

Plaintiff's Name CARL L. Higgins  
 Inmate No. J-06160  
 Address CC1, P.O. Box 1902  
Tehachapi, CA 93581

**FILED**

MAR 16 2009

CLERK, U.S. DISTRICT COURT  
 EASTERN DISTRICT OF CALIFORNIA  
 BY *[Signature]* DEPUTY CLERK

IN THE UNITED STATES DISTRICT COURT  
 FOR THE EASTERN DISTRICT OF CALIFORNIA

CARL L. Higgins

(Name of Plaintiff)

1:07 cv-00934-LJO-GSA-PC

(Case Number)

vs.

AMENDED COMPLAINT

J. Medina, Miranda, Williams,  
Lozano, Jose, Reynoso, Sanchez,  
Chapman, Rhodes, Robinson

(Names of all Defendants)

Civil Rights Act, 42 U.S.C. § 1983

I. Previous Lawsuits (list all other previous or pending lawsuits on back of this form):

A. Have you brought any other lawsuits while a prisoner? Yes    No ✓

Doc. 24 Att. 1

(PC) Higgins v. Medina et al

B. If your answer to A is yes, how many?

Describe previous or pending lawsuits in the space below.

(If more than one, use back of paper to continue outlining all lawsuits.)

1. Parties to previous lawsuit:

Plaintiff \_\_\_\_\_

Defendants \_\_\_\_\_

2. Court (if Federal Court, give name of District; if State Court, give name of County)

4. Assigned Judge \_\_\_\_\_

**RECEIVED**  
 MAR 16 2009  
 CLERK, U.S. DISTRICT COURT  
 EASTERN DISTRICT OF CALIFORNIA  
 BY *[Signature]* DEPUTY CLERK

3. Court Case Number \_\_\_\_\_

Disposition (For example: Was the case dismissed? Was it appealed? Is it still pending?)

6. Filing date (approx.) \_\_\_\_\_

7. Disposition date (approx.) \_\_\_\_\_

(1)

A. Is there an inmate appeal or administrative remedy process available at your institution?

Yes  No

B. Have you filed an appeal or grievance concerning ALL of the facts contained in this complaint?

Yes  No

If your answer is no, explain why not \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Is the process completed? *SEE ATTACHED PAGES*

Yes \_\_\_\_\_ If your answer is yes, briefly explain what happened at each level.  
\_\_\_\_\_  
\_\_\_\_\_

No \_\_\_\_\_ If your answer is no, explain why not.  
\_\_\_\_\_  
\_\_\_\_\_

**NOTICE:** Pursuant to the Prison Litigation Reform Act of 1995, “[n]o action shall be brought with respect to prison conditions under [42 U.S.C. § 1983], or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted.” 42 U.S.C. § 1997e(a). If there is an inmate appeal or administrative remedy process available at your institution, you may not file an action under Section 1983, or any other federal law, until you have first completed (exhausted) the process available at your institution. You are required to complete (exhaust) the inmate appeal or administrative remedy process before filing suit, regardless of the relief offered by the process. Booth v. Churner, 532 U.S. 731, 741 (2001); McKinney v. Carey, 311 F.3d 1198, 1999 (9th Cir. 2002). Even if you are seeking only money damages and the inmate appeal or administrative remedy process does not provide money, you must exhaust the process before filing suit. Booth, 532 U.S. at 734.

### III. Defendants

(In Item A below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item B for the names, positions and places of employment of any additional defendants.)

A. Defendant J. Medina is employed as corrections officer  
at Kern Valley State Prison

(2)

D. WILLIAMS CORRECTIONAL OFFICER AT KERN VALLEY STATE PRISON, M. LOZANO CORRECTIONAL OFFICER AT KERN VALLEY STATE PRISON, C-JOSE SERGEANT WITHIN DEPARTMENT OF CORRECTION, F.J. REYESO LIEUTENANT WITHIN DEPARTMENT OF CORRECTION AT KERN VALLEY STATE PRISON, D. ZANCHI CAPT. WITHIN DEPARTMENT OF CORRECTION AT CCI, D. CHAPMAN SUPERVISOR COUNSELOR WITHIN DEPARTMENT OF CORRECTION AT CCI, D. CHARLES COUNSELOR WITHIN DEPARTMENT OF CORRECTION AT CCI, M. ROBINSON CORRECTIONAL OFFICER AT CCI.

IV. Statement of Claim

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach extra sheets if necessary.)

SEE SUPPORTING DOCUMENTS IN THESE OF

V. Relief.

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

SEE SUPPORTING DOCUMENTS IN THESE OF

I declare under penalty of perjury that the foregoing is true and correct.

Date March 3, 2009

Signature of Plaintiff

(revised 2/10/2006)

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3 Points And Authority

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7 (I.)

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14 THE PLAINTIFF FILE AN AMENDED  
15 COMPLAINT ON THE ISSUE ON THE  
16 (BMU) PILOT PROGRAM THAT WAS NOT  
17 REGISTER WITH CALIFORNIA OFFICE OF  
18 ADMINISTRATIVE LAW DURING THE TIME THE  
19 PLAINTIFF WAS PLACED IN PROGRAM, SEE  
20 PAGES 11 TO 17.

21  
22  
23  
24 (II.)

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26  
27 THE PLAINTIFF FILE AN AMENDED COMPLAINT ON  
28 THE ISSUE OF "CONSPIRACY ACT" SEE  
29 PAGES 18 TO 24.

30  
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32  
33 (III.)

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36  
37 THE PLAINTIFF WOULD LIKE TO PROCEED IN  
38 THE ORIGINAL ACCESSES FORCE CLAIMS  
39 SEE PAGES 25 TO 59.

1 THE PLAINTIFF OPT TO FILE AN  
2 AMENDED COMPLAINT ON THE ISSUE  
3 ON THE NAMED DEFENDANT~~S~~<sup>¶</sup> PLACED THE  
4 PLAINTIFF IN THE (Bmu) PILOT PROGRAM  
5 ILLEGALLY AND CAUSED PUNITIVE DAMAGES  
6 BY PUNISHING THE PLAINTIFF OF 60 DAYS OF  
7 NO YARD, OF THE 90 DAYS PLACEMENT IN  
8 THE PROGRAM AND COMPENSATORY DAMAGES BY  
9 TAKING AWAY HIS PERSONAL PROPERTY DESTROYING IT,  
10 AND "CCI" CLEARLY VIOLATED THE PLAINTIFF  
11 U.S. CONSTITUTIONAL RIGHTS UNDER STATE AND  
12 FEDERAL LAW, DUE PROCESS VIOLATION OF (CDCR) LAW.  
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19 THE PLAINTIFF IS ALSO WILLING TO  
20 PROCEED IN THE ORIGINAL EXCESSIVE  
21 FORCE CLAIM'S AGAINST DEFENDANTS  
22 MEDINA, MIRANDA, WILLIAMS, LOZANO, JOSE, AND  
23 REYNOSO.

THE RESULT OF THE NEGATIVE IMPLICATION  
JURISPRUDENCE IS NOT TO REQUIRED THE PRISON  
OFFICIALS TO FOLLOW THE NEGATIVE IMPLICATION DRAWN  
FROM THE REGULATIONS, BUT INSTEAD TO ATTACH  
PROCEDURAL PROTECTIONS THAT MAYBE OF QUITE  
A DIFFERENT NATURE.

HERE, THE PRISON OWN DISCIPLINARY RULES SEVERELY  
CABIN THE AUTHORITY OF PRISON OFFICIALS TO  
IMPOSE THIS KIND OF PUNISHMENT ON THE  
PLAINTIFF MR. HIGGINS, THEY PROVIDED AMONG  
OTHER THINGS.

SUMMERY, THE PLAINTIFF SERVED AN 15 MONTH  
SHUABLE OFFENSE FOR "RVR" BATTERY ON STAFF THAT  
HE DID NOT COMMIT, NOTED IN THE AMENDED A TRUE FACT  
THAT THE PLAINTIFF WAS PUNISHED EVEN MORE BY BEING  
PLACED IN A ILLEGALLY BMU PROGRAM IN WHICH LED TO  
LOST OF YARD FOR 60 DAYS AND PERSONAL PROPERTY  
IN A 90 DAYS PROGRAM BASED ON "CCI" MADE UP  
BMU PROGRAM POLICY THAT WAS NOT "REGISTER" WITH  
CALIFORNIA OFFICE OF ADMINISTRATIVE LAW.

## I. JURISDICTION

(1) This court has jurisdiction over Plaintiff Federal claims pursuant to 28 U.S.C. 1331 and 1333(a)(3).

## II. VENUE

(2) The Eastern District of California is an appropriate venue under 28 U.S.C. 1331(b)(2) because a substantial part of the event or omissions giving rise to the claims occurred in this district.

## III. PARTIES

(3) Plaintiff MR. CARL L. Higgins is currently an inmate in the 4A fac. at Tehachapi California Correctional Institution.

Defendant D.Chapman is A CORRECTIONAL SUPERVISING counselor Within (CCI) DEPARTMENT OF CORRECTIONS. D.Chapman is RESPONSIBLE FOR PLACING ME THE PLAINTIFF IN A (BMU) PILOT PROGRAM THAT WAS NOT "REGISTERED" WITH CAL OFFICE OF ADMINISTRATIVE LAW. SHE IS BEING SUED IN HER INDIVIDUAL CAPACITY.

(5) Defendant D.Rhode is A CORRECTIONAL Counselor Within (CCI) DEPARTMENT OF CORRECTIONS. D.Rhode is RESPONSIBLE FOR PLACING ME THE PLAINTIFF IN A (BMU) PILOT PROGRAM THAT WAS NOT "REGISTERED" WITH CAL OFFICE OF ADMINISTRATIVE LAW. SHE IS BEING SUED IN HER INDIVIDUAL CAPACITY.

(6) Defendant M.Robinson is A CORRECTIONAL OFFICER Within (CCI) DEPARTMENT OF CORRECTIONS. M.Robinson is RESPONSIBLE FOR DESTROYING THE PLAINTIFF PERSONAL PROPERTY THAT HE WANTED TO SEND HOME, SINCE HE COULD NOT HAVE IT IN THE ILLEGALLY NON REGISTERED BMU PILOT PROGRAM THE PLAINTIFF WAS PLACED IN. HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

(7) DEFENDANT D.Zanchi is A CORRECTIONAL CAPT. WITHIN (CCI) DEPARTMENT OF CORRECTIONS. D.Zanchi is RESPONSIBLE FOR PLACING THE PLAINTIFF IN A (BMU) PILOT PROGRAM THAT WAS NOT "REGISTERED" WITH CAL OFFICE OF ADMINISTRATIVE LAW. HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

(8.) DEFENDANT J.MEDINA IS A CORRECTIONAL OFFICER WITHIN (KVSP) DEPARTMENT OF CORRECTIONS. J.MEDINA IS AN (B-RECREATION) BUILDING AT THE TIME. HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

(9.) DEFENDANT G.MIRANDA IS A CORRECTIONAL OFFICER WITHIN (KVSP) DEPARTMENT OF CORRECTIONS. G.MIRANDA IS AN (B6 FLR #1) FOR FAC B-YARD, AND IN 5 BUILDING AT THE TIME. HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

(10.) DEFENDANT M.LOZANO IS A CORRECTIONAL OFFICER WITHIN (KVSP) DEPARTMENT OF CORRECTIONS. M.LOZANO IS AN (B SIE #4), AND IN 5 BUILDING AT THE TIME. HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

(11.) DEFENDANT D.WILLIAMS IS A CORRECTIONAL OFFICER WITHIN (KVSP) DEPARTMENT OF CORRECTIONS. D.WILLIAMS IS AN (B-YARD #2), AND IN 5 BUILDING AT THE TIME. HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

1 (12) Defendant C-Jose is A CORRECTIONAL SERgeant  
2 Within (KVSP) DEPARTMENT OF CORRECTIONAL. C-JOSE  
3 IS RESPONSIBLE FOR SUPERVISING IN THE INSTITUTIONAL.  
4 HIS OFFICER'S CONDUCT IN mainTAINING INMATES  
5 SAFETY AND SECURITY. HE IS BEING SUED IN  
6 HIS INDIVIDUAL CAPACITY.

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9 (13) DEFENDANT F.J.REYNOSO IS A CORRECTIONAL  
10 LIEUTENANT WITHIN THE DEPARTMENT OF CORRECTIONS.  
11 F.J.REYNOSO IS RESPONSIBLE FOR SUPERVISING IN  
12 THE (KVSP) INSTITUTION, HIS OFFICER'S CONDUCT  
13 IN mainTAINING INMATES SAFETY AND SECURITY.  
14 HE IS BEING SUED IN HIS INDIVIDUAL CAPACITY.

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(10)

1 THE COMMITTEE ACTION AT "CCI", CAPT-D.  
2 ZANCHIO, D. CHAPMAN CC-II, D. RHODE CC-I  
3 CLEARLY VIOLATED MY CONSTITUTIONAL RIGHTS  
4 DUE PROCESS OF LAW BY SUBJECTING ME TO  
5 A UNDERGROUND REGULATION BMU AND CAUSE  
6 MY PROPERTY TO BE SENT HOME IN WHICH  
7 WAS BMU POLICY, NOW AT THE TIME "CCI"  
8 COMMITTEE DEFENDANT'S CAPT. D. ZANCHIO CC-II  
9 D. CHAPMAN, CC-I D. RHODE PLACED ME INTO THIS  
10 BMU PROGRAM ON JANUARY 31, 2007, THE  
11 BMU PROGRAM OPERATIONAL PROCEDURE #154 WAS  
12 A ILLEGAL PROGRAM AND NOT REGISTERED WITH  
13 CAL, OFFICE OF ADMINISTRATIVE LAW WHO REGULATES  
14 STATE LAW, ALSO THE UNDERGROUND REGULATION  
15 BMU OPERATIONAL PROCEDURE #154 IS NOT IN  
16 THE (CDCR) TITLE 15 CCR. (SEE EXHIBIT = W-1 TO 3)  
17 ACCORDING 5058. RULES AND REGULATIONS,  
18 ADMINISTRATION OF PRISONS, THE DIRECTOR MAY  
19 PRESCRIBE AND AMEND RULES AND REGULATIONS



FOR THE Administration OF THE Prison  
BUT THE RULES AND REGULATIONS SHALL BE  
PROMULGATED AND FILED PURSUANT TO CHAPTER  
3.5, COMMENCING WITH SECTION 11340, PART 1  
OF DIVISION 3 OF TITLE 2 OF THE GOVERNMENT  
CODE, ANY PURPOSE PILOT PROGRAM IMPLEMENT MUST  
BE FILED WITH THE SECRETARY OF STATE, HERE  
THE BMU OPERATIONAL PROCEDURE #154 PILOT PROGRAM  
WAS NOT CLEARED BY THE SECRETARY OF STATE NOR  
REGISTERED WITH CAL, OFFICE OF ADMINISTRATIVE LAW  
DOING THE TIME THE DEFENDANT IS CAPT. D. ZANCHI  
CCII D. CHAPMAN, CCII D. RHODE PLACED THE PLAINTIFF  
MR. CARL L. HIGGINS INTO THIS BMU OPERATIONAL PROCEDURE  
#154 PILOT PROGRAM ON 1-31-07.

IT IS CLEARLY THAT THE PLAINTIFF WAS  
PLACED IN AN ILLEGAL BMU OPERATIONAL PROCEDURE  
#154 PILOT PROGRAM THAT WAS NOT REGISTERED WITH  
CAL, OFFICE OF ADMINISTRATIVE LAW.

THE PLAINTIFF CONTENDS HIS DUE PROCESS  
WAS VIOLATED BY THE DEFENDANT'S CAPT.  
D.ZANCHI, CCII D.CHAPMAN, CCII D.RHODE  
BY IMPOSE ADVERSE CONDITION OF CONFINEMENT  
INTO THE OPERATIONAL PROCEDURE #154 BMU  
PILOT PROGRAM, SECTION VI, NUMBER 2.

BRIEF SUMMARY, PLAINTIFF WAS FOUND GUILTY  
FOR RVR OF 12-21-05 BATTERY ON A PEACE  
OFFICER FOR AN OFFENSE WHICH A DETERMINATE  
TERM OF CONFINEMENT HAD BEEN ACCESSED, NOW  
THE "KVSP" RULE VIOLATION RESULTING IN AN SHU  
TERM OF 12 MONTH EXP, AGGRAVATING FACTORS ADDITIONAL  
3 MONTH GUILTY FINDING OF PASS RVR BATTERY ON STAFF  
2-19-00, TOTAL SHU TERM OF 15 MONTH, LOSS OF YARD  
FOR 30 DAYS AND 30 DAYS CANTEEN, AND RETURN  
TO GENERAL POPULATION, COMPLETION OF MEED DATE.  
SEE EXHIBIT V-2

AFTER RELEASE FROM SHU, THE DEFENDANT  
CAPT. D.ZANCHIG CCII D.CHAPMAN & D.RHODE CCII,  
WAS CLEARLY WRONG FOR PLACING THE PLAINTIFF  
IN THE BMU PILOT PROGRAM OP#154, now  
ACCORDING TO THE AN MEMORANDUM OP#154  
BMU PAMPHLET, IT STATES A PRISONER MUST  
BE FREE FROM 115 DISCIPLINARY ACTION OF A  
PERIOD OF 6 MONTH, MEANING IF YOU RECEIVE  
TWO 115 RVR WITHIN THE 6 MONTH, YOU ARE  
ELIGIBLE FOR PLACEMENT INTO THE "BMU"  
PROGRAM. I WAS PLACED IN THE BMU PROGRAM  
FOR RVR 12-21-05 FOR WHICH AGGRAVATE OF RVR  
2-19-00. THE ISSUE IS I WAS PLACED IN  
AN ILLEGAL "OP" #154 BMU PILOT PROGRAM  
THAT WAS NOT REGISTERED WITH CAL OFFICE  
OF ADMINISTRATION LAW, BY BEING PLACED INTO  
THE PROGRAM I LOSS "PERSONAL PROPERTY" SUCH  
AS "T.V. - FAMILY PHOTOS - OBITUARY OF MY DECEASE".

