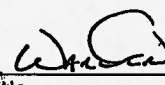
WARDEN/CENTER SUPERVISOR'S DECISION

In response to your grievance: Inmate Fudge, you state in your complaint, "On Tuesday October 2nd, 2012 in CB 6 of VSMU of ADC Capt Conner, Lt Johnson, Sgt Plummer and Sgt L Smith in a conspired meeting of minds approached my assigned cell 636 lying about escorting me to the Chaplain for family- emergency to allow K-9 team of five members of unnamed John Does to enter my cell fro search and seizure purposes where K-9 team leader confiscated and destroyed my state issued mattress leaving me confined in my assigned closed from cell too no mattress at all after several request for another mattress be provided, to Sgt J Plummer, Sgt L Smith and Capt Conner, Co 2 Ryus to no avail forcing me to be on cold concrete on prior injured back that K-9 team leader confiscated medicine box for back pain in search. I am affected by the above named ADC officials deliberate dereliction of duty to force me to be on cold concrete bunk without a mattress having known that my back was injured in July 27th, 2012 shove down steel stair chase in three component body restraints from 2nd tier to floor level while allowing unnamed K-9 teal of five John Does produce a knife to cut mattress cover off mattress without reissuance of new mattress to further cause injury and pain to my back in which I am medicated for."

Inmate Fudge, the issues as you state in this complaint have been previously addressed in several grievances. However, staff advises that you were issued another mat.

Therefore, I find this issue without merit.

  
Signature of Warden/Supervisor or Designee

RECEIVED   
Title

12/4/2012  
Date


DEC 10 2012

INMATE'S APPEAL

INMATE GRIEVANCE & SUPERVISOR

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

WHY DO YOU DISAGREE WITH THE ABOVE RESPONSE? No Mentioning of How Many days Elapsed that No Mattress was endured upon inmate Fudge, James #78875 After K-9 Team CONFISCATED HIS FIRE RESISTANT MATTRESS: Each Grievance submitted Focus on a One (1) complaint: a. Religious Symbol soap Praying Hands b. Medication containers c. STATE ISSUED PILLOW / and d. STATE ISSUED MATTRESS THAT OCCURRED Oct 2nd, 2012: e. PROCESS OF STATE FORMALITY F.401 / OR and 841 STAFF I.D.

  
Inmate Signature

78875  
ADC#

12/05/2012  
Date



BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JAMES FUDGE (ADC 078875)

CLAIMANT

V.

NO. 14-0697-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

**ANSWER**

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

1. Respondent denies liability in this claim and asserts it will hold the Claimant to strict proof on each allegation unless admitted by Respondent. Respondent reserves the right to plead further upon completion of the investigation by internal affairs and requests the matter be held in abeyance until the investigation is complete.
2. The applicable account information required by the Commission is:
  - a. Agency number: 0480
  - b. Cost Center: HCA0100
  - c. Internal Order: 340301
  - d. Fund Center: 509

WHEREFORE, for the reasons cited above the Respondent prays that the claim be dismissed with prejudice and that Claimant take nothing, or in the alternative that the matter be held in abeyance until completion of the investigation by internal affairs.

Respectfully submitted,  
Department of Correction Office of Counsel

*Lisa Mills Wilkins*  
LISA MILLS WILKINS Ark. Bar #87190  
Attorney Supervisor  
Post Office Box 8707  
Pine Bluff, AR 71611  
(870)267-6844 Office  
(870)267-6373 Facsimile

Arkansas  
State Claims Commission  
MAR 25 2014

RECEIVED

**CERTIFICATE OF SERVICE**

I certify that a copy of this pleading has been served this 21 day of March, 2014, on the Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

James Fudge (ADC 078875)  
Varner Super Max  
PO Box 400  
Grady, AR 71644-0400

*Lisa Mills Wilkins*  
LISA MILLS WILKINS Ark. Bar #87190

APR 29 2014

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

JAMES FUDGE (ADC#078875)

CLAIMANT RECEIVED

V.