Father And Grandmother - Cosmetic  
Thermal Top/Bot Tom, no YARD FOR The FIRST  
60 DAYs OF PLACEMENT, I SERVED 90 DAYs  
THAT IS REQUIRED. SEE EXHIBIT = W-1-3, J X-1.

Plaintiff contends that Defendant M. Robison  
R&R Correctional STAFF of Personal PROPERTY, WAS  
Clearly In Violation For CONFISCATED AND  
DESTROYING my Personal PROPERTY, noted the  
Bmu Program AT CCI, Does not Allow  
INMATE To HAVE Their Personal PROPERTY, They  
give you The OPPORTUNITY To send YOUR PROPERTY  
Home OR IF you Do not HAVE money on THE  
Books OF YOUR ACCOUNT They CONFISCATE IT AND  
DESTROY IT, The Plaintiff AT The Time Had  
Money THAT WAS not SPENT, now The Plaintiff  
Appeared IN Front OF Defendant M. Robison c/o,  
on 2-6-07 And The Defendant ASK The Plaintiff  
IF HE HAD Money IN HIS TRUST ACCOUNT, IF not  
The Defendant STATED He will DESTROY my PROPERTY,  
The Plaintiff Mr. Higgins Explained To Defendant

M. Robinson of THE FACT THAT HE  
Had Money THAT WAS<sup>10</sup> SPENT And IT WAS  
Held up In CCI canteen, \$18.00 WAS PLACED  
BACK INTO my TRUST ACCOUNT now From  
JANUARY 2007 AND FEBRUARY 2007 I HAD money  
In CCI Institution, Defendant M. Robinson Had  
CONFISCATED AND DESTROYED my PROPERTY ON 2-6-07,  
I ALSO INFORMED DEFENDANT M. ROBINSON THAT I  
HAD MANILLA ENVELOPE WITH POSTED STAMPS, SO I CAN  
SEND HOME MY "OBITUARY" AND FAMILY PHOTOS BEFORE  
HE CONFISCATE AND DESTROYED THEM HE STATED NO.  
SEE EXHIBIT X-1 TO 1B

NOW ACCORDING TO (CDCR) TITLE 15. SECTION 3147, (A)(8),  
WITHHELD OR DISALLOWED MAIL, IN WHICH MY PROPERTY  
WAS COMING FROM 4B FACILITY CCI SHU YARD  
IN THREE BIG BOXES, WITHHELD BY DEFENDANT M. ROBINSON  
C/O R&R 4A FACILITY YARD, MY DISALLOWED PROPERTY THAT  
WAS CONFISCATED AND DESTROYED SHOULD HAVE BEEN HELD  
FOR 15 DAYS PENDING RESULT FROM APPEAL ACTION  
OF HIGHER RANK.

DEFENDANT Mr. Robinson DESTRUCTION

RESULTING IN EMPLOYEE NEGLIGENCE OF  
PLAINTIFF PROPERTY, NOT ONLY DID DEFENDANT  
M. ROBINSON VIOLATED (CDCR) TITLE 15 3193(B). 3391.(A)  
3147. (A)(B), OF RULES AND REGULATION POLICY  
BUT VIOLATED MY DUE PROCESS GOVERN THE  
CALIFORNIA DEPARTMENT OF CORRECTION, AND  
VIOLATED MY U.S. CONSTITUTIONAL RIGHTS.  
SEE EXHIBIT X-1 TO 12

THE PLAINTIFF PLACEMENT INTO THE  
ILLEGAL OP #154 BMU PILOT PROGRAM FOR  
90 DAYS WITH LOSS OF PERSONAL PROPERTY  
AND FIRST 60 DAYS LOSS OF YARD, RESULTING  
IN A DUE PROCESS VIOLATION OF MY U.S.-  
CONSTITUTION OF LAW, BASED ON THE "BMU" NOT  
BEING REGISTER, THIS ISSUE IS EXISTENCE OF A  
PROTECTED LIBERTY INTEREST SUFFICIENT TO INVOKE  
DUE PROCESS CLAUSE.

Summary on Incident

1  
2  
3 THE PLAINTIFF CONTENDS AFTER THE DEFENDANT'S  
4 medina, miranda, williams, lozano USED PEPPER SPRAY  
5 ON THE PLAINTIFF MR. HIGGINS WHILE ON THE FLOOR  
6 AND HANDCUFFED, DROPPED THE PLAINTIFF ON HIS  
7 STOMACH ON THE FLOOR ON HIS CHIN AND BLOOD  
8 EVERY WHERE, THE PLAINTIFF ALLEGES THAT THE  
9 DEFENDANT SGT. JOSE WAS ON THE SCENE  
10 AND HAD CONTACTED LT. REYNOSO, AND THEY  
11 AND HAD CONTACTED LT. REYNOSO, AND THEY  
12 PUT TOGETHER A PLAN TO COVER UP THE  
13 WRONG DOING HERE, BY DOING MORE DAMAGES  
14 BY DROPPING THE PLAINTIFF ON THE FACILITY  
15 BY DROPPING THE PLAINTIFF ON THE FLOOR  
16 BY DROPPING THE PLAINTIFF ON THE FLOOR  
17 BY DROPPING THE PLAINTIFF ON THE FLOOR  
18 BY DROPPING THE PLAINTIFF ON THE FLOOR  
19 BY DROPPING THE PLAINTIFF ON THE FLOOR  
20 ON THE PLAINTIFF.

21 "CONSPIRACY ACT"  
22 "CONSPIRACY ACT"  
23 THE ABOVE NAMED DEFENDANT'S WORKED  
24 TOGETHER TO COVER UP A ACCESSIVE FORCE  
25 ACT AND THEN COMMITTED A CONSPIRACY  
26 ACT BY CHARGING THE PLAINTIFF ON BATTERY  
27 ON STAFF ON medina IN WHICH WAS FALSE.



FOR THE STATE TO codify Prison management  
Procedure In The Interest OF Uniform Treatment,  
Prison Administrations need BE concerned with  
THE SAFETY OF THE STAFF And INMATE Population,  
Ensuring THAT welfare often leads Prison Administration  
TO CURB THE DISCRETION OF STAFF on The front  
line who DAILY ENCOUNTER PRISONERS HOSTILE TO  
THE AUTHORITARIAN STRUCTURE OF THE PRISON  
Environment.

SUPERVISOR MAYBE Held LIABLE FOR THE  
CONSTITUTIONAL VIOLATIONS OF SUBORDINATES  
IF THE SUPERVISOR PARTICIPATED IN DIRECTED  
VIOLATIONS AND FAILED TO ACT TO PREVENT THEM-

LT. REYNOSO AND SGT. JOSE, HAD ADVANCE NOTICE  
OF THE USE OF FORCE ACTS AND WITNESS IT,  
NOTED, LT. REYNOSO WAS ALREADY ON THE FACILITY YARD WHEN HIS  
CORRECTIONAL OFFICER'S SLAMMED THE PLAINTIFF ON THE GROUND,  
AND THAT WHEN HE CAME AND THREATEN THE PLAINTIFF.

THE PLAINTIFF contends THAT THE NAMED DEFENDANT'S CORRECTIONAL OFFICERS AND LT. REYNOSO, SGT. JOSE, ALL PARTICIPATING IN THE FALSIFICATION OF (RVR) RULE VIOLATION REPORTS.

THE EVIDENCE THAT THE PLAINTIFF PRESENTED IN THE ORIGINAL COMPLAINT, HOW INJURIES OCCURRED DON'T FIT WITH THE DEFENDANT'S REPORTS, IT SHOWS THAT THE DEFENDANT'S ARE TRYING TO COVER UP A USE OF FORCE ACTS, BY CHANGING THEIR STORY TO COVER UP WHAT REALLY HAPPEN, ONCE THE DEFENDANT'S MEDINA AND MIRANDA, BUSTED THE PLAINTIFF CHIN INSIDE OF THE PLAINTIFF CELL, THE DEFENDANT'S HAD TO NOTIFY THEIR SUPERVISOR, AND THE SUPERVISOR HAD THE CHANCE TO CORRECT THE CORRECTIONAL OFFICER ACTING UNDER THE COLOR OF LAW, BUT INSTEAD THE LT. REYNOSO AND SGT. JOSE HELPED THEM OUT BY COACHING THEM WITH THEIR REPORTS BY GIVING THEM WRONGFULLY ADVICE AND IDEAS TO PLAIN A BATTERY CHARGE ON THE PLAINTIFF.

THE FACT THAT SGT. JOSE WAS ON  
The Scene when The Incident occurred  
And Talked To The CORRECTIONAL OFFICERS  
who is named, And Then notified LT. Reynoso,  
noted, LT. Reynoso WAS Already waiting for me  
on The yard when I was Being ESCORTED  
And Informed me Doing The THREAT, That  
I WAS Being SET UP on BATTERY charges  
ON A PEACE OFFICER

noted, The Very next DAY 12-22-05, LT. Reynoso  
PLAYED A MAJOR Role By ACTING AS ACTIVE  
CAPT. TO RETAIN THE PLAINTIFF Pending Review By  
ICC, AND SET UP A INTERVIEW WITH RECORDED  
CAMERIA, TO GET A STATEMENT OUT OF ME IN WHICH  
THE PLAINTIFF FAIL TO GIVE, A 114(D) REVIEW IS  
A LOCK UP ORDER WHEN INMATE DEEMED A THREAT  
TO THE SAFETY AND SECURITY OF THE INSTITUTION.

(SEE EXHIBIT = ~~EX-2~~  
~~[REDACTED]~~ Amended Complaint)

only A CAPTAIN can RETAIN A INMATE 114(B)  
LOCK UP ORDER.

THE ACTION mentioned herein Does not  
only VIOLATE THE RULES, REGULATIONS AND POLICIES  
THAT govern THE CALIFORNIA DEPARTMENT OF  
CORRECTIONS, BUT ALSO VIOLATE my U.S. CONSTITUTIONAL  
RIGHTS UNFAIRNESS OR CORRUPTION OF OFFICERS  
IN CIVIL OR CRIMINAL CASES IN STATE COURT  
AS IN VIOLATIONS OF THE FOURTEENTH AMENDMENT  
THIS IS CLEARLY AN ACT OF CRUELTY BY  
PRISON CORRECTIONAL STAFF, A PRIME EXAMPLE  
OF FAILURE TO SUPERVISE AND REGULATE THE  
RESPONSIBILITY OF EMPLOYEES, THE PRISON OFFICIALS  
REASONABLY SHOULD HAVE KNOWN THAT A VIOLATION  
HAD OCCURRED, AND HAD THE DUTY AND RESPONSIBILITY  
TO TAKE CORRECTIVE OR PREVENTATIVE MEASUREMENTS  
BUT INSTEAD THE PRISON OFFICIALS CHOOSE TO  
CONDONE SUCH VIOLATIONS!

1 THE DEFENDANT LT. REYNOSO AND SGT. JOSE  
2 WERE SUPPOSE TO FOLLOW (CDCR) PROCEDURE OF  
3 TITLE 15 3268.1 (B)(2)(3), BOTH DEFENDANT SHOULD HAVE  
4 PROPERLY INVESTIGATE THE INCIDENT SCENE OF THE  
5 PLAINTIFF, BY FIRST QUESTIONING ALL NAMED DEFENDANTS  
6 AS TO WHY WAS THE PLAINTIFF CELL DOOR OPEN AND  
7 CORRECTIONAL OFFICER'S CONDUCTING A BODY SEARCH OF THE  
8 PLAINTIFF, WHILE ALL OTHER INMATE CELL DOORS CLOSE DURING  
9 THE BODY SEARCH, WHY PHOTOS OF THE PLAINTIFF  
10 BLOOD INSIDE THE CELL, THE UNIT TIER, THE FACILITY  
11 YARD, WHY WAS PHOTOS OF ACCESS FORCE OF INMATE  
12 OR PLAINTIFF HIGGINS WAS NOT TAKING OF A CRIME SCENE  
13 INCIDENT.

14  
15  
16 THE PLAINTIFF CONTENTS BASED ON THAT THEIR  
17 WAS NO INVESTIGATION DONE BY (CDCR) PROCEDURE, BY  
18 SUPERVISOR LT. REYNOSO AND SGT. JOSE, THIS GIVE  
19 BOTH OF THEM MOTIVES TO ACT UNDER THE  
20 COLOR OF LAW AND COVER UP THE EXCESSIVE  
21 FORCE ACTS AND PUT TOGETHER A FALSE REPORT  
22 AND SET UP FALSE ALLEGATION OF BATTERY ON  
23 PEACE OFFICER, A CRIME SCENE INVESTIGATION IS  
24 REQUIRED ACCORDING TO STATE AND FEDERAL LAW, SO  
25 MAYBE EVIDENCE MAY BE USED IN THE COURT OF LAW.  
26

(23)

1 When EVER An Incident Involving EXCESSIVE  
 2 Force, Involving INJURIES OR BATTERY on STAFF,  
 3 IT is (CDCR) PROCEDURE FOR THE INSTITUTION STAFF  
 4 TO Push The "Panic" BUTTON To ALERT OTHER  
 5 OFFICERS THAT An INCIDENT HAD OCCURRED, noted,  
 6 FOR THE RECORD, THE PLAINTIFF CONTENDS THAT  
 7 IT WAS A CONSPIRACY DONE HERE BY THE  
 8 LT. REYNOSO, SGT. JOSE, MEDINA, MIRANDA, BY SETTING  
 9 THE PLAINTIFF MR. HIGGINS ON BATTERY CHARGES  
 10 THAT SUPPOSELY OCCURRED ON THE FAC, YARD AT  
 11 (KVSP), now IT is Policy That THE OFFICERS  
 12 Push The "Panic" BUTTON To ALERT OTHER OFFICERS  
 13 THAT A BATTERY ON STAFF HAD OCCURRED, Did  
 14 KNOW OTHER CORRECTIONAL OFFICER RESPOND TO  
 15 A BATTERY ON STAFF THAT OCCURRED ON THE  
 16 YARD BUT LT. REYNOSO, noted, LT. REYNOSO WAS  
 17 ALREADY ON THE YARD WAITING ON ME, noted,  
 18 DID NO OTHER CORRECTIONAL OFFICER'S IN THE  
 19 BUILDING RUN TO A BATTERY ON STAFF, MEDINA  
 20 OR MIRANDA NEVER PUSH THE "PANIC" BUTTON TO  
 21 ALERT OTHER STAFF THAT THE PLAINTIFF MR. HIGGINS  
 22 AGGULTED "MEDINA" IN HIS "SHOULDER" PRIOR TO  
 23 BEING ESCORTED TO MEDICAL OR PROGRAM OFFICE,  
 24 IT NOWHERE IN THEIR REPORT WHO PUSH THE PANIC BUTTON,  
 25 SO THEREFORE AN CONSPIRACY HAD BEEN COMMITTED.

ON DEC. 21, 2005 AT APPROXIMATELY 0920 HOURS,  
THE CORRECTIONAL STAFF WAS CONDUCTING AN MAJOR  
INSPECTION OF ALL OF FAC B YARD. ON THIS MORNING  
BUILDING 5 HOUSING UNIT WAS BEING SEARCHED. (NOTED)  
THAT BEFORE MY ASSIGNED CELL WAS APPROACHED FOR  
A BODY INSPECTION, ALL THE OTHER CELLS WAS BEING  
CONDUCTED CLOSED AND THE CORRECTIONAL OFFICER'S WAS  
INSPECTING OTHER INMATES BODY THREW THE GLASS WINDOW  
AND INMATES HANDED CORRECTIONAL OFFICER'S BOXER'S -  
SOCKS - T-SHIRTS - SHOWER SHOES OR TENNIS SHOES, THREW  
THE CELL DOOR TRAY SLOTS.

ONCE THE PLAINTIFF MR. HIGGINS CELL WAS APPROACHED  
B-5 206. THE DEFENDANT'S M. GIBB % WAS WORKING  
B-5 CONTROL BOTH, CORRECTIONAL OFFICERS D. WILLIAMS AND  
M. LOAZANO APPROACHED PETITIONER ASSIGN CELL B-5 206.  
THE DEFENDANT M. GIBB % OPEN CELL B-5 206 FROM  
THE B-5 CONTROL BOTH, MYSELF PLAINTIFF MR. HIGGINS  
AND MY CELLMATE, WE WAS ORDER TO STRIP OUT, MYSELF  
PLAINTIFF MR. HIGGINS WAS THE FIRST TO APPROACH  
THE CELL DOOR I THEN REMOVED MY SOCKS - T-SHIRT - GYM  
SHORTS - BOXERS - TENNIS SHOES, AND HANDED THEM TO DEFENDANT  
D. WILLIAMS, ONCE MY CLOTHES WERE INSPECTED, I WAS

ORDER TO PUT my CLOTHES BACK on once THEY  
 WAS Handed TO me OF THE COMPLETION OF my BODY  
 SEARCH. PLAINTIFF WAS THEN ORDER TO TURN AROUND  
 AND CUFF UP, AFTER I WAS CUFFED. I WAS TOLD TO STEP  
 BACK TO THE BACK WINDOW CELL, SO THAT my  
 CELLMATE COULD PERFORM THE SAME PROCEDURE. ONCE  
 MY CELLMATE COMPLETED THE PROCEDURE, HE WAS ALSO PLACE  
 IN HANDCUFFS. SHORTLY AFTER, THE TWO DEFENDANT CORRECTIONAL  
 OFFICERS D.WILLIAMS AND M.LOAZANO IN WHICH WHO WAS  
 ASSIGNED TO SEARCH OUR CELL, BEGIN TO PEPPER SPRAY  
 MY CELLMATE AND ATTACK HIM "AS THEY YELLED"  
 "GET DOWN". ACTIVATING THEIR ALARMS. PLAINTIFF MR.HIGGINS  
 IMMEDIATELY GOT DOWN ON THE FLOOR IN HANDS CUFFS  
 ON MY STOMACH. AS CORRECTIONAL OFFICERS D.WILLIAMS  
 AND M.LOAZANO CONTINUE TO SPRAY THE CHEMICAL AGENT  
 INTO THE CELL. OFFICER D.WILLIAMS AND M.LOAZANO AND  
 OFFICER J.PALMER GRABBED MY CELLMATE AND DRAGGED  
 HIM OUT OF THE CELL. IN HANDSCUFFS ON HIS  
 STOMACH. NOW DEFENDANT J.MEDINA AND G.MIRANDA  
 GRABBED ME PLAINTIFF MR.HIGGINS BY THE T-SHIRT  
 AND BOTH LEGS, IN WHICH THEY CROSSED THEM, PULLING  
 MY FEET UP TO MY BACK, IN HOG TIED POSITION.  
 DEFENDANT G.MIRANDA AND J.MEDINA DROPPED ME ON MY  
 STOMACH. "MY CHIN HIT THE FLOOR" AND "BUSTED OPEN".

Blood STARTED TO LEAK Inside THE CELL,  
THE DEFENDANT G.Miranda And J.Medina  
DRAGGED ME OUT THE CELL. THE Two CORRECTIONAL  
OFFICERS THEN REMOVE my Tennis shoes - socks  
And gym shorts. THEN PLACE me on my FEET.  
AS I STARTED TO WALK Down THE TIER, A unIdentify  
CORRECTIONER OFFICER YELLED OUT Loud, "HE'S BLEEDING"  
"HE'S BLEEDING". AS I WAS ESCORDED OFF THE UPPER  
TIER, THROUGH THE "A SECTION OF Building 5 DOOR.

THE PLAINTIFF MR.Higgins And DEFENDANT G.Miranda  
And J.Medina ESCORTED me PASS An "MEDICAL STAFF"  
"KUSH" THE Two CORRECTIONAL OFFICER AS WELL AS  
The SERGEANT C.JOSE REFUSE TO LET THE PLAINTIFF  
MR.Higgins BE TREATED on THE SCENE FOR my  
INJURIES.

AS THE PLAINTIFF WAS BEING ESCORTED TOWARDS THE

PROGRAM OFFICE AND MEDICAL OFFICE, MIDWAY  
THEIR, I WAS THEN SLAMMED TO THE GROUND  
REAL HARD AND DRAGGED CAUSING ME TO SUFFER  
INJURIES OF ABRASION TO BOTH OF MY "KNEES" AND  
THE TOP OF MY "FOOT". WHICH CAUSE EXTREME  
PAIN FROM "BUSTED CHIN" AND EXPOSURE TO THE CHEMICAL  
AGENT FROM THE INCIDENT IN B-5 CELL 206. ONCE I  
WAS ON THE GROUND. DEFENDANT LIEUTENANT F.J. REYNOSO  
STOOD OVER ME AND STATED YOU EVER TOUCH MY C/O, I  
WILL MAKE SURE YOUR BRAINS BE ALL OVER THIS FIELD.  
I WAS THEN ESCORTED TO THE MEDICAL CLINIC.

FOR THE RECORD, ONCE THE PLAINTIFF MR. HIGGINS HAD  
BEEN SLAMMED ON THE GROUND ON THE YARD AND  
THREATENED BY DEFENDANT F.J. REYNOSO THE LIEUTENANT,  
THIS WAS MERELY AN ATTEMPT TO COVER UP CRIMINAL  
ACT THAT HAD BEEN CARRIED OUT BY HIS SUBORDINATES.

THE DEFENDANT LIEUTENANT F.J. REYNOSO AND SERGEANT  
C. JOSE FAIL TO CALL "IGI" TO COME INVESTIGATE

THE SCENE OF B-5 CELL 206, FOR TO TAKE  
PICTURE'S OF THE BLOOD INSIDE THE CELL AND  
ON THE TIER, THAT COME FROM PLAINTIFF MR.HIGGINS  
BUSTED CHIN.

"MEDICAL REPORT OF INJURY"

PLAINTIFF SUFFER A "BUSTED CHIN" IN WHICH HE  
RECEIVED "SEVERAL STICHES" AND INJURIES TO  
BOTH OF PLAINTIFF "KNEES" AND "TOP FOOT".

SEE ATTACHED EXHIBITS ON DEPARTMENT OF  
CORRECTIONAL MEDICAL STAFF REPORT.

( MEDICAL REPORT  
EXHIBIT = B-1 )

EXHAUSTION.

THE PETITIONER MR.HIGGINS FILED A 602 INMATE APPEAL  
FORM ON 12-28-05 THAT THE GRIEVANCE AROSE  
IN A TIMELY MANNER, TO THE APPEAL COORDINATOR

(29)

AT (KVSP). THE APPEALS COORDINATOR FAILURE  
TO RESPOND BACK TO THE PLAINTIFF MR. HIGGINS  
IN A REASONABLE TIME FRAME REGARDING THE  
EMERGENCY MISCONDUCT 602 STAFF COMPLAINT APPEAL.  
  
ONCE THE PLAINTIFF MR. HIGGINS WAS NOT GETTING  
ANY TYPE OF RESPONSE BACK FROM THE APPEALS  
COORDINATOR WITH A LOG NUMBER. THE PLAINTIFF  
TOOK IT AS DUE TO THE NATURE OF THE STAFF  
COMPLAINT 602 APPEAL AND THE PARTIES WHO WAS  
IMPLEMENTED IN THE MISCONDUCT 602 STAFF  
COMPLAINT APPEAL, THE APPEALS COORDINATOR DID NOT  
WANT TO FILE AND LOG IT SO I COULD NOT EXHAUST  
MY REMEDIES OR THE (ADSEG BUILDING & CORRECTIONAL OFFICERS)  
GOT RID OF THE MISCONDUCT 602 COMPLAINT FORM.  
THE PLAINTIFF ALSO WROTE A REQUEST FOR INTERVIEW TO APPEALS COORDINATOR ON  
1-24-06 REGARDING THE "602" PLAINTIFF FILE ON 12-28-05, NO RESPONSE AT ALL.  
  
THE PLAINTIFF MR. HIGGINS THEN WRITTEN A LETTER "2-6-06"  
TO HIS FAMILY AND EXPLAINED MY SITUATION TO THEM  
STATING THAT I AM NOT GETTING ANY COOPERATION

REGARDING THE INMATE APPEAL 602 I SUBMITTED  
TO THE APPEALS COORDINATOR ON 12-28-05.

THE PLAINTIFF MR. HIGGINS INFORMED HIS FAMILY  
TO WRITE A LETTER TO THE OFFICE OF INTERNAL  
AFFAIRS AND SEND THEM A COPY OF THE INMATE  
APPEAL 602 I SUBMITTED DATED 12-28-05.

(SEE ATTACHED EXHIBITS OF FAMILY LETTER TO INTERNAL AFFAIRS  
602 COMPLAINT FORM  
EXHIBIT = C-2-3)

THE PLAINTIFF MR. HIGGINS, FAMILY WRITTEN THE  
LETTER AND SENT A COPY OF THE APPEAL 602  
TO THE INTERNAL AFFAIRS ON THE DATE OF 2-12-06.

THE OFFICE OF INTERNAL AFFAIRS FORWARD  
THE LETTER AND MY 602 COMPLAINT FORM  
DATED 12-28-05 TO THE APPEALS COORDINATOR  
AT "KVSP" ON THE DATE OF 4-12-06.  
(SEE ATTACHED  
EXHIBITS = C-1-3)

APPEALS COORDINATOR AT (KVSP), ON THE DATE  
OF 5-11-06<sup>✓</sup> FORWARD THE PLAINTIFF MR.HIGGINS

A RE: SCREENING STATING THERE AS BEEN A GREAT  
TIME LAPSE WHEN ACTION OCCURRED, AND IF I  
WOULD LIKE TO PURSUE MY MATTER FURTHER,  
I MUST SUBMIT AN EXPLANATION AND SUPPORTING  
DOCUMENTATION EXPLAINING WHY I DIDN'T NOT  
FILE APPEAL TIMELY.

(SEE ATTACHED  
EXHIBIT = D-1)

THE PLAINTIFF MR.HIGGINS RESPONDED TO THE  
APPEALS COORDINATOR SCREEN OUT APPEAL ON  
THE DATE OF 5-18-05, ON A CDC INMATE  
REQUEST FOR INTERVIEW, EXPLAINING THE SITUATION  
THAT I HAD RESPONDED WITH A COMPLAINT  
FORM OF 602 ON THE DATE OF 12-28-05  
ON MISCONDUCT ON THE CORRECTIONAL OFFICERS.  
(SEE EXHIBIT = E-1-2)

ON 6-15-06 THE APPEALS COORDINATOR B-GRICEWICH (KVSP)

FORWARD THE PLAINTIFF MR.HIGGINS A, RE:SCREEN  
OUT, INFORMING ME THAT THE MATTER WILL  
BE REFERRED TO THE HIRING AUTHORITY.  
(SEE EXHIBIT=F.I.)

And THERE HAS BEEN TOO GREAT A TIME LAPSE,  
And THAT THE PLAINTIFF MR.HIGGINS MUST  
SUBMIT AN EXPLANATION AND SUPPORTING DOCUMENTS  
EXPLAINING WHY I COULDN'T FILE MY APPEAL TIMELY.  
(SEE EXHIBIT=F.I.)

ON 6-18-06 THE PLAINTIFF SUBMITTED A LETTER  
TO THE APPEALS COORDINATOR WITH AN EXPLANATION TELLING  
THE APPEALS COORDINATOR THAT I MR.HIGGINS FILED  
A COMPLETED ORIGINAL INMATE APPEAL 602 FORM VIA  
INSTITUTIONAL MAIL, AND IT SHOULD BE NOTED THAT  
STAFF AT "KVSP" ARE NOT REQUIRED TO RELINQUISH  
602 RECEIPTS UPON RECEIVING A INMATE APPEAL TO  
BE PLACE INTO INSTITUTIONAL MAIL, I ASSERT OF MY  
OWN FREE VIOLATION UNDER THE PENALTY OF PERJURY.  
THAT I CARL HIGGINS #J.06160 PLACED AND DIRECTED A  
INMATE APPEAL TO THE APPEALS COORDINATOR DATED 12-28-05  
SIGNED BY MY MARK INTO INSTITUTIONAL MAIL.

FURTHER MORE, PURSUANT TO KERN VALLEY STATE PRISON  
AND ADSEG NORTH PROCEDURE. I STATE AFTER AN  
APPEAL LEAVE MY HANDS I HAVE NO CONTROLL OVER  
ITS WHEREABOUTS, UPON NOT RECEIVING A RESPONSE  
FROM APPEALS COORDINATOR "THE PLAINTIFF WAITED PATIENTLY",  
I MR. HIGGINS CAME CONCERNED THAT THE NATURE OF  
MY COMPLAINT MOTIVATED A STAFF MEMBER(S) TO  
HINDER OR EXCLUDE MY APPEAL, THAN I CONTACTED  
MY FAMILY AND THE COURTS AND ADVISED THEM  
OF THIS SITUATION. I TAKE THIS MATTER VERY  
SERIOUSLY AND BELIEVE THAT THE INACTION REGARDING  
MY APPEAL IS A DILATORY TACTIC TO HINDER MY  
APPEAL. HOW EVER I DO CONCEDE THAT NO SYSTEM  
IS PERFECT THUS I REQUEST THAT YOUR OFFICE  
PROCEED WITH MY APPEAL AND TREAT ATTACHED  
APPEAL AS ORIGINAL. THANK YOU. DATED 6-18-06  
SIGNATURE. (SEE EXHIBIT 9-1)

ON JULY 12, 2006 APPEALS COORDINATOR B. GRICE WHICH  
FORWARD THE PLAINTIFF ANOTHER RE-SCREEN OUT  
STATING THE SAME THING, AND STATED MY APPEAL  
WOULD NOT BE PROCESS. (SEE EXHIBIT H-1)

THE PLAINTIFF contend THAT According  
To THE CALIFORNIA STATE LAW, Time Limits  
On An Administration Appeal For challenges  
To Employee misconduct For which THE  
Prisoner HAS one YEAR From THE DATE  
OF THE misconduct.

THE PLAINTIFF MR. Higgins CAN PROVE THAT  
THE ADMINISTRATIVE Appeal "KVSP" HAVE FAILED  
THE PLAINTIFF. (SEE EXHIBIT = I-1)

On JAN. 23, 2006 THE U.S. DISTRICT COURT, CENTRAL  
DISTRICT, STAMPED A LETTER I WROTE TO THEM  
"PORTION" OF THE ADMINISTRATION AT "KVSP" IS NOT  
PUTTING my 602 COMPLAINT FORM DATE 12-28-05  
THRU THE APPEAL POLICY. (SEE EXHIBIT = I-1)

THE PLAINTIFF HAS FILED ADMINISTRATIVE  
602 INMATE COMPLAINT FORM ON 12-28-05  
ON THE MATTERS DESCRIBED IN THIS COMPLAINT  
TO EXHAUST ALL AVAILABLE REMEDIES, AND THE  
PLAINTIFF HAVE DOCUMENTS TO PROVE FUTILITY THAT  
HE FILED IN A TIMELY MATTER. ONCE A COMPLAINT  
LEAVES A PLAINTIFF HANDS, AND PLACE INTO INSTITUTIONAL  
MAIL, I HAVE NO CONTROL OVER IT WHEREABOUT, UPON  
NOT RECEIVING A RESPONSE FROM "KVSP" OFFICE OF  
APPEALS COORDINATOR.

I WOULD LIKE ALL LISTED DEFENDANT'S PLACE UNDER  
INVESTIGATION, DUE TO THEIR UNPROFESSIONAL DEALINGS  
WITH AN INMATE, AND CREATING FALSE STATEMENTS  
AND REPORTS TOWARDS AN INMATE. ALSO BY USING  
EXCESSIVE FORCE WITH MALICIOUS INTENT, WHEN NONE  
WAS NEEDED. THE PLAINTIFF WAS ALREADY SECURED IN

RESTRAINTS ON THE FLOOR FACE DOWN, THE ACTS  
AND OMISSION DESCRIBED HEREIN VIOLATED PLAINTIFF  
RIGHTS UNDER THE CONSTITUTION AND LAW OF THE  
UNITED STATES, BY THE DEFENDANT'S DROPPING THE  
PLAINTIFF ON HIS "BUSTED CHIN" AND PEPPER SPRAYED  
HIM WITH CHEMICAL AGENTS IN HIS FACE AREA, AND  
CONTINUE TO DO CORRUPTED NATURE BY SLAMMING THE  
PLAINTIFF MR. HIGGINS ON THE GROUND AS WELL AS DRAGGED  
AND THE RESULTS OF DEFENDANT'S CAUSING THE PLAINTIFF  
TO SUFFER MORE INJURIES TO BOTH OF KNEES AND TOP  
FOOT, LEAVING THE PLAINTIFF IN MAJOR PAIN AND  
LIFE TIME SCARS. (SEE EXHIBITS-B-1)  
THE DEFENDANT'S TRULY ABUSED THEIR AUTHORITY.

#### V. CAUSE OF ACTION

PLAINTIFF SUPPORT THE FOLLOWING CLAIMS BY  
REFERENCE TO THE PREVIOUS PARAGRAPHS OF  
THIS COMPLAINT.