NO. 14-0697-CC

ARKANSAS DEPARTMENT OF CORRECTION

RESPONDENT

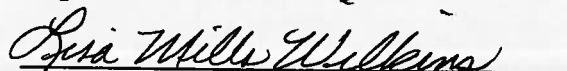
**RESPONDENT'S MOTION TO DISMISS**

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

1. Claimant seeks unspecified damages for loss of personal property after a shakedown of his cell on October 2, 2012 by the K-9 team. He has failed to state a cause of action for this claim under ARCP Rule 12(b)(6) and the matter should be dismissed.
3. Claimant alleges a loss of medicine packages, boxes, and bottles. Officer will testify that these were empty containers and were removed as trash and to prevent concealment of contraband. Any medications were provided at state expense and Claimant is not out any monies. Claimant is an indigent inmate and has been since his incarceration in 2010. Any soap he purchased was bought with state funds. However, as he stated in grievance VSM 12-3766, the soap was carved into the shaped of praying hands, not melted by water as he states in the complaint. Claimant does not have a hobbycraft card and cannot possess hobbycraft items. Inmates are not allowed to purchase hobbycraft from other inmates (AD 11-39IC(C) nor can he create hobbcraft on his own. He must be enrolled in the program and Claimant is not. (AD 11-39IV(A)). Religious emblems must be mailed directly from a commercial source with a copy of the invoice included. (AD 14-03IV(G)(3)).
4. Officers will testify that the mattress cover was removed from his mat due to several cut in the cover which raised suspicions of possible contraband being concealed therein. Claimant had a homemade pillow which had been cut open and re sewn by hand. It was confiscated. The mat is state property and the pillow was contraband.
5. None of the officers recall seeing any newspapers. Claimant did not file a grievance on the newspapers, something he would have had to purchase or have purchased for him, until eight (8) days after the incident occurred. There is no record in his Inmate Banking account of him authorizing any payment for an Arkansas-Democrat Gazette subscription. If Claimant had any such newspapers, they were likely contraband. Afterall, if he could have had them legally, why would he hid them under his mattress?
6. Based on the foregoing statements, Claimant has failed to state a claim upon which relief can be granted herein under ARCP Rule 12(b)(6).

WHEREFORE, for the reasons stated above and the evidence submitted, Respondent requests that the claim be dismissed.

Respectfully submitted,  
Department of Correction Office of Counsel

  
LISA MILLS WILKINS Ark. Bar #87190

Attorney Supervisor  
Post Office Box 8707  
Pine Bluff, AR 71611  
(870)267-6844 Office  
(870)267-6373 Facsimile

CERTIFICATE OF SERVICE

I certify that a copy of the MOTION TO DISMISS has been served this 28 day of April, 2014,  
on the Claimant by placing a copy of the same in the U. S. Mail, regular postage to:

JAMES FUDGE (ADC#078875)  
Varner Supermax Unit  
P. O. Box 400  
Grady, AR 71644-0400

*Lisa Mills Wilkins*  
LISA MILLS WILKINS Ark. Bar #87190

STATE CLAIMS COMMISSION DOCKET  
OPINION

Amount of Claim \$ \_\_\_\_\_ ?

Claim No. 14-0697-CC

James Fudge, #078875  
vs. \_\_\_\_\_ Claimant

Attorneys  
Pro se \_\_\_\_\_ Claimant

Department of Correction  
State of Arkansas \_\_\_\_\_ Respondent

Lisa Wilkins, Attorney  
\_\_\_\_\_ Respondent

Date Filed March 14, 2014

Type of Claim Loss of Property &  
Failure to Follow Procedure

FINDING OF FACTS

The Claims Commission hereby unanimously grants the Respondent's "Motion to Dismiss," solely for Claimant's failure to respond. Therefore, this claim is hereby unanimously denied and dismissed.

IT IS SO ORDERED.