Summary

Medical REPORT OF INJURIES OF THE  
DEFENDANT J.medina, ALLEGES THAT HE  
SUFFER mild PAIN TO HIS RIGHT SHOULDER, ALLEGELY  
CAUSE BY THE PLAINTIFF MR.HIGGINS.  
(SEE EXHIBIT=J.1)

DEFENDANT J.medina ALLEGELY STATING IN  
HIS REPORT THAT THE PLAINTIFF MR.HIGGINS  
BROKE GRASP OF HIM AND PARTNER G.miranda  
AND TURN TO MY LEFT AND PLAINTIFF USE HIS  
HEAD IN A FORWARD MOTION TO STRIKE

J.medina RIGHT SHOULDER.  
(SEE EXHIBIT=K-1-2)

THE PLAINTIFF contend THAT THE DEFENDANT  
J.medina <sup>is</sup> "FALSE". AND THE BATTERY TO  
HIS SHOULDER NEVER HAPPEN, IT'S ALL A  
COVER UP FOR WHAT THE TWO DEFENDANT'S  
J.medina And G.miranda DID TO THE PLAINTIFF.

Court I.

DEFENDANT's c/o J.MEDINA And c/o G.MIRANDA  
VIOLATED THE PLAINTIFF FOURTEENTH AMENDMENT  
RIGHT UNDER THE UNITED STATES CONSTITUTION  
By c/o J.MEDINA And c/o G.MIRANDA WRITING  
FALSE RULES VIOLATION REPORTS AND INTENTIONALLY  
INTRODUCE FALSE INFORMATION IN WHICH CAUSE  
ANY WRITTEN STATEMENTS IN A INCIDENT  
REPORT MAINTAINED BY THE DEPARTMENT OF  
CORRECTIONS TO BE A FALSE DOCUMENT BY  
REASON OF SUCH ACTION. (EXHIBIT K-1-2, L-1-2)

- (1) THE DEFENDANT'S c/o J.MEDINA AND c/o G.MIRANDA  
FAILURE TO TAKE CORRECTIVE MEASUREMENT'S  
IN THERE ACTIONS BY NOT REPORTING  
THE TRUTH, THE FACTS THAT c/o J.MEDINA  
AND c/o G.MIRANDA GRABBED THE PLAINTIFF  
MR.HIGGINS BY THE T-SHIRT AND BOTH LEGS  
WHILE THE PLAINTIFF WAS FACE DOWN AND HANDCUFFED  
AND THE TWO DEFENDANT'S CROSSED MY LEGS, PULLING  
MY FEET UP TO MY BACK IN A HOG TIED POSITION

And Dropped me on my stomach, my  
"Chin Hit The Floor And Busted open".  
(SEE EXHIBIT=A-1-H, B-1)

(2.) The DEFENDANTS c/o J.Medina And G.Miranda, FAILED  
TO ADD THE ABOVE INCIDENT INTO THEIR REPORTS,  
NOTED THAT BOTH OF THE CORRECTIONAL OFFICERS  
NEVER "DOCUMENTED" HOW THE PLAINTIFF MR.HIGGINS  
SUFFER A BUSTED chin INJURY AND THE CAUSE  
OF THEIR ACTION RESULTING IN THE PLAINTIFF  
HAD TO GET "STICHES PUT INTO HIS chin".  
(EXHIBITS=K-1-2, L-1-2)

(3.) THE DEFENDANT'S c/o J.Medina And G.Miranda,  
KNOWS IN THEIR HEARTS THEY WAS WRONG AND  
THEY MESSED UP REAL BAD OF WHAT THEY HAVE  
DONE TO THE PLAINTIFF, SO TO MAKE THE  
MATTER WORSE, c/o J.Medina And G.Miranda  
SLAMMED THE PLAINTIFF MR.HIGGINS TO THE  
GROUND ON THE WAY TO THE PROGRAM AND  
MEDICAL OFFICE, CAUSING THE PLAINTIFF TO  
SUFFER EXTREME PAIN FROM MY "BUSTED CHIN"  
AND EXPOSURE TO THE CHEMICAL AGENT.

not To mention THE FACT THAT  
BOTH % DRAGGED ME AND CAUSE ME  
THE PLAINTIFF TO RECEIEVE MORE INJURIES  
TO BOTH oF THE PLAINTIFF "Knees" And  
TOP OF PLAINTIFF FOOT. (SEE EXHIBIT = B-1)  
NOTED THAT I WAS TREATEN BY THE  
LT. F.J. REYNOSO, THE DEFENDANT WORDS WAS  
IF YOU EVER TOUCH my OFFICER, I will  
MAKE SURE YOUR BRAINS ARE ALL OVER THIS  
FIELD. THATS when THE PLAINTIFF KNEW  
HE was BEING SET UP BY THE CORRUPTION  
OF THE DEFENDANTS. THE DEFENDANT'S  
J-MEDINA AND G-MIRANDA ALLEGES THAT  
I THE PLAINTIFF MR. HIGGINS WAS SAYING  
Fucking cops And I BEGIN TO THROWING  
my HEAD From LEFT TO Right while SAYING  
STUPID MOTHER FUCKERS, THE DEFENDANT'S  
J-MEDINA AND G-MIRANDA ALLEGES THAT They

GAVE THE PLAINTIFF MR.Higgins A DIRECT ORDER TO STOP moving HIS HEAD SIDE TO SIDE. J.medina ALLEGES THE PLAINTIFF TURN TO HIS LEFT WITH THE PLAINTIFF IN A FORWARD MOTION TO STRIKE THE DEFENDANT RIGHT "SHOULDER". J.medina MAINTAINED GRASP OF THE PLAINTIFF MR.Higgins WITH HIS LEFT ARM WITH J.medina RIGHT HAND AND USED my LEFT HAND TO PUSH AGAINST Higgins CHEST AREA TO PUSH THE PLAINTIFF MR.Higgins DOWN TO THE ground IN A PRONE POSITION.

(SEE ATTACHED EXHIBITS=K-1-2  
OF DEFENDANT J.medina INCIDENT REPORT ON THE DEFENDANT STORY)

DEFENDANT C/o G.miranda ALLEGES THAT THE PLAINTIFF MR.Higgins, WAS YELLING FUCKEN COPS, YOU STUPID MOTHERFUCKERS, WHILE HIS PARTNER ALLEGES GAVE THE PLAINTIFF TO STOP, THE PLAINTIFF ORDER FOR SPUN AROUND TO C/o J.medina FACE, AND ALLEGES THAT THE PLAINTIFF MR.Higgins BREAKING

THE DEFENDANT G.MIRANDA GRASP OF HIS  
RIGHT ARM, THE PLAINTIFF USED HIS HEAD  
IN A FORWARD MOTION TO STRIKE C/O MEDINA  
ON HIS SHOULDER AREA. C/O G.MIRANDA TOOK  
HOLD OF PLAINTIFF HIGGINS SHIRT BY THE  
COLLAR AREA BEHIND PLAINTIFF NECK, C/O G.MIRANDA  
USED HIS LEFT HAND AND RIGHT HAND TO GRAB  
THE RIGHT ARM TO PULL THE PLAINTIFF DOWN  
TO THE GROUND. AND I GOT DOWN IN A  
PRONE POSITION. (SEE EXHIBIT = L-1-2  
DEFENDANT G.MIRANDA INCIDENT REPORT OF STORY)

(1) FOR THE RECORD, BOTH DEFENDANTS C/O J.MEDINA  
AND G.MIRANDA NEVER MENTION IN THEIR REPORTS  
ON HOW THE PLAINTIFF MR.HIGGINS RECEIVED HIS  
INJURIES.

(2) BOTH THE DEFENDANTS C/O J.MEDINA AND G.MIRANDA  
REPORTS IS NOT MAKING ANY TYPE OF SENSE AS  
TO HOW I WAS FORSE TO THE GROUND, C/O J.MEDINA

STATED IN HIS REPORT THAT HE USE  
HIS RIGHT AND LEFT HAND TO PUS~~T~~ AGAINST  
THE PLAINTIFF MR.HIGGINS CHEST AREA TO  
Push THE PLAINTIFF Down To THE ground  
IN A PRONE POSITION. C/O G.MIRANDA REPORTS  
STATES THAT G.MIRANDA TOOK THE PLAINTIFF  
MR.HIGGINS SHIRT BY THE COLLAR AREA BEHIND THE  
NECK WITH G.MIRANDA LEFT HAND AND USED HIS  
RIGHT HAND TO GRAB THE RIGHT ARM OF THE  
PLAINTIFF TO PULL ME DOWN TO THE ground.  
THE PLAINTIFF GOT DOWN IN A PRONE POSITION.  
(SEE EXHIBIT = K-1-2, L-1-2)  
miranda And medina  
Reports

COUNT II.

DEFENDANT'S C/O D.WILLIAMS AND M.LOZANO  
IS IN DIRECT VIOLATION OF THE PERFORMANCE  
OF ADMINISTRATIVE FUNCTION. FURTHER MORE, THEY  
VIOLATED THE PLAINTIFF FOURTEENTH AMENDMENT

Right under THE UNITED STATES constitution,  
By c/o D.williams And M.lozano writing FALSE  
RULES VIOLATION REPORTS And INTENTIONALLY  
INTRODUCE FALSE INFORMATION IN WHICH CAUSE  
ANY WRITTEN STATEMENTS IN A INCIDENT  
REPORT MAINTAINED BY THE DEPARTMENT OF  
CORRECTIONS TO BE A FALSE DOCUMENT BY  
REASON OF SUCH ACTION.

(1) THE DEFENDANT'S c/o D.williams AND c/o M.lozano  
FAILURE TO TAKE CORRECTIVE MEASUREMENT'S IN  
THEIR ACTIONS BY NOT REPORTING THE TRUTH,  
BOTH CORRECTIONAL OFFICERS D.williams AND  
M.lozano KNOWS THAT THE FACT OF THE  
TRUE MATTERS THAT THE PLAINTIFF MR.HIGGINS  
WAS THE FIRST TO BE STRIPPED OUT FOR A  
UNCLOTHED BODY SEARCH, AND THAT I COMPLY

with Their ORDER, DEFENDANT c/o D.williams  
PLACED me THE PLAINTIFF mR.Higgins IN HANDS-  
cUFFS And Then ORDER me TO STEP TO THE  
BACK oF THE cell wall, And Then BOTH c/o  
D.williams And m.Lozano ORDER my CELLMATE  
"woods" TO STRIP OUT And PERFORM THE  
SAME PROCEDURE, once INMATE Woods completed  
THE PROCEDURE, HE WAS PLACE IN HANDSCUFFS,  
SHORTLY AFTER THAT THE TWO DEFENDANT c/o  
williams And Lozano BEGIN TO PEPPER SPRAY my  
cellie INMATE Woods And ATTACKING HIM, AS  
"THEY yelled" "GET Down" ACTIVATING THEIR ALARMS.  
PLAINTIFF mR.Higgins IMMEDIATELY GOT Down ON  
THE FLOOR IN HANDS CUFFS ON my STOMACH.  
AS BOTH OFFICERS c/o D.williams And m.Lozano  
CONTINUE TO SPRAY THE CHEMICAL AGENT INTO  
THE cell. Than OFFICER D.williams And m.Lozano  
And c/o J. Palmer grabbed my CELLMATE And DRAGGED

Him OUT OF THE cell IN Handcuffs  
on His STomach.

THE DEFENDANT'S c/o D.williams And m.lozano,

REPORTS ARE cloned, AS IF They ALL COACHED  
ONE ANOTHER AT SOME Point.

(SEE EXHIBIT=m-1-2-jn-1-2)  
Incident Report  
D.williams &  
m.lozano

THE DEFENDANTS c/o D.williams And m.lozano

ALLEGES THAT THE PLAINTIFF MR.Higgins WERE

Involved In RESISTING STAFF ORDER IN RESULTING

IN THE USE OF There "O.C. Pepper SPRAY".

(SEE EXHIBIT=m-1-2-jn-1-2)  
Incident Report  
D.williams And  
m.lozano

- 1.) The DEFENDANT'S c/o D.william And m.lozano never mention How The PLAINTIFF RECEIVED A "BUSTED chin" IN Their REPORTS.

(2) THE DEFENDANT IS c/o D.WILLIAMS AND M.LOZANO,  
And THE PLAINTIFF MR.HIGGINS KNOWS THE  
PROCEDURE OF A MASS SEARCH OF THE "KVSP"  
AS WELL AS (CDCR), DUE TO POLICY OF A MASS  
SEARCH, ALL INMATES WAS SUPPOSE TO BE BODY  
SEARCH WITH THE INMATE'S DOOR CLOSE, AND  
HAND THE CORRECTIONAL OFFICERS CLOTHES THREW  
THE INMATES CELLS TRAY SLOTS.

NOTED FOR THE RECORD, THAT ALL THE INMATES  
HOUSE IN FAC B 5 UNIT, WAS STRIPPED OUT  
AND SEARCHED WITH THEIR CELL DOORS CLOSES  
AS PROCEDURE.

THE PLAINTIFF CELL 206 B5, WAS THE ONLY  
CELL DOOR OPEN, WHILE CONDUCTING A MASS  
SEARCH, THE DEFENDANTS WAS IN VIOLATION  
THERE.

3.) THE PLAINTIFF WAS NOT "CHARGED" WITH A RESISTING STAFF, THE DEFENDANTS CHARGED THE PLAINTIFF cellmate "Woods" WITH RESISTING STAFF. (SEE EXHIBIT = R-1)

(4.) THE PLAINTIFF WAS charged with BATTERY ON PEACE OFFICER, WHICH OCCURRED OUTSIDE OF BUILDING ALLEGEDLY. (SEE EXHIBIT = S-1)

(5.) THE PLAINTIFF HAD A RECORDED PHONE TO ALLOW THE PLAINTIFF MR. HIGGINS TO HEAR WOODS A INMATE ON THE OTHER END OF THE PHONE DOING A 115 HEARING, NOW INMATE WOODS STATED THAT HE WAS THE FIRST INMATE TO BE ESCORTED TO MEDICAL OFFICE, AND OUT OF KNOW WHERE HE WAS SLAMMED TO THE GROUND FOR NO REASON. (SEE EXHIBIT = U-1-6)

Count IV.

DEFENDANT sGT. C.JOSE VIOLATED THE  
PLAINTIFF FOURTEETH AMENDMENT RIGHT  
UNDER THE UNITED STATES CONSTITUTION,  
BY SGT. C.JOSE WRITING FALSE RULE VIOLATION  
REPORTS AND INTENTIONALLY INTRODUCE  
FALSE INFORMATION IN WHICH CAUSE ANY  
WRITTEN STATEMENT IN A INCIDENT  
REPORT MAINTAINED BY THE DEPARTMENT  
OF CORRECTIONS TO BE A FALSE DOCUMENT BY  
REASON OF SUCH ACTION. (EXHIBIT = P.1)

DEFENDANT SGT. C.JOSE FAILURE TO PROPERLY  
SUPERVISE AND TAKE RESPONSIBILITY TO CORRECT  
THE CORRUPTION ON THE INVOLVEMENT OF HIS  
CORRECTIONAL OFFICERS J.MEDINA - G.MIRANDA -  
D.WILLIAMS - M.LOZANO - ██████████ HAVE DONE TO  
THE PLAINTIFF MR.HIGGINS BY WRONGFULLY

And Malicious with DESIRE OF Inflicting  
Pain To The PLAINTIFF MR.Higgins. This  
WAS CLEARLY An ACT OF CRUELTY BY  
CORRECTIONAL OFFICERS. THE PLAINTIFF MR.Higgins  
SUFFER A "BUSTED chin Inwhich causes The PLAINTIFF  
TO RECIEVE SEVERAL STICHES" And SUFFER LIFE  
"Permanent" SCARS on The PLAINTIFF "chin"  
"Both of His Knees" And "Top Foot". The  
DEFENDANT Sgt. C.JOSE choose To condone And  
COVER UP such CONSTITUTIONAL VIOLATIONS OF This  
MATTER HERE, This is ALSO FAILURE on Sgt.  
C.JOSE To SUPERVISE And REGULATE THE "USE OF FORCE"  
Policy, IT clearly shows THAT The DEFENDANT'S  
% J.medina - G.miranda - D.williams - M.lozano - ██████████  
ARE ACTING UNDER THE COLOR OF STATE LAW.

(SEE EXHIBIT = B-1)  
INJURY

- (1) THE DEFENDANT Sgt.C.JOSE FAILURE To  
Add How The PLAINTIFF INJURIES OCCURRED

In His Report, IT SHOWS THAT  
All THE DEFENDANT'S who IS LISTED  
In Their Individual CAPACITY, INFlicted  
THESE "INJURIES" on THE PLAINTIFF And  
All CAME TOGETHER To clone THE INCIDENT  
REPORT'S BUT MADE THE mISTAKE OF Adding  
To How THE INJURIES OCCURRED on THE PLAINTIFF.  
(EXHIBIT = P-1)

SEE EXHIBITS = K-1-2-J L-1-2-J M-1-2-J N-1-2-J O-1-2-J Q-1-2-  
ON ALL THE DEFENDANT'S INCIDENT REPORTS  
NOT Adding on How THE PLAINTIFF RECEIVED  
THE INJURIES.

Count VI.

DEFENDANT LT. F.J. REYNOSO VIOLATED THE  
PLAINTIFF FOURTEENTH AMENDMENT RIGHT UNDER  
THE UNITED STATES CONSTITUTION, BY LT. F.J. REYNOSO  
THREATENING THE PLAINTIFF MR. HIGGINS WHILE  
HE WAS SLAMMED ON THE GROUND AND DRAGGED  
BY THE CORRECTIONAL OFFICERS J.MEDINA AND  
G.MIRANDA ON THE FAC-B YARD, WHILE BEING  
ESCORTED HALF WAY TO MEDICAL OFFICE. THE  
LT. REYNOSO WORDS WERE IF YOU TOUCH MY  
OFFICER I WILL MAKE SURE YOUR BRAINS  
ARE ALL OVER THIS FIELD, AND ONCE THE PLAINTIFF  
HEARD THEM WORDS FROM LT. REYNOSO, THE PLAINTIFF  
KNEW THAT HE WAS BEING SET UP, AND THE  
DEFENDANT'S WAS PLANTING FALSE BATTERY CHARGES  
ON HIM, THIS WAS ALL A COVER UP FOR WHAT  
THE DEFENDANT'S & J.MEDINA AND G.MIRANDA  
HAD DONE TO THE PLAINTIFF IN THE

cell 206 B5, By Dropping The PLAINTIFF  
On His "BUSTED Chin".

DEFENDANT LT. REYNOSO FAILURE TO PROPERLY

SUPERVISE AND TAKE RESPONSIBILITY TO CORRECT

THE CORRUPTION ON THE INVOLVEMENT FOR HIS

PART THAT HE PLAYED BY THREATEN A INMATE

PLAINTIFF MR. HIGGINS, COACHING IN THE SGT.

C. JOSE, CORRECTIONAL OFFICERS J. MEDINA - G. MIRANDA -

D. WILLIAMS - M. LOZANO - ██████████, BY TEACHING THEM

ON HOW TO CLONE THE REPORTS AND COVER UP

CRIMINAL ACTIVITIES THAT WAS BROUGHT ON TO

THE PLAINTIFF MR. HIGGINS LIFE TIME SCARS INJURIES.

THIS IS CLEARLY AN ACT OF CRUELTY BY ALL THE

DEFENDANT'S LISTED IN THEIR INDIVIDUAL CAPACITY,

THE PLAINTIFF MR. HIGGINS DUE PROCESS WAS

VIOLATED HERE UNDER THE 8TH AMENDMENT AND

14TH AMENDMENT RIGHTS OF THE UNITED STATES

CONSTITUTION BY SUCH ACTION MENTION HERE ABOVE.

THE DEFENDANT LT. F.J. REYNOSO FAILURE TO SUPERVISE THE SGT. AND C/O'S AND REGULATE THE "USE OF FORCE" POLICY, IT IS CLEARLY THAT ALL THE DEFENDANT'S LISTED WAS IN FACT ACTING UNDER THE COLOR OF STATE LAW.

THE DEFENDANT F.J. REYNOSO, LT. FAILURE TO INVESTIGATE THIS MATTER OF HOW THE INJURIES OCCURRED ON THE PLAINTIFF MR. HIGGINS, TAKE PICTURES OF THE BLOOD OF THE BS 206 CELL AND THE TOP TIER. TAKE PICTURE OF THE FAC B.YARD OF BLOOD FROM THE PLAINTIFF MR. HIGGINS,

NOTED FOR THE RECORD,

IN THE DEFENDANT'S REPORTS, THEY DOCUMENTED ON HOW "FALSE" INJURIES OCCURRED ON THEIR FELLOW OFFICER J.MEDINA. BUT NEVER DOCUMENTED THE PLAINTIFF MR. HIGGINS INJURIES ON HOW THEY OCCURRED. IT SHOWS CORRUPTION WAS DONE HERE TO THE PLAINTIFF MR. HIGGINS.

FOR THE RECORD, THE PLAINTIFF MR.HIGGINS  
WAS FOUND GUILTY OF THE ACCUSED  
COMPLAINT (BATTERY ON A PEACE OFFICER)  
ON C/O J.MEDINA. BY LT. HAMLIN ON 5-31-06  
(SEE ATTACHED EXHIBIT = U-1-6)

NOTED THAT NO REFERRAL WAS MADE TO  
KERN COUNTY DISTRICT ATTORNEY FROM THIS  
FALSE COMPLAINT, AGAINST THE PLAINTIFF,  
THAT'S NOT NORMAL.

ON ALL DEFENDANT'S THAT IS LISTED IN  
THEIR INDIVIDUAL CAPACITY, KNOWS THAT  
THIS WAS MALTREATMENT IN A NUMBER  
OF WAYS, THE DEFENDANT'S HAVE DEMONSTRATED  
NEGIGENCE AND CORRUPTION ON BEHALF OF  
PRISON GUARDS, ON MANY OCCASIONS THE  
CONSISTANT PATTERN OF ILL-TREATMENT AND  
MISMANAGEMENT OF THE FACILITY IS  
UNACCEPTABLE AND DEEPLY PROBLEMATIC.

## SUPPORTING FACTS

THE PLAINTIFF MR.HIGGINS ARGUMENTS BACK  
UP TRUE FACTS TO HIS SIDE OF THE STORY.

- 1.) THE PLAINTIFF MR.HIGGINS CELLMATE INMATE WOODS  
WAS THE PERSON INVOLVED IN THE ISSUE BETWEEN S/O  
D.WILLIAMS AND M.LOZANO AT THE FRONT OF B-S 206  
CELL DOOR, WHEN S/O D.WILLIAMS AND M.LOZANO PULLED  
OUT THEY OC SPRAY AND PEPPER SPRAYED THE PLAINTIFF  
MR.HIGGINS CELLMATE INMATE WOODS, AT CLOSE RANGE  
TO HIS FACE AREA AND CHESS, NOTED INMATE WOOD  
WAS NOT WEARING A "SHIRT" SO THAT'S WHY IT'S  
REDDENED IN WOODS "FACE" AND "CHESS" AREA,  
FROM VERY CLOSE RANGE. AND THE PLAINTIFF CELLMATE  
WAS THE FIRST TO BE ESCORTED OUT OF THE CELL.

(SEE EXHIBITS = T-1 & U-2.)  
WOODS MEDICAL REPORT =  
WOODS INTERVIEW =  
PHONE

- 2.) THE PLAINTIFF MR.HIGGINS ARGUE THE FACT THAT  
WHILE HE WAS BEING ESCORTED OUT OF THE UNIT  
B-S AND ON HIS WAY TO THE PROGRAM OR MEDICAL  
HALF WAY THERE IS WHEN HE WAS ACUSES OF  
ASSAULT AND BATTERY ON S/O J.MEDINA, BUT THE  
PLAINTIFF ARGUE THE FACT THAT THE FAC-B YARD  
CONTROL OFFICER BADGER DID NOT SEE ANYTHING AT

THE TIME I WAS ALLEGED BROKE GRASP OF  
C/O J.MEDINA AND G.MIRANDA, BECAUSE C/O BADGER  
CLEARED HIS ATTENTION TO CLEAR THE PATIO FOR  
ESCORT, BUT HE HEARD SOMEONE YELL, GET  
DOWN AND C/O BADGER TURNED HIS ATTENTION BACK  
TO THE ESCORT. (EXHIBIT = Q-1-2)

1) THE PLAINTIFF POINTS OUT HERE A TRUE  
FACT THAT, IN ALL THE REPORTS FROM  
THE DEFENDANT'S C/O J.MEDINA AND G.MIRANDA  
THE FACTS THAT THEY DID NOT YELL ANYTHING,  
AND THE PATIO GATE WAS ALREADY OPEN AS  
I WAS BEING ESCORTED ALONG WITH THE TWO  
DEFENDANT'S C/O MEDINA AND MIRANDA. C/O BADGER  
REPORT TELLS US THAT IN SO MANY WORDS  
THAT THIS WAS ALL A SET UP HERE.  
(SEE EXHIBIT = K-1-2, L-1-2, Q-1-2.)

IT IS CLEARLY THAT THE PLAINTIFF  
SUFFER LIFE TIME SCARS FROM CORRUPTION  
ON THE DEFENDANT'S WHO IS LISTED HERE.

THE CALIFORNIA DEPARTMENT OF CORRECTION AND  
REHABILITATION WAS BUILT TO HOUSE THOSE WHO  
HAVE BROKEN THE LAW, NOT DEVIATE FROM  
ITS OWN CODES OF CONDUCT.

THE DEFENDANT'S WHO IS LISTED IN THEIR  
INDIVIDUAL CAPACITY CHOOSE TO BRING THEIR  
OWN SET OF RULES ON DEC. 21, 2005, AND INEVITABLY  
CAUSE BLOODSHED ON THE PLAINTIFF MR. HIGGINS.

THE ACTS AND OMISSIONS OF THE DEFENDANT AS  
DESCRIBE HERE IN ABOVE WERE PART OF A WIDE SPREAD  
AND SYSTEMATIC PRACTICE OF THE DEPARTMENT OF  
CORRECTIONS AND ENDORSED, RATIFIED, AND SANCTIONED  
THE ACTIONS OF THE DEFENDANT'S WHO INVOLVED.

THE DEFENDANT'S OF THE DEPARTMENT OF CORRECTION,  
CAN BE HELD VICTARIOUSLY LIABLE WHEN OFFICERS  
ACTING IN THE COURSE OF HIS OR HER EMPLOYMENT  
USES EXCESSIVE FORCE ON THE PLAINTIFF AND ENGAGE  
IN ASSAULTIVE CONDUCT.

1 THE PLAINTIFF SEEKS DAMAGES FROM DEFENDANTS  
2 AT "CCI", CDCR, AS FOLLOWS.

3  
4 (1.) PLAINTIFF SEEKS COMPENSATORY DAMAGES FROM  
5 CAPT. D.ZANCHI IN AN AMOUNT OF NOT LESS  
6 THAN \$20,000 DOLLARS IN HIS INDIVIDUAL CAPACITY.

7 PLAINTIFF SEEKS PUNITIVE DAMAGES FROM CAPT. D.ZANCHI  
8 IN AN AMOUNT OF NOT LESS THAN \$20,000 DOLLARS  
9 IN HIS INDIVIDUAL CAPACITY.

10  
11 (2.) PLAINTIFF SEEKS COMPENSATORY DAMAGES FROM SUPERVISOR  
12 CORRECTIONAL COUNSELOR D.C.HAPMAN IN AN AMOUNT OF NOT  
13 LESS THAN \$20,000 DOLLARS IN HER INDIVIDUAL CAPACITY.

14  
15 PLAINTIFF SEEKS PUNITIVE DAMAGES FROM SUPERVISOR CORRECTIONAL  
16 COUNSELOR D.C.HAPMAN IN AN AMOUNT OF NOT LESS THAN  
17 \$20,000 DOLLARS IN HER INDIVIDUAL CAPACITY.

18  
19 (3.) PLAINTIFF SEEKS COMPENSATORY DAMAGES FROM CORRECTIONAL  
20 COUNSELOR D.RHODE IN AN AMOUNT OF NOT LESS THAN  
21 \$20,000 DOLLARS IN HER INDIVIDUAL CAPACITY.

22 PLAINTIFF SEEKS PUNITIVE DAMAGES FROM CORRECTIONAL COUNSELOR  
23 D.RHODE IN AN AMOUNT OF NOT LESS THAN \$20,000 DOLLARS  
24 IN HER INDIVIDUAL CAPACITY.

25  
26 (4.) PLAINTIFF SEEKS COMPENSATORY DAMAGES FROM CORRECTIONAL  
27 OFFICER M.ROBINSON IN AN AMOUNT OF NOT LESS THAN  
\$20,000 DOLLARS IN HIS INDIVIDUAL CAPACITY.



(5.) Plaintiff seeks compensatory damages from correctional officer J.Medina in an amount of not less than \$50.000 Dollars in his individual capacity.

Plaintiff seeks punitive damages from correctional officer J.Medina in an amount of not less than \$50.000 Dollars in his individual capacity.

(6.) Plaintiff seeks compensatory damages from correctional officer G.Miranda in an amount of not less than \$50.000 Dollars in his individual capacity.

Plaintiff seeks punitive damages from correctional officer G.Miranda in an amount of not less than \$50.000 Dollars in his individual capacity.

(7.) Plaintiff seeks compensatory damages from correctional officer D.Williams in an amount of not less than \$25.000 Dollars in his individual capacity.

Plaintiff seeks punitive damages from correctional officer D.Williams in an amount of not less than \$25.000 Dollars in his individual capacity.

(8.) Plaintiff seeks compensatory damages from correctional officer M. LOZANO in an amount of not less than \$25,000 dollars in his individual capacity.

Plaintiff seeks punitive damages from correctional officer M. LOZANO in an amount of not less than \$25,000 dollars in his individual capacity.

(9.) Plaintiff seeks compensatory damages from correctional sergeant C-JOSE in an amount of not less than \$10,000 dollars in his individual capacity.

Plaintiff seeks punitive damages from correctional sergeant C-JOSE in an amount of not less than \$10,000 dollars in his individual capacity.

(10.) Plaintiff seeks compensatory damages from correctional Lieutenant F.J. REYNOSO in an amount of not less than \$10,000 dollars in his individual capacity.

Plaintiff seek punitive damages from correctional Lieutenant F.J. REYNOSO in an amount of not less than \$10,000 dollars in his individual capacity.

Any OTHER RELIEF DEEMED JUST An APPROPRIATE  
INCLUDING AN ORDER THAT DEFENDANTS PAY ALL ATTORNEY  
FEES AND COST ASSOCIATED WITH THE PROSECUTION  
OF THIS SUIT.

JURY DEMAND

THE PLAINTIFF REQUEST TRIAL BY A JURY  
OF TWELVE (12) PERSON ON ALL ISSUES SO TRIABLE.  
3

PRAYER FOR RELIEF

WHEREFORE, PLAINTIFF RESPECTFULLY PRAYS  
THAT THIS COURT:

(1.) DECLARE THAT THE ACTS AND OMISSION DESCRIBED  
HEREIN VIOLATED PLAINTIFF RIGHTS UNDER THE CONSTITUTION  
AND LAWS OF THE UNITED STATES.

(2.) ENTER JUDGEMENT IN FAVOR OF PLAINTIFF FOR  
COMPENSATORY AND PUNITIVE DAMAGES AS ALLOWED  
BY LAW AGAINST EACH DEFENDANT JOINTLY AND  
SEVERALLY.

(3.) ORDER SUCH ADDITIONAL RELIEF AS THE COURT  
MAY DEEM, JUST AND PROPER.

PURSUANT TO 28 U.S.C 1746. I DECLARE  
AND VERIFY UNDER PENALTY OF PERJURY UNDER  
THE LAWS OF THE UNITED STATES OF AMERICA  
THAT THE FOREGOING IS TRUE AND CORRECT.

EXECUTED ON MARCH 3, 2009.

Sign CARL L. HIGGINS

Print CARL L. HIGGINS

RESPECTFULLY SUBMITTED THIS  
ON: MARCH 3, 2009

Sign CARL L. HIGGINS

Print CARL L. HIGGINS

CDC# J.06166

1                   IN THE UNITED STATES DISTRICT  
2                   COURT FOR THE EASTERN DISTRICT.

3  
4  
5                   MR. HIGGINS, CARL  
6                   # T-06160

7                   PLAINTIFF,

8                   V.

9                   DEFENDANT'S,  
10                  c/o J. MEDINA IN HIS OWN  
11                  CAPACITY, c/o G. MIRANDA  
12                  IN HIS OWN CAPACITY,  
13                  c/o D. WILLIAMS IN HIS OWN  
14                  CAPACITY, m. LOAZANO IN  
15                  HIS OWN CAPACITY, SGT. C. JOSE  
16                  IN HIS OWN CAPACITY,

17                  F. J. REYNOSO IN HIS OWN  
18                  CAPACITY, CAPT. D. ZANCHI IN HIS  
19                  OWN CAPACITY, CC TWO D. CHAPMAN  
20                  IN HER OWN CAPACITY, CC ONE D. RHODES  
21                  IN HER OWN CAPACITY, c/o M. RABINSON  
22                  IN HIS OWN CAPACITY.

MOTION FOR  
APPOINTMENT OF  
COUNSEL:

1007CV-  
00934-LJO-  
CIVIL ACTION NO. GSA-PC

PURSUANT TO 28 U.S.C. 1915(E)(1) PLAINTIFF MOVE FOR AN ORDER  
APPOINTING COUNSEL TO REPRESENT HIM IN THIS CASE. IN  
SUPPORT OF THIS MOTION, PLAINTIFF STATES:

(1) PLAINTIFF IS UNABLE TO AFFORD COUNSEL. HE HAS REQUESTED LEAVE  
TO PROCEED IN FORMA PAUPERIS.

(2) PLAINTIFF IMPRISONMENT WILL GREATLY LIMIT HIS ABILITY  
TO LITIGATE. THE ISSUES INVOLVED IN THIS CASE ARE  
COMPLEX, AND WILL REQUIRE LIMITS [REDACTED] OF SIGNIFICANT  
RESEARCH AND INVESTIGATION. PLAINTIFF HAS LIMITED ACCESS  
TO THE LAW LIBRARY AND LIMITED KNOWLEDGE OF THE LAW.