(See Back of Opinion Form)

CONCLUSION

The Claims Commission hereby unanimously grants the Respondent's "Motion to Dismiss," solely for Claimant's failure to respond. Therefore, this claim is hereby unanimously denied and dismissed.

Date of Hearing June 12, 2014

Date of Disposition June 12, 2014

*Richard Mays* Chairman  
*Bill Lancaster* Commissioner  
*Patman* Commissioner

\*\*Appeal of any final Claims Commission decision is only to the Arkansas General Assembly as provided by Act #33 of 1997 and as found in Arkansas Code Annotated §19-10-211.

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

Arkansas  
State Claims Commission

JUN 30 2014

RECEIVED

PRO SE

JAMES FUDGE, ADC# 78875

CLAIMANT

Vs

CLAIM No. 14-0697-CC

ARKANSAS DEPT OF CORRECTIONS

RESPONDENT (S)

PRO SE MOTION FOR RECONSIDERATION OF FACTS /OF FINDING(S)

NOW COMES CLAIMANT JAMES FUDGE, ADC # 78875 IN THE ABOVE STYLED CLAIM MOVES THIS STATE CLAIMS COMMISSION FOR RECONSIDERATIONS ON ITS JUNE 12<sup>th</sup> 2014 FINDINGS OF FACT TO UNANIMOUSLY GRANT THE RESPONDENT'S MOTION TO DISMISS, THAT CLAIMANT FUDGE HAS NOT RECEIVED TO RESPOND TOO. HOWEVER THE LAST COMMUNICATIONS OR CORRESPONDENCE CLAIMANT DID IN FACT RECEIVE DATED MARCH 22<sup>nd</sup>, 2014 ISSUED BY SECURITY LIEUTINANT WADE. TITLED "RESPONDENT'S ANSWER" BY A LISA MILLS WILKINS ATTORNEY SUPERVISOR, ADC: DATED MARCH 21, 2014 DENYING LIABILITY:

ON MARCH 25, 2014 THIS STATE CLAIMS COMMISSION STATING "THE ONLY ALTERNATIVE AVAILABLE TO CLAIMANT IS TO APPEAR BEFORE THE ARKANSAS STATE CLAIMS COMMISSION WHEN LIABILITY IS CONTESTED BY THE RESPONDENTS, TO PLEASE NOTIFY THIS OFFICE IN WRITING WITHIN FIFTEEN (15) CALENDAR DAYS FROM THE DATE OF THE LETTER 03/25/ 2014.

CLAIMANT'S REPLY TO APPEAR WAS RECEIVED IN THE STATE CLAIMS COMMISSION OFFICE ON APRIL 2<sup>nd</sup>, 2014 IN WRITTING WITH FILE-MARKED COPY ENCLOSED, NEXT ON JUNE 18, 2014 CLAIMANT RECEIVED THE STATE CLAIMS COMMISSION DOCKET OPINION FINDING OF FACTS UNANIMOUSLY GRANTING RESPONDENTS MOTION TO DISMISS, SOLELY FOR CLAIMANTS! ALLEGED FAILURE TO RESPOND TO SUCH MOTION HE HAS NOT RECEIVED,

RESPECTFULLY SUBMITTED

PRO SE

James Charles Fudge 78875

*James Charles Fudge 78875*  
JAMES C. FUDGE # 78875  
VARNER SUPER MAX UNIT  
POST-OFFICE BOX 400  
GRADY, ARKANSAS  
71644

CERTIFICATE OF SERVICE

I, JAMES FUDGE, ADC# 78875 DO HEREBY CERTIFY THAT (5) COPIES WERE MADE AND PLACED IN ADC'S INSTITUTIONAL LEGAL MAIL-OUT-GOING SUPERVISOR'S CARE TO BE PLACED IN THE U.S. MAIL ADDRESSED TO THE ARKANSAS STATE CLAIMS COMMISSION AT 101 EAST CAPITOL AVENUE, SUITE 410 LITTLE ROCK, ARKANSAS 72201-3823 THIS 26<sup>th</sup> DAY OF JUNE 2014 WITH REQUEST FOR RECEIVED MARKED COPY RETURNED TO CLAIMANT / APPELLANT THANK YOU IN ADVANCE

SINCERELY

*James Charles Fudge 78875*  
JAMES C. FUDGE # 78875  
P.O. Box 400  
GRADY, ARK  
71644

EXECUTED THIS 06/26/2014

STATE CLAIMS COMMISSION DOCKET  
OPINION

Amount of Claim \$ \_\_\_\_\_ ?