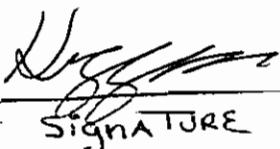
(3) A TRIAL IN THIS CASE WILL LIKELY INVOLVE CONFLICTING  
TESTIMONY, AND COUNSEL WOULD BETTER ENABLE PLAINTIFF  
TO PRESENT EVIDENCE AND CROSS EXAMINE WITNESSES  
OR DEFENDANT'S.



WHEREFORE, PLAINTIFF REQUEST THAT THE  
COURT APPOINT AN ATTORNEY, A MEMBER  
OF THE CALIFORNIA STATE BAR, AS A COUNSEL  
IN THIS CASE.

MARCH 3, 2009

DATE

  
\_\_\_\_\_  
SIGNATURE

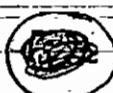
CALIFORNIA CORRECTIONAL INSTITUTION

P.O. BOX 1902 4A 5C-211

TEHACHAPI, CA 93581

ADDRESS.

66



**INMATE/PAROLEE  
APPEAL FORM**

CDC 602 (12/87)

Location: INSTITUTION/Parole Region:

Log No.:

Category:

You may appeal any policy, action or decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

|         |        |            |                  |
|---------|--------|------------|------------------|
| NAME    | NUMBER | ASSIGNMENT | UNIT/ROOM NUMBER |
| Higgins | J-6160 |            | ASU#180          |

## A. Describe Problem:

THIS IS A 602 INMATE APPEAL BASED ON STAFF CONDUCT PURSUANT TO PENAL CODE SECTION 832.5 CITIZEN'S COMPLAINT INTRODUCTION INTO ALLEGATIONS: ON 12-21-05 AT APPROXIMATELY 0920 HOURS, CORRECTIONAL STAFF WAS CONDUCTING AN INSPECTION OF B-5 Housing Unit. MYSELF (J-6160) AND M. WOODS # P-1320 WERE HOUSED IN CELL 206. WHEN OUR CELL WAS APPROACHED BY C/D. WILLIAM AND M. LOAZANO AND WE WERE ORDERED TO STRIP OUT. MYSELF (J-6160) WAS THE FIRST TO APPROACH THE DOOR TO MOVE

(If you need more space, attach one or more additional sheet.)

## B. Action Requested:

THAT AN INVESTIGATION BE IMMEDIATELY CONDUCTED ON C/D. WILLIAM AND M. LOAZANO, G. MIRANDA & J. MEDINA. THAT THIS INVESTIGATION BE CONDUCTED THROUGH THE INTERVIEWING OF PAROLEE J-6160 AND P-1320 WITHIN 12 HOURS. CONTINUE ON PAGE 2

Inmate/Parolee Signature: *J-6160*Date Submitted: *12-21-05*

## C. INFORMAL LEVEL (Date Received):

Staff Response:

Staff Signature:

Date Returned to Inmate:

## D. FORMAL LEVEL:

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response:

Signature:

Date Submitted:

Note: Property/Funds appeals must be accompanied by a completed

Board of Control form BC-1E, Inmate Claim

CDC Appeal Number:

MMV 52005-1177

RECEIVED MAY 24 2006

EXHIBIT A-1

MY SOCKS - T-SHIRT - GYM SHORTS - TENNIS SHOES - BOXERS, AND HANDED THEM TO SGT D.WILLIAM, ONCE MY CLOTHES WERE INSPECTED, I WAS HANDED THEM BACK TO PUT ON, THEN I WAS ORDER TO TURN AROUND AND CUFF UP. AFTER I WAS CUFFED, I WAS TOLD TO STEP BACK TO THE BACK WINDOW CELL, SO THAT MY CELLMATE COULD PERFORM THE SAME PROCEDURE. ONCE YM WOODS COMPLETED THE PROCEDURE, HE WAS ALSO PLACE IN HANDCUFFS. SHORTLY AFTER THE TWO SGT D.WILLIAM AND M.LOAZANO ASSIGNED TO SEARCH OUR CELL, BEGAN TO PEPPER SPRAY MY CELLMATE YM WOODS AND ATTACK HIM, AS THEY YELLED "GET DOWN", ACTIVATING THEIR ALARMS. IMMEDIATELY GOT DOWN ON THE FLOOR IN HANDS CUFFS ON MY STOMACH. AS THE SGT'S CONTINUE TO SPRAY THE CHEMICAL AGENT INTO THE CELL. OFFICER D.WILLIAM AND M.LOAZANO AND OFFICER J.PALMER GRABBED MY CELLMATE AND DRAGGED HIM OUT OF THE CELL, IN HANDSCUFFS ON HIS STOMACH. NOW OFFICERS G.MIRANDA AND J.MEDINA GRABBED ME (YM HIGGINS) BY THE T-SHIRT AND BOTH LEGS, IN WHICH THEY CROSSED THEM, PULLING MY FEET UP TO MY BACK, IN A HOG TIED POSITION. OFFICER G.MIRANDA AND J.MEDINA DROPPED ME ON MY STOMACH. "MY CHIN HIT THE FLOOR" AND "BUSTED OPEN". BLOOD STARTED TO LEAK INSIDE THE CELL, AND SGT G.MIRANDA AND J.MEDINA DRAGGED ME OUT OF THE CELL. THESE TWO OFFICERS THEN REMOVE MY TENNIS SHOES - SOCKS - AND GYM SHORTS. THEN PLACE ME ON MY FEET. AS WE STARTED TO WALK DOWN THE UPPER TIER, A OFFICER YELLED OUT LOUD, "HE'S BLEEDING" "HE'S BLEEDING". AS I WAS ESCORTED OFF THE UPPER TIER, THROUGH THE "A SECTION OF B-S DOOR", WE WALK PAST AN MEDICAL STAFF "KUSH" THE OFFICER G.MIRANDA AND J.MEDINA AND SGT JOSE REFUSE TO LET MEDICAL STAFF "KUSH" TREAT ME ON THE SCENE, AS I WAS BEING ESCORTED TO THE PROGRAM AND MEDICAL OFFICE, MIDWAY. THERE, I WAS SLAMMED TO THE GROUND BY SGT G.MIRANDA AND J.MEDINA, CAUSING ME TO SUFFER EXTREME PAIN FROM MY "BUSTED CHIN" AND EXPOSURE TO THE CHEMICAL AGENT.

(see reverse side) RECEIVED MAY 24 2006

said, IF you ever Touch My OFFicer, I will MAKE sure YOUR BRAINS  
are all over THIS FIELD. THEN LT. Reynoso Relieve & J. Medina.  
and g. MIRANDA and OFFicer J. Copeland continue To Escorted me  
to The Medical clinic! "FOR THE Record I HAD several STICHes Put  
on MY Chin..."

Since I HAD BEEN SLAMMED ON THE YARD AND THREATENED BY LT. Reynoso,  
THIS WAS MERELY AND ATTEMPT TO COVER UP CRIMINAL ACT THAT HAD BEEN  
ARRIED OUT BY HIS SUBORDINATES ...

LT. Reynoso AND Sgt. Jose FAIL To INVESTIGATE OR call "IgI"  
to come INVESTIGATE THE SCENE AND TAKE PICTURES OF THE BLOOD INSIDE  
OF THE CELL B-5 206 AND ON THE UPPER TIER THAT came FROM (Im Higgins) CHIN!

I WAS ALSO NOT DECONTAMINATED FROM OC SPRAY EXPOSURE,  
THEIR IS NOT A LOG THAT SAID PERSONALLY NOR DOCUMENTED THAT THEY  
PUT ME INSIDE OF A SHOWER, AND ALSO THE MEDICAL CLINIC DOES NOT HAVE A SHOWER,  
I WAS PLACED IN A ONE MAN CAGE THE WHOLE TIME I WAS IN THE B-YARD MEDICAL CLINIC!

I SENT THE "APPEAL COORDINATOR" THE ORIGINAL COPY OF THIS INMATE COMPLAINT  
ON 12-28-05 AND I HAVE NOT GOTTEN ANY LOG NUMBER NOR A RESPONSE BACK!

THE ACTIONS MENTION HEREIN, WERE WANTON, MALICIOUS AND DELIBERATELY, AND SUCH ACTION  
IS IN DIRECT VIOLATION OF THE CDC TITLE 15 RULES AND REGULATIONS SUCH AS 3024,  
3391. EMPLOYEE CONDUCT (A), 3371. RESPONSIBILITY OF EMPLOYEE,  
3381. USE OF FORCE (2)(3), 3382. INCIDENT REPORTS (A)(B), AND 33413. INCOMPATIBLE  
ACTIVITY (A)(1)(2)(3)(4)(5)(6)(7)(8), WHICH CLEARLY STATES: VIOLATION OF THESE PROVISIONS MAY  
RESULT IN DISCIPLINARY ACTIONS UP TO AND INCLUDING TERMINATION OF EMPLOYMENT  
OR CIVIL ACTION, CRIMINAL PROSECUTION MAY RESULT FROM CONDUCT, WHICH  
VIOLATES PENAL CODE SECTION 502.

(see next page)

RECEIVED MAY 24 2006

The Action Mention Herein Does not only Violates The Rule, Regulations and Policy's THAT govern THE California Department of Corrections, But also Violates my U.S. Constitutional Rights. my 8<sup>th</sup> Amendment's and 14<sup>th</sup> Amendment. UnFAIRNESS OR CORRUPTION OF OFFICERS IN Performance OF Administrative FUNCTIONS in CIVIL OR CRIMINAL cases in state court AS in violation of the Fourteenth Amendment. This was clearly ACT OF CRUELTY BY PRISON CORRECTIONAL STAFF, A PRIME EXAMPLE OF FAILURE TO SUPERVISE AND REGULATE THE "USE OF FORCE" THEREFORE, THESE PRISON STAFF ARE ACTING UNDER THE COLOR OF STATE LAW, EACH OF THEM KNOW OR REASONABLY SHOULD HAVE KNOWN THAT A VIOLATION HAD OCCURRED, AND HAD THE DUTY AND RESPONSIBILITY TO TAKE CORRECTIVE OR PREVENTATIVE MEASUREMENTS. BUT INSTEAD THESE OFFICERS D.WILLIAM and M.LOAZANO → G.MIRANDA and J.MEDINA and also LT.REYNOSO EACH OF THEM CHOOSE TO CONDONE AND COVER UP SUCH VIOLATION.

**"Action Request: (continue)"**

- 2) THAT OFFICERS D.WILLIAM and M.LOAZANO → G.MIRANDA and J.MEDINA and also LT.REYNOSO BE TERMINATED OF EMPLOYMENT OR THIS COMPLAINT BE PLACED IN ALL FOUR OFFICERS AND LT. "FILE"!
- 3) THAT I RECEIVE THE INCIDENT REPORT'S FROM ALL STAFF CORRECTIONAL AND MEDICAL WHO RESPONDED TO ALARM IN SBK B-FAC ON 12-21-05 0920 HOURS!
- 4.) THAT I RECEIVE THE MEDICAL REPORT'S OF THE "NURSE and RN DOCTOR" WHO PUT IN MY STICHES!
- 5) THAT I BE COMPENSATED IN THE AMOUNT OF HUNDRED THOUSAND DOLLARS (\$100,000.00) FOR THE SUFFERING AND INJURIES CAUSED BY THE STAFF!

(D) 12-28-05

(S) Higgin

RECEIVED MAY 2 1 2006

E OF CALIFORNIA

MEDICAL REPORT OF INJURY  
UNUSUAL OCCURRENCE

DEPARTMENT OF CORRECTIONS

|                                    |                                |  |                              |   |                         |
|------------------------------------|--------------------------------|--|------------------------------|---|-------------------------|
| NAME OF INSTITUTION<br><b>KISP</b> | FACILITY/UNIT<br><b>B Yard</b> | REASON FOR REPORT (circle)<br>USE OF FORCE | INJURY<br>UNUSUAL OCCURRENCE | ON THE JOB INJURY<br>PRE AD/SEG ADMISSION | DATE<br><b>12-21-05</b> |
| IS SECTION FOR STATE ONLY          | NAME LAST<br><b>HIGGINS</b>    | FIRST                                      | CDC NUMBER<br><b>J06160</b>  | HOUSING LOC.<br><b>BS-206L</b>            | NEW HOUSING LOC.        |
| IS SECTION FOR OFF ONLY            | NAME LAST<br><b>N/A</b>        | FIRST                                      | BADGE #                      | RANK/CLASS                                | ASSIGNMENT/RDOs         |
| IS SECTION FOR STAFF ONLY          | NAME LAST<br><b>N/A</b>        | FIRST                                      | MIDDLE                       | DOB                                       | OCCUPATION              |
| HOME ADDRESS<br><b>N/A</b>         | CITY                           | STATE                                      | ZIP                          | HOME PHONE                                |                         |

|                                    |   |                               |  |        |            |                  |                           |     |
|------------------------------------|---|-------------------------------|--|--------|------------|------------------|---------------------------|-----|
| PLACE OF OCCURRENCE<br><b>Yard</b> | DATE/TIME OF OCCURRENCE<br><b>12-21-05 0930</b> | NAME OF WITNESS(ES)           |  |        |            |                  |                           |     |
| BE NOTIFIED<br><b>930</b>          | TIME SEEN<br><b>0933</b>                        | ESCORTED BY<br><b>Custody</b> | MODE OF ARRIVAL (circle)<br>AMBULATORY | LITTER | WHEELCHAIR | AGE<br><b>31</b> | RACE<br><b>Black male</b> | SEX |

DEFINITION STATEMENT IN SUBJECT'S WORDS OF THE CIRCUMSTANCES OF THE INJURY OR UNUSUAL OCCURRENCE

When I was handcuffed in cell the police dropped on the floor + I bumped my chin. "They slammed me"

|  |   |
|--|---|
| INJURIES FOUND? YES / NO               | <input checked="" type="radio"/>          |
| Frassion/Scratch                       | <input checked="" type="radio"/> 1        |
| Active Bleeding                        | <input checked="" type="radio"/> 2        |
| Broken Bone                            | <input type="radio"/>                     |
| Disuse/Discolored Area                 | <input type="radio"/> 4                   |
| Iron                                   | <input type="radio"/> 5                   |
| Location                               | <input type="radio"/> 6                   |
| Bled Blood                             | <input type="radio"/> 7                   |
| esh Tattoo                             | <input type="radio"/> 8                   |
| ut/Laceration/Slash                    | <input checked="" type="radio"/> 9        |
| C. Spray Area                          | <input type="radio"/> 10                  |
| In                                     | <input type="radio"/> 11                  |
| lusion                                 | <input type="radio"/> 12                  |
| incture                                | <input type="radio"/> 13                  |
| ddened Area                            | <input type="radio"/> 14                  |
| in Flap                                | <input type="radio"/> 15                  |
| ollen Area                             | <input type="radio"/> 16                  |
| her                                    | <input type="radio"/> 17                  |
|  | <input type="radio"/> 18                  |
|  | <input type="radio"/> 19                  |
| C. SPRAY EXPOSURE? YES / NO            | <input checked="" type="radio"/>          |
| ECONTAMINATED?                         | <input checked="" type="radio"/> YES / NO |
| If decontamination instructions given? | <input checked="" type="radio"/> YES / NO |
| Refused decontamination? YES / NO      | <input type="radio"/> 1,2,9               |
| 15 min. checks                         | <input type="radio"/>                     |
| aff issued exposure packet? YES / NO   | <input type="radio"/>                     |

|                             |                         |
|-----------------------------|-------------------------|
| NOTIFIED/TIME<br><b>935</b> | PHYSICIAN NOTIFIED/TIME |
|-----------------------------|-------------------------|

MED/DISPOSITION  
**Ref to RN for chin  
Inasion.**

|   |         |      |
|---|---------|------|
| REPORT COMPLETED BY/TITLE (PRINT AND SIGN)<br><b>Wesley L. M.</b> | BADGE # | RDOs |
|---|---------|------|

(Medical data is to be included in progress note or emergency care record filed in UHR)

LOS ANGELES CA 900

08 APR 2006 PM 11 F

APR 12 2006

CDCR  
Office of Internal Affairs

Office of Internal Affairs  
P.O. Box 3009  
Sacramento, CA 95812

EXHIBIT = C-1

Urgent !!

February 12, 2006

Request to file a Citizen Complaint

Regarding : Prison Guard Brutality @

Kern Valley State Prison

(Request for a Citizen Complaint)

Inmate : Carl Higgins # J-06160

This is a request for investigation of an incident which occurred on 12/21/2005 at Kern Valley State Prison. Inmate Higgins filed a complaint on 12/28/05 with the appeal coordinator and has received no correspondence nor a log number regarding his complaint. Inmate Higgins suffered from a busted chin and had to get stitches.

Enclosed is a copy of the complaint in which inmate Higgins submitted. We the family of the inmate request a full and thorough investigation into these allegations without retaliation by the prison guards.