Claim No. 14-0697-CC

James Fudge, #078875 Claimant

Attorneys  
Pro se Claimant

vs.

Department of Correction Respondent  
State of Arkansas

Lisa Wilkins, Attorney Respondent

Date Filed March 14, 2014

Type of Claim Loss of Property &  
Failure to Follow Procedure

FINDING OF FACTS

The Claims Commission hereby unanimously denies the Respondent's "Motion for Reconsideration" for failure to provide new evidence. Therefore, the Commission's June 12, 2014 order will remain in effect.

IT IS SO ORDERED.

(See Back of Opinion Form)

CONCLUSION

The Claims Commission hereby unanimously denies the Respondent's "Motion for Reconsideration" for failure to provide new evidence. Therefore, the Commission's June 12, 2014 order will remain in effect.

Date of Hearing July 10, 2014

Date of Disposition July 10, 2014

*[Signature]* Chairman  
*[Signature]* Commissioner  
*[Signature]* Commissioner

\*\*Appeal of any final Claims Commission decision is only to the Arkansas General Assembly as provided by Act #33 of 1997 and as found in Arkansas Code Annotated §19-10-211.

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

Arkansas  
State Claims Commission  
CLAIMANT  
JUN 30 2014  
RECEIVED

PRO SE  
JAMES FUDGE, ADC# 78875

Vs.

CLAIM NO. 14-0697-CC

ARKANSAS DEPT OF CORRECTIONS

RESPONDENT(S)

NOTICE OF APPEAL

NOW COMES CLAIMANT JAMES FUDGE IN THE ABOVE STYLED CLAIM TO GIVE NOTICE TO APPEAL THE JUNE 12, 2014 FINDING OF FACTS UNANIMOUSLY DENYING AND DISMISSING HIS CLAIM FOR FAILURE TO PROSECUTE AN ALLEGED RESPONDENT'S MOTION TO DISMISS UNKNOWN WHEN FILED / MAILED OR BY WHOM NOR SET HEARING SCHEDULED.

RESPECTFULLY SUBMITTED

PRO SE  
*James Charles Fudge* #78875  
VARNER SUPER MAX UNIT  
POST-OFFICE BOX 400  
GRADY, ARKANSAS  
71644

CERTIFICATE OF SERVICE

I JAMES FUDGE DO HERE BY CERTIFY THAT FIVE COPIES OF THE HEREIN NOTICE OF APPEAL WAS MAILED TO THE ARKANSAS STATE CLAIMS COMMISSION AT 101 EAST CAPITOL AVENUE, SUITE 410 LITTLE ROCK, ARKANSAS 72201 THIS 26<sup>TH</sup> DAY OF JUNE 2014 WITH REQUEST FOR RETURNED RECEIVED MARK COPY.

*James Charles Fudge* 78875  
EXECUTED THIS 06/26/2014

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

Arkansas  
State Claims Commission  
AUG 18 2014

JAMES C. FUDGE, ADC# 78875  
PRO SE APPELLANT

APPEAL

RECEIVED

vs

CLAIM NO: 14-0697-CC

ARKANSAS DEPARTMENT OF CORRECTIONS  
APPELLEES

COMES NOW CLAIMANT - APPELLANT PRO-SE IN THE ABOVE CLAIMS OF FAILURE TO FOLLOW PROCEDURE, LOST OF PROPERTY THIS STATE CLAIMS COMMISSION DISMISSED WITHOUT, FORWARDING HIM RESPONDENT'S MOTION TO DISMISS NOR DID RESPONDENT'S ENSURE THAT CLAIMANT RECEIVED THEIR MOTION TO DISMISS, FOR THIS CLAIM'S COMMISSION TO DISMISS HIS CLAIM ON JUNE 12, 2014 AS WELL DENIED RECONSIDERATIONS DATED JULY 10th, 2014 STATES AS FOLLOWS:

- (1). CLAIMANT'S COMPLAINT HAS NOT BEEN GIVEN DUE DILIGENCE OF PROCESS THAT BECAUSE RESPONDENT'S FAILURE TO PROVIDE WITNESS SIGNATURE(S) OF LEGAL MAIL ISSUANCE TO CLAIMANT AS WELL DATE OF RECEIPT.
- (2). CLAIMANT COMPLAINT OF FAILURE TO FOLLOW PROPER PROPERTY PROCEDURE PERSUANT TO (AD-AR 401) CONFISCATION SEE ATTACHED UNDETESTED BY RESPONDENT(S) SHOULD HAVE REQUIRED CLAIMANT AN HEARING SOLELY.
- (3). AT LEAST THE ITEMS OF PROPERTY OFFICIALS CONFISCATED UPON ORDER BY DEPUTY WARDEN CURTIS MEINZER ON OCT. 2nd, 2012 A DEFINED DESCRIPTION OF "LOTS OF NUISANCE CONTRABAND", THAT CONSISTED OF APPROVED CANTEEN PURCHASED SOAP BAR, NEWS PAPERS, THAT A HEARING MUST HAVE BEEN CONVENED UPON SEE ATTACHED.

RESPECTFULLY SUBMITTED

*James Charles Fudge*  
JAMES C. FUDGE 78875

*James Charles Fudge* 78875  
JAMES C. FUDGE 78875  
V.S.M. UNIT / CBS-512  
P.O. BOX 400  
GRADY, ARK  
71644

CERTIFICATE OF SERVICE

I, JAMES C. FUDGE, PRO SE CLAIMANT - APPELLANT CERTIFY THAT  
(5) FIVE PHOTO COPIES OF THE ABOVE HEREIN APPEAL WAS SUBMITTED  
TO HIS INSTITUTIONS OFFICIAL LEGAL MAIL COLLECTIONS STAFF TO BE  
POSTED "OUT-GOING" U.S. MAIL ADDRESSED TO ARKANSAS STATE CLAIMS  
COMMISSION 101 EAST CAPITOL AVE STE #410 LITTLE ROCK, ARK,  
72201 - 3823 WITH REQUEST FOR RETURN-DATED-RECEIVED MARK  
THIS 14<sup>TH</sup> DAY OF AUGUST 2014

SINCERELY,

*James C. Fudge* 78875  
JAMES C. FUDGE 78875

EXECUTED THIS 08/14 /2014

OMIS#: 2012-10-010



ADMINISTRATIVE REGULATION  
STATE OF ARKANSAS  
DEPARTMENT OF CORRECTION

Fusion Center # \_\_\_\_\_

Section Number 005/409	Page Number 005-3 of 409-9 of 9
Board of Correction Approval Date: 9/27/87	
Supersedes: 005/409 Form	Date: 12/19/85
Attorney General Review Date: 6/11/87	Date filed sacy. of state 10/02/87

005  Incident Report  
409  Use of Force

SUBJECT: Reporting of Incidents-005; Use of Force 409

Varner

UNIT/DIVISION

REPORTING EMPLOYEE: \_\_\_\_\_  
 RANK: \_\_\_\_\_ K9 Sgt \_\_\_\_\_ SHIFT ASSIGNMENT: \_\_\_\_\_  
 DATE: 10/02/2012 TIME: 7:00pm LOCATION: \_\_\_\_\_  
 INMATE(s) INVOLVED: N/A  
 (Names and ADC Numbers)