It seems that this incident was covered up from start to finish. Prison is a place of reform and these guards has no right to brutalize inmates especially for no apparent reason. Our family was appalled and outraged once we read the complaint form. This problem needs to be addressed and investigated at once. This type of incident adds to problems which are seen on the news often which at times results in inmates being killed. The media

Often speaks of riots between inmates but the prison guard brutality is kept low key. I ask that you please read the following complaint from Higgins and conduct an investigation and do what is right to stop this corruption. This type of behavior from guards who are supposed to be there in the prisons to keep the peace instead they're acting like loose canons and their actions are saying it's OK to be violent and hurt others which leads to riots. This has to stop immediately. Our family has a copy of this complaint in case any more of these inappropriate incidents occur. We will also forward a copy to the mayor's office, authorities in Sacramento and local news stations. If anything further happens to inmate Higgins we will hold the state liable and pursue legal action.

Family of Inmate Higgins  
(Barbara Higgins, Rhonda E.)

We are requesting that a Citizen's Complaint be filed. Also, inmate Higgins has mentioned that he has been constantly placed in the hole for no apparent reasons since this incident. Please read the following complaint written by Inmate Higgins.

RECEIVED MAY 2 2006

State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

---

RE: Screening at the INFORMAL Level

May 11, 2006

**HIGGINS, J06160**

ASU100000000180L

Log Number: KVSP-U-

(Note: Log numbers are not assigned to screen out appeals, or informal level appeals)

The enclosed documents are being returned to you for the following reasons:

*There has been too great a TIME LAPSE between when the action or decision occurred and when you filed your appeal with no explanation of why you did not or could not file in a timely fashion. Time limits expired per CCR 3084.6(c). Therefore, if you would like to pursue this matter further, you must submit an explanation and supporting documentation explaining why you did not or could not file your appeal timely.*

*However, due to the nature of the appeal issue it will be referred to the hiring authority for possible investigation.*

4 KM (OT)  
Appeals Coordinator  
Kern Valley State Prison

**NOTE:** Failure to follow instruction(s) will be viewed as non-cooperation and your appeal will be automatically dismissed pursuant to CCR 3084.4(d). This screening decision may not be appealed. If you believe this screen out is in error, please return this form to the Appeals Coordinator with an explanation of why you believe it to be in error, and supporting documents. You have only 15 days to comply with the above directives.

RECEIVED JUN 10 2006 RECEIVED MAY 24 2006

PERMANENT APPEAL ATTACHMENT - DO NOT REMOVE

Exhibit D-1

OF CALIFORNIA  
(9/92)

DEPARTMENT OF CORRECTIONS

## INMATE REQUEST FOR INTERVIEW

|                                    |                     |                 |                  |
|------------------------------------|---------------------|-----------------|------------------|
| TO                                 | FROM (LAST NAME)    |                 | CDC NUMBER       |
| 18-06                              | Appeals Coordinator | Higgins         | J106160          |
| NO                                 | BED NUMBER          | WORK ASSIGNMENT | JOB NUMBER       |
| ASU 1                              | 180                 |                 | FROM — TO —      |
| ASSIGNMENT (SCHOOL, THERAPY, ETC.) |                     |                 | ASSIGNMENT HOURS |
|                                    |                     |                 | FROM — TO —      |

Clearly state your reason for requesting this interview.

You will be called in for interview in the near future if the matter cannot be handled by correspondence.

ON 5-11-06 I Received A copy of my Family citizen complaint Along with  
 MR Higgins INMATE 602 Appeal Form and also A letter "Re: Screening at the  
 Informal Level, in A USAVE J.M Interdepartment envelope, IT STATES I must submit  
 An Explanation and Supporting Documentation explaining why Did I not File Timely. <sup>see next page</sup> >

REVIEWED BY

DATE

POSITION

ASU! cell 180.

on 12-28-05 I Filed A Inmate 602 Appeal Form To the Appeals coordinator, now the Appeals Coordinator At KERN VALLEY STATE Prison Failed to Respond BACK To me Inmate Higgins, now let me Remind you that this is 33 DAYS LATER, And this Put us At Feb.1, 2006. the Beginning OF the Month OF Feb.06, I informed my Family [REDACTED] OF the Situation that occurred and also Regarding the inmate Appeal 602 Form I Summittted to the Appeals Coordinator on 12-28-05 and I then sent my Family A Copy OF the Appeal 602 Form, stating I Did not get any Type OF Response BACK. So my Family Then written up A Citizen Complaint letter to the OFFICE OF Internal AFFAIRS OFFICE and also SENDING THEM A Copy OF the Inmate 602 Form DATE 12-28-05, To them, my Family letter DATED 2-12-06. IF you Read the Documents you will see that this SCREEN out is in ERROR, To whom this MAY concern I would like To move FORWARD with this Inmate 602 Form DATE 12-28-05 and Persue this matter FURTHER.

THANK YOU FOR YOUR TIME OUT OF YOUR DAY.

5-18-06

CARL Higgins

Carl Higgins

State of California  
CDC FORM 695  
Screening For:  
CDC 602 Inmate/Parolee Appeals  
CDC 1824 Reasonable Modification or Accommodation Request

---

RE: Screening at the INFORMAL Level

6

June 15, 2006

**HIGGINS, J06160**  
ASU100000000180L

Log Number: KVSP-U-

(Note: Log numbers are not assigned to screen out appeals, or informal level appeals)

The enclosed documents are being returned to you for the following reasons:

*There has been too great a TIME LAPSE between when the action or decision occurred and when you filed your appeal with no explanation of why you did not or could not file in a timely fashion. Time limits expired per CCR 3084.6(c). Therefore, if you would like to pursue this matter further, you must submit an explanation and supporting documentation explaining why you did not or could not file your appeal timely.*

*The Appeals Office does not show record of you submitting this appeal prior to 5/5/06. Your appeal will not be processed due to your untimely filing. Again, your issue has been referred to the hiring authority.*

  
R. GRICEWICH / C. PFEIFFER  
Appeal Coordinator  
Kern Valley State Prison

**NOTE:** Failure to follow instruction(s) will be viewed as non-cooperation and your appeal will be automatically dismissed pursuant to CCR 3084.4(d). This screening decision may not be appealed. If you believe this screen out is in error, please return this form to the Appeals Coordinator with an explanation of why you believe it to be in error, and supporting documents. You have only 15 days to comply with the above directives.

PERMANENT APPEAL ATTACHMENT - DO NOT REMOVE

EXHIBIT F-1

ASU #1 - G-180  
KERN VALLEY STATE PRISON  
P.O. Box 5107  
DELAND CA. 93216

To: Appeals Coordinator  
(Kern Valley State Prison)

RE: INMATE APPEALS

Subject: FORMAL EXPLANATION REGARDS PER CDC FORM 695  
DATED 6/15/06

ON 6-16-06 THIS WRITER RECEIVED A SECOND CDC FORM 695. LOG # KVSP DATED 6-16-06  
THIS FORM INDICATED THAT THERE HAS BEEN TO GREAT A TIME LAPSE BETWEEN  
SAID ACTIONS AND THE TIME I FILED MY APPEAL. THIS FORM FURTHER STATES  
THAT IF I WISH TO PURSUE THIS MATTER I MUST SUBMIT AN EXPLANATION  
AND OR SUPPORTING DOCUMENTATION WHY I DID NOT OR COULD NOT FILE AN  
APPEAL IN A TIMELY FASHION, THUS I SUBMIT FORMALLY, THE FOLLOWING  
RESPONSE/EXPLANATION:

ON 12-28-05 THIS WRITER FILED A COMPLETED ORIGINAL INMATE APPEAL 602 FORM  
VIA INSTITUTIONAL MAIL, [REDACTED] IT SHOULD BE NOTED THAT STAFF AT KERN VALLEY STATE PRISON ARE NOT  
REQUIRED TO RELINQUISH 602 RECEIPTS UPON RECEIVING A INMATE APPEAL TO BE  
PLACE INTO INSTITUTIONAL MAIL, I ASSERT OF MY OWN FREE VIOLATION UNDER  
THE PENALTY OF PERJURY, THAT I CARL HIGGINS # J06160 PLACED AND DIRECTED  
A INMATE APPEAL TO THE APPEAL COORDINATOR DATED 12-28-05 SIGNED BY MY  
MARK INTO INSTITUTIONAL MAIL, PURSUANT TO KERN VALLEY STATE PRISON & AD-SEG  
PROCEDURE. FURTHER I STATE AFTER AN APPEAL LEAVE MY HANDS I  
HAVE NO CONTROL OVER IT WHEREABOUTS, UPON NOT RECEIVING A RESPONSE  
FROM YOUR OFFICE, (WHICH I WAITED PATIENTLY) I BECAME CONCERNED THAT THE  
NATURE OF MY COMPLAINT MOTIVATED A STAFF MEMBER(S) TO HINDER OR  
EXCLUDE MY APPEAL, I THEN CONTACTED MY FAMILY AND THE COURTS AND  
ADVISED THEM OF THIS SITUATION. I TAKE THIS MATTER VERY SERIOUSLY AND  
BELIEVE THAT THE INACTION REGARDING MY APPEAL IS A DILATORY TACTIC  
TO HINDER MY APPEAL. HOWEVER I DO CONCEDE THAT NO SYSTEM IS PERFECT  
THUS I REQUEST THAT YOUR OFFICE PROCEED WITH MY APPEAL AND TREAT  
ATTACHED APPEAL AS ORIGINAL. THANK YOU.

EXHIBIT = G-1

RECEIVED JUN 20 2006

Carl Higgins # J06160

State of California

CDC FORM 695

Screening For:

CDC 602 Inmate/Parolee Appeals

CDC 1824 Reasonable Modification or Accommodation Request

---

RE: Screening at the INFORMAL Level

*July 12, 2006*

**HIGGINS, J06160**

ASU100000000180L

Log Number: KVSP-U-

(Note: Log numbers are not assigned to screen out appeals, or informal level appeals)

The enclosed documents are being returned to you for the following reasons:

*There has been too great a TIME LAPSE between when the action or decision occurred and when you filed your appeal with no explanation of why you did not or could not file in a timely fashion. Time limits expired per CCR 3084.6(c). Therefore, if you would like to pursue this matter further, you must submit an explanation and supporting documentation explaining why you did not or could not file your appeal timely.*

*You're appealing an even that took place on 12/21/05. You did not file this appeal until 5/5/06. Your appeal will not be processed due to your untimely filing. The issue of staff misconduct was forwarded to the hiring authority for review.*



B. GRICEWICH / C. PFEIFFER

Appeal Coordinator

**NOTE:** Failure to follow instruction(s) will be viewed as non-cooperation and your appeal will be automatically dismissed pursuant to CCR 3084.4(d). This screening decision may not be appealed. If you believe this screen out is in error, please return this form to the Appeals Coordinator with an explanation of why you believe it to be in error, and supporting documents. You have only 15 days to comply with the above directives.

**PERMANENT APPEAL ATTACHMENT – DO NOT REMOVE**

Exhibit H-1

The UNITED STATES MAGISTRATE Judge, Hon. Arthur NAKAZATO.

Motion

In Respond to the ORDER to Show CAUSE.

1.) The Petitioner CARI L. Higgins, HAVE NOT Receive any Responses From Centinela STATE Prison Regarding "INCOMING and outgoing Legal log DATES". I Need the Legal log DATES to Show, the U.S. District Court why it Took so long to File A Federal writ OF HABEAS CORPUS, it would Show the DATES that the Appellate Attorney SARA H. Ruddy Wrote to me at Centinela STATE Prison To inform me ON Oct. 20, 2003, that my Petition of Review Been Denied IN 2002. I Do not HAVE any of my Legal MATERIAL to Show the Right DATE, also it will Show when she sent my TRANSCRIPT'S in Oct. 23, 2003.

2) ON JAN 23 2006 CLERK, U.S. DISTRICT COURT, CENTRAL DISTRICT OF CALIFORNIA FOR DEPUTY OF CALIFORNIA FOR NO REASON AT ALL, THE MINISTRATIVE AND STAFF HERE AT DELANO<sup>II</sup> KERN VALLEY STATE PRISON, HAVE VIOLATED MY U.S. CONSTITUTIONAL RIGHTS MY 8<sup>TH</sup> AMENDMENT AND 14<sup>TH</sup> AMENDMENT AND THE CALIFORNIA DEPARTMENT OF CORRECTIONS RULE AND REGULATIONS POLICY'S. SEE THE ATTACH PAGE OF THE GREEN INMATE APPEAL FORM 1 OF 3. NOW THE MINISTRATIVE FAIL TO NOT PUT THE 12-28-05 ABOVE CITIZEN COMPLAINT THRU THE APPEAL POLICY.

I Showed THE STAFF HERE IN ADMINISTRATIVE SEGREGATION THE LETTER I RECEIVED FROM THE DISTRICT COURT DATED JAN 4, 2006, AND ALSO INFORMING THEM THAT I NEED SOME OF MY LEGAL MATERIAL OUT OF MY PERSONAL PROPERTY, THE STAFF OUT RIGHT IGNORED ME, SEE ATTACH PAGE 1-3 OF INMATE REQUEST INTERVIEW. AND ALSO HERE GO A COPY OF WHAT THEY LET ME HAVE.

Motion

Exhibit I

CONTINUE ON NEXT PAGE

RECEIVED  
CLERK, U.S. DISTRICT COURT  
FEB 1 2006  
FEB  
CENTRAL DISTRICT OF CALIFORNIA

STATE OF CALIFORNIA

MEDICAL REPORT OF INJURY  
UNUSUAL OCCURRENCE

DEPARTMENT OF CORRECTIONS

|                                    |                                |  |   |   |
|------------------------------------|--------------------------------|--|---|---|
| NAME OF INSTITUTION<br><i>LVSF</i> | FACILITY/UNIT<br><i>Byard</i>  | REASON FOR REPORT (circle)<br>USE OF FORCE <input checked="" type="checkbox"/> UNUSUAL OCCURRENCE <input type="checkbox"/> | INJURY<br>ON THE JOB INJURY <input checked="" type="checkbox"/> PRE AD/SEG ADMISSION <input type="checkbox"/> | DATE<br><i>12-21-05</i>                             |
| IS SECTION FOR MATE ONLY           | NAME LAST<br><i>[Redacted]</i> | FIRST  | CDC NUMBER  | HOUSING LOC. NEW HOUSING LOC.                       |
| IS SECTION FOR AFF ONLY            | NAME LAST<br><i>Medina</i>     | FIRST  | BADGE # <i>67379</i>  | RANK/CLASS <i>CIC</i> ASSIGNMENT/RDOs <i>Hoj Tu</i> |
| IS SECTION FOR SITOR ONLY          | NAME LAST<br><i>[Redacted]</i> | FIRST  | MIDDLE  | DOB OCCUPATION                                      |
| HOME ADDRESS<br><i>[Redacted]</i>  | CITY<br><i>[Redacted]</i>      | STATE<br><i>[Redacted]</i>   | ZIP<br><i>[Redacted]</i>  | HOME PHONE<br><i>[Redacted]</i>                     |

|  |   |  |   |            |     |      |     |
|--|---|--|---|------------|-----|------|-----|
| PLACE OF OCCURRENCE<br><i>yard - in yard</i> | DATE/TIME OF OCCURRENCE<br><i>12-21-05 9:20</i> | NAME OF WITNESS(ES)<br><i>Monica COX. afican</i> |   |            |     |      |     |
| ME NOTIFIED<br><i>9:25</i>                   | TIME SEEN<br><i>9:21</i>                        | ESCORTED BY<br><i>[Redacted]</i>                 | MODE OF ARRIVAL (circle)<br><input checked="" type="checkbox"/> AMBULATORY LITTER ON SITE | WHEELCHAIR | AGE | RACE | SEX |

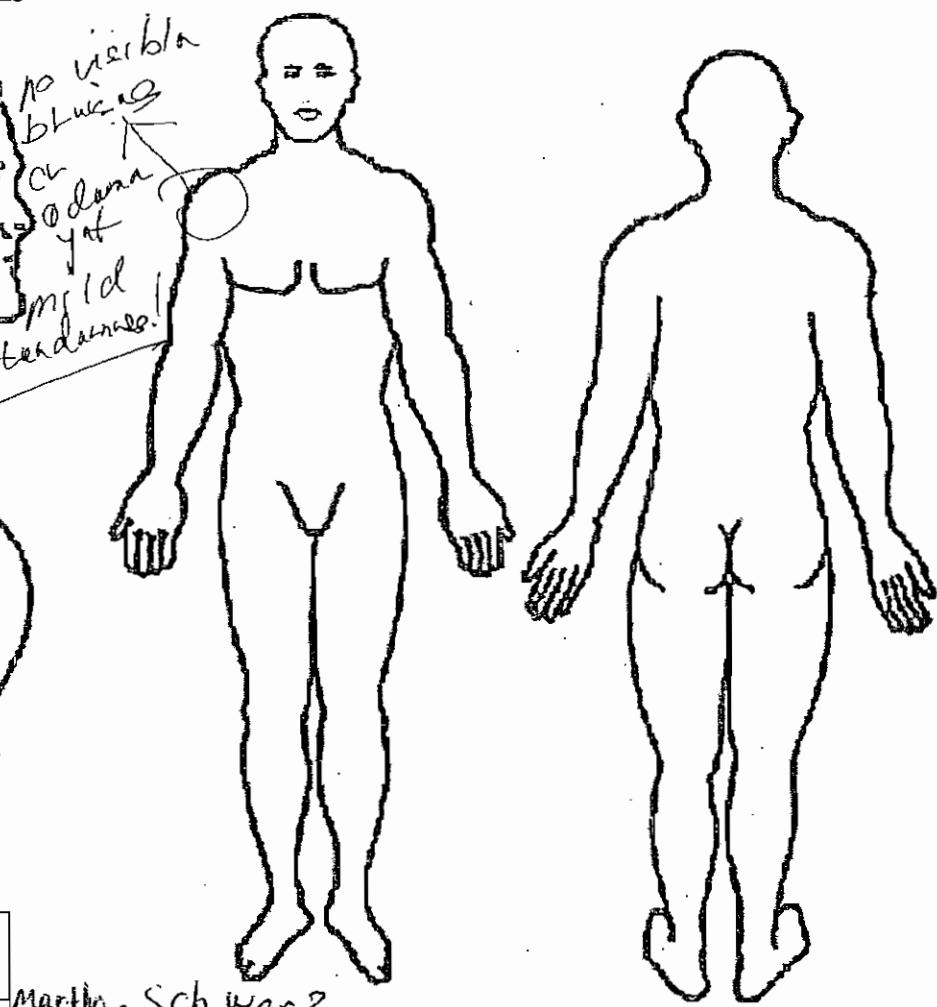
JEF STATEMENT IN SUBJECT'S WORDS OF THE CIRCUMSTANCES OF THE INJURY OR UNUSUAL OCCURRENCE