EMPLOYEE(s) INVOLVED: Sgt. B. Hayes, Sgt. D. Reap, Sgt. K. Glover, Sgt. J. Lawrence, and Sgt. B. Cockrell/"K9 Miss"  
 (Names, Titles, Rank)

INMATE(s) PRESENT: N/A  
 (Names and ADC Numbers)

EMPLOYEE(s) PRESENT: Sgt. B. Hayes, Sgt. D. Reap, Sgt. K. Glover, Sgt. J. Lawrence, and Sgt. B. Cockrell/"K9 Miss"  
 (Names, Titles, Rank)

OTHERS PRESENT/INVOLVED: (Specify) N/A  
 (Names and Addresses)

EXTENT OF INJURY TO INMATE(s): N/A

TREATMENT AFFORDED TO INMATE(s): N/A

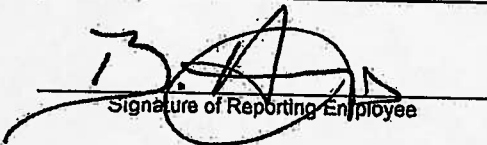
EXTENT OF INJURIES TO OFFICER(s): N/A

TREATMENT AFFORDED TO OFFICER(s): N/A

STATEMENT OF FACTS (If force used, state type and explain:

On the 2nd day of Oct. 2012 at approx. 7:00pm the K9 Team consisting of Sgt. B. Hayes, Sgt. D. Reap, Sgt. K. Glover, Sgt. J. Lawrence, and Sgt. B. Cockrell/"K9 Missi" conducted a search of the Varner Unit VSM 6 cellblock per A/W Meinzer. The following cells were searched and alerts/finds are as follow.  
Cell 636: No Alert (lots of Nuisance Contraband).  
Cell 639: No Alert.

END OF STATEMENT .....

  
Signature of Reporting Employee

10/02/2012  
Date

  
Signature of Supervisor

10-2-12  
Date

Reviewed by (Signature) Warden/Center  
Supervisor/Administrator

Date

RECOMMENDATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed by (Signature) Assistant Director

Date

RECOMMENDATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewed by (Signature) Director

Date

DISTRIBUTION OF COPIES

Original to Assistant Director, then to Director, and then to Inmate Institutional File.  
Assistant Director  
Warden/Center Supervisor/Administrator

INCR: db

(Revised)

**STATE OF ARKANSAS – DEPARTMENT OF CORRECTION  
CONFISCATED FORM – AREA OR PERSON**

F-401

(Check One)  Inmate  Visitor  Staff  Area

Unit: \_\_\_\_\_ Building or Area: \_\_\_\_\_ Barracks \_\_\_\_\_ Cell \_\_\_\_\_

Date and Time of Search: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ : pm : am

Officer(s) Conducting Search: (Print) \_\_\_\_\_

Officer(s) Conducting Search: (Signature) \_\_\_\_\_

Inmate Name: \_\_\_\_\_ ADC #: \_\_\_\_\_

Articles Seized (description and number of items):

Number	Description

Reason Seized:  Excess/Unauthorized Property  Disciplinary/Criminal Evidence  
Other \_\_\_\_\_

Inmate Signature: \_\_\_\_\_ ( ) Refused to Sign

Area/Shift/Supervisor: (Signature) \_\_\_\_\_

Disposition of Contraband: \_\_\_\_\_

Copy Delivered to Inmate: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Delivered By: (Signature) \_\_\_\_\_

Disciplinary Written: ( ) No ( ) Yes By: \_\_\_\_\_

Articles may be mailed to: \_\_\_\_\_

Inmate authorizes deduction of postage from pen store account:  
( ) No ( ) Yes Inmate Signature: \_\_\_\_\_

**To be completed by UPCO**

Destruction Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

UPCO: (Signature) \_\_\_\_\_ Witnessing Staff: (Signature) \_\_\_\_\_

Distribution – White-Remains with Contraband; Yellow- Institutional File; Pink-Inmate Copy  
(To Be Printed On NCR Paper)