I was escorting 1114, and 1114 attempted to headbut me (hurt me) with his head). 1114 struck me on my L. shoulder with his

INJURIES FOUND? YES / NO */ - CL head!*

|   |    |
|---|----|
| brasoin/Scratch   | 1  |
| ctive Bleeding  | 2  |
| roken Bone  | 3  |
| ruise/Discolored Area                                       | 4  |
| urn   | 5  |
| islocation  | 6  |
| ried Blood  | 7  |
| resh Tattoo   | 8  |
| ut/Laceration/Slash   | 9  |
| C. Spray Area   | 10 |
| ain   | 11 |
| rotrusion   | 12 |
| 'uncure   | 13 |
| reddened Area   | 14 |
| skin Flap   | 15 |
| swollen Area  | 16 |
| Other   | 17 |
| implaq C6   | 18 |
| + mild pain   |    |
| -o his R. shoulder  | 19 |
| C. SPRAY EXPOSURE? YES / NO                                 |    |
| DECONTAMINATED? YES / NO                                    |    |
| Self-decontamination instructions given? <i>MA</i> YES / NO |    |
| Refused decontamination? YES / NO                           |    |
| Q 15 min. checks <input checked="" type="checkbox"/>        |    |
| Staff issued exposure packet? YES / NO                      |    |

|   |  |
|---|--|
| RN NOTIFIED/TIME<br><i>9:25</i>                   | PHYSICIAN NOTIFIED/TIME<br><i>M. Schwarz</i> |
| TIME/DISPOSITION<br><i>Received 12-21-05 9:45</i> |  |



|  |                       |                    |
|--|-----------------------|--------------------|
| REPORT COMPLETED BY/TITLE (PRINT AND SIGN)<br><i>M. Schwarz RN/PHN M. h.</i> | BADGE # <i>246969</i> | RDOs <i>Sat. 5</i> |
|--|-----------------------|--------------------|

(Medical data is to be included in progress note or emergency care record filed in UHR)

STATE OF CALIFORNIA  
**RIME / INCIDENT REPORT**  
**ARTC-STAFF REPORT**  
DC 837-C (Rev. 09/03)

PAGE 1 OF 2

INCIDENT LOG NUMBER

KVP-FBS-05-12-0125

|                             |                  |                |                                     |                                 |
|-----------------------------|------------------|----------------|-------------------------------------|---------------------------------|
| NAME: LAST<br><u>MEDINA</u> | FIRST<br><u></u> | MI<br><u>C</u> | DATE OF INCIDENT<br><u>12-21-05</u> | TIME OF INCIDENT<br><u>0920</u> |
|-----------------------------|------------------|----------------|-------------------------------------|---------------------------------|

|                       |                                |                                 |                                   |                                  |
|-----------------------|--------------------------------|---------------------------------|-----------------------------------|----------------------------------|
| OST #<br><u>21723</u> | POSITION<br><u>B-Recration</u> | YEARS OF SERVICE<br><u>2 YR</u> | DATE OF REPORT<br><u>12-21-05</u> | LOCATION OF INCIDENT<br><u>1</u> |
|-----------------------|--------------------------------|---------------------------------|-----------------------------------|----------------------------------|

|                  |                              |   |                                     |                              |
|------------------|------------------------------|---|-------------------------------------|------------------------------|
| DO's<br><u>T</u> | DUTY HOURS<br><u>06-1400</u> | DESCRIPTION OF CRIME / INCIDENT<br><u>Battery on a Police Officer</u> | CCR SECTION / RULE<br><u>3005 C</u> | <input type="checkbox"/> N/A |
|------------------|------------------------------|---|-------------------------------------|------------------------------|

| YOUR ROLE                                     | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER) | INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESS) |
|---|---|--|
| <input type="checkbox"/> PRIMARY              | <u>SGT. F. Jose</u>                             | <u>Higgins</u>                                   |
| <input checked="" type="checkbox"/> RESPONDER | <u>% G. Miranda</u>                             |  |
| <input type="checkbox"/> WITNESS              |   |  |
| <input type="checkbox"/> VICTIM               |   |  |
| <input type="checkbox"/> CAMERA               |   |  |

| FORCE USED BY YOU                            | WEAPONS USED BY YOU              | SHOTS FIRED BY YOU                |   |         |
|--|----------------------------------|-----------------------------------|---|---------|
| <input type="checkbox"/> WEAPON              | <input type="checkbox"/> MINI-14 | TYPE:                             | NO:                                     | NO:     |
| <input checked="" type="checkbox"/> PHYSICAL | <input type="checkbox"/> 9 MM    | <input type="checkbox"/> OC       |   | 9 MM    |
| <input type="checkbox"/> NONE                | <input type="checkbox"/> 38 CAL  | <input type="checkbox"/> CN       |   | 38 CAL  |
| FORCE OBSERVED BY YOU                        | <input type="checkbox"/> SHOTGUN | <input type="checkbox"/> CS       |   | MINI-14 |
| <input type="checkbox"/> WEAPON              | <input type="checkbox"/> 37 MM   | <input type="checkbox"/> OTHER:   |   |         |
| <input type="checkbox"/> PHYSICAL            | <input type="checkbox"/> 40 MM   | <input type="checkbox"/> 40 MULTI | <input checked="" type="checkbox"/> N/A |         |
| <input checked="" type="checkbox"/> NONE     | <input type="checkbox"/> HFRWS   | <input type="checkbox"/> BATON    |   |         |
|  |                                  | 37 MM                             |   |         |
|  |                                  | L8                                |   |         |
|  |                                  | 40 MM                             |   |         |
|  |                                  | 40 MULTI                          |   |         |
|  |                                  | SHOTGUN                           | <input checked="" type="checkbox"/> N/A |         |

| EVIDENCE COLLECTED BY YOU              | EVIDENCE DESCRIPTION                    | EVIDENCE DISPOSITION                    | BIO HAZARD                   | PPE                          |
|--|---|---|------------------------------|------------------------------|
| <input type="checkbox"/> YES           |   |   | <input type="checkbox"/> YES | <input type="checkbox"/> YES |
| <input checked="" type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> NO  | <input type="checkbox"/> NO  |

| REPORTING STAFF INJURED                | DESCRIPTION OF INJURY                   | LOCATION TREATED (HOSPITAL/CLINIC)      | FLUID EXPOSURE  | SCIF 3301 / 3067 COMPLETED              |
|--|---|---|---|---|
| <input type="checkbox"/> YES           |   |   | <input type="checkbox"/> BODILY <input checked="" type="checkbox"/> N/A | <input checked="" type="checkbox"/> YES |
| <input checked="" type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> UNKNOWN  | <input checked="" type="checkbox"/> NO  |
|  |   |   | <input type="checkbox"/> OTHER:   |   |

**NARRATIVE:**

On 12-21-05 at approximately 0920 hours while assigned as B- Recreation officer I responded to a code one alarm in BS. Upon arrival I was instructed by SGT. F. Jose to assist Officer G. Miranda in escorting Ym Higgins J-06160 (FBS-206L) out of BS. Officer Miranda and were escorting Higgins across the yard in handcuffs. Ym Higgins started saying "FUCKEN COPS." "I'm Higgins began throwing his head from left to right while saying"

 CHECK IF NARRATIVE IS CONTINUED ON PART C1

|   |                                  |   |   |                         |
|---|----------------------------------|---|---|-------------------------|
| SIGNATURE OF REPORTING STAFF<br><u>J. Medina</u>                    | TITLE<br><u>67379 C/o</u>        | BADGE #<br><u>67379</u>   | ID #<br><u>2461346</u>  | DATE<br><u>12-21-05</u> |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br><u>F. Neffman</u> | DATE RECEIVED<br><u>12-21-05</u> | APPROVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE<br><u>12-21-05</u> |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

Cop 11ance

Exhibit K-1

F CALIFORNIA

## E / INCIDENT REPORT

## C1-SUPPLEMENT

37-C1 (Rev. 09/03)

LAST

MED: NA

|   |  |
|---|--|
| PAGE <u>2</u> OF <u>2</u>   | INCIDENT LOG NUMBER<br>KUP-FBS-05-12-0125  |
| FIRST  | MI  |

OF INFORMATION:

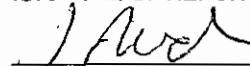
CONTINUATION OF REPORT

 CLARIFICATION OF REPORT ADDITIONAL INFORMATION

NARRATIVE: "Stupid mother F---ers." I GAVE 'M HIGGINS A  
 RECT ORDER TO STOP moving HIS Head side to side.  
 Suddenly observed 'M HIGGINS TURN TO HIS LEFT  
 & USE HIS HEAD IN A FORWARD MOTION TO STRIKE MY  
 RIGHT SHOULDER - I MAINTAINED GRASP OF 'M HIGGINS  
 LEFT ARM WITH MY RIGHT HAND AND USED MY LEFT  
 AND TO PUSH AGAINST HIGGINS CHEST AREA TO PUSH  
 HIGGINS DOWN TO THE GROUND IN A PRONE POSITION.  
 RESPONDING STAFF ARRIVED AND SGT F. JOSE THEN  
 RELEASED ME FROM THE ESCORT. I WAS INSTRUCTED  
 GO TO C.T.C FOR A 7219 MEDICAL EVALUATION.

 CHECK IF NARRATIVE IS CONTINUED ON ADDITIONAL C1

SIGNATURE OF REPORTING STAFF



TITLE

C/I

BADGE #

67379

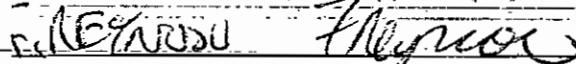
ID #

2461346

DATE

12-21-05

NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)



DATE RECEIVED

12-21-05

APPROVED

 YES  NO

CLARIFICATION NEEDED

 YES  NO

DATE

12-21-05

STATE OF CALIFORNIA

CRIME / INCIDENT REPORT  
ART C-STAFF REPORT

DC 837-C (Rev. 09/03)

| AME: LAST<br><i>Miranda</i>   |  | FIRST<br><i>[Redacted]</i>   | MI   | DATE OF INCIDENT<br>12-21-05  | TIME OF INCIDENT<br>0920   |  |
|---|--|--|--|---|--|--|
| OST #<br>221804   | POSITION<br>FB6 - Floor #1   | YEARS OF SERVICE<br>8 YR.  | MO.  | DATE OF REPORT<br>12-21-05  | LOCATION OF INCIDENT<br>FB - Recreational Yard                         |  |
| DO's<br>1/F   | DUTY HOURS<br>0600-1400  | DESCRIPTION OF CRIME / INCIDENT<br>Battery on A Peace officer  |  |   | CCR SECTION / RULE<br>3005(c) <input type="checkbox"/> N/A             |  |
| YOUR ROLE   | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)  |  |  | INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESS)  |  |  |
| <input checked="" type="checkbox"/> PRIMARY<br><input type="checkbox"/> RESPONDER<br><input type="checkbox"/> WITNESS<br><input type="checkbox"/> VICTIM<br><input type="checkbox"/> CAMERA | <i>Medina, J. (S)<br/>Copeland, J. (S)</i>   |  |  | <i>Higgins (J-06160)(S)</i>   |  |  |
| FORCE USED BY YOU   | WEAPONS USED BY YOU  |  |  | SHOTS FIRED BY YOU  |  |  |
| <input type="checkbox"/> WEAPON<br><input checked="" type="checkbox"/> PHYSICAL<br><input type="checkbox"/> NONE  | <input type="checkbox"/> MINI-14<br><input type="checkbox"/> 9 MM<br><input type="checkbox"/> 38 CAL<br><input type="checkbox"/> SHOTGUN<br><input type="checkbox"/> 37 MM<br><input type="checkbox"/> 40 MM<br><input type="checkbox"/> HFWRS | <input type="checkbox"/> CHEM. TYPE:<br><input type="checkbox"/> OC _____<br><input type="checkbox"/> CN _____<br><input type="checkbox"/> CS _____<br><input type="checkbox"/> OTHER: _____ | <input type="checkbox"/> L8  | <input type="checkbox"/> TYPE: 37 MM<br>38 CAL<br>40 MM<br>40 MULTI<br>SHOTGUN                                    | <input type="checkbox"/> NO: 9 MM<br>MINI-14<br>N/A                    |  |
| FORCE OBSERVED BY YOU<br><input type="checkbox"/> WEAPON<br><input type="checkbox"/> PHYSICAL<br><input checked="" type="checkbox"/> NONE   | <input type="checkbox"/> 40 MM<br><input type="checkbox"/> 40 MULTI<br><input type="checkbox"/> BATON  |  |  |   |  |  |
| EVIDENCE COLLECTED BY YOU   | EVIDENCE DESCRIPTION   |  | EVIDENCE DISPOSITION   |   | BIO HAZARD   | PPE  |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO  | <input checked="" type="checkbox"/> N/A  |  | <input checked="" type="checkbox"/> N/A  |   | <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO | <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO |
| REPORTING STAFF INJURED   | DESCRIPTION OF INJURY  | LOCATION TREATED (HOSPITAL / CLINIC)   | FLUID EXPOSURE   | SCIF 3301 / 3067 COMPLETED  |  |  |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO  | <input checked="" type="checkbox"/> N/A  | <input checked="" type="checkbox"/> N/A  | <input type="checkbox"/> BODILY<br><input type="checkbox"/> UNKNOWN<br><input type="checkbox"/> OTHER: | <input checked="" type="checkbox"/> N/A<br><input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO |  |  |

## NARRATIVE:

On Wednesday December 21, 2005 at approximately 0920 hours while working as the FB6 - Floor officer #1, I responded to a Code One Alarm in FB5. Upon arrival I was instructed by Sgt. F. Jose to assist officer J. Medina in escorting Inmate Higgins (J-06160) (FB5-206-low) out of FB5. Officer J. Medina and I were escorting Higgins across the Recreational yard in handcuffs, when Higgins started to throw his head from left to right. He started to yell, "Fucken cops, you stupid Motherfuckers."

 CHECK IF NARRATIVE IS CONTINUED ON PART C1

|  |                                  |   |   |                         |
|--|----------------------------------|---|---|-------------------------|
| SIGNATURE OF REPORTING STAFF<br><i>Miranda</i>                 | TITLE<br><i>Clo</i>              | BADGE #<br><i>58657</i>   | ID #<br><i>2461651</i>  | DATE<br><i>12-21-05</i> |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br><i>FEYEN</i> | DATE RECEIVED<br><i>12-21-05</i> | APPROVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE<br><i>12-21-05</i> |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

EXHIBIT L-1

## INCIDENT REPORT

## C1-SUPPLEMENT

37-C1 (Rev. 09/03)

PAGE 2 OF 2

INCIDENT LOG NUMBER

KVP-FB5-05-12-0125

LAST

FIRST

MI

Miranda

OF INFORMATION:

CONTINUATION OF REPORT

 CLARIFICATION OF REPORT ADDITIONAL INFORMATION

NARRATIVE:

Officer J. Medina gave Higgins a direct order to stop. Higgins suddenly spun his body to his left to face Medina, breaking my grasp of his right arm. He then used his head in a forward motion to strike Medina on his shoulder area. I took a hold of Higgins's shirt by the collar area behind his neck with my left hand and used my right hand to grab his right arm to pull him down to the ground. Higgins got down in a prone position. Officer J. Copeland and I assisted Higgins his feet, with Higgins complying and escorted him to the Facility Medical Clinic for a medical evaluation. I placed him in Clinic Holding Cell #2. and conducted an unclothed body search on him with negative results.

 CHECK IF NARRATIVE IS CONTINUED ON ADDITIONAL C1

SIGNATURE OF REPORTING STAFF

Miranda

TITLE

C/o

BADGE #

58657

ID #

2461651

DATE

12-21-05

NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)

REYNOSO-Miranda

DATE RECEIVED

12-21-05

APPROVED

 YES  NO

CLARIFICATION NEEDED

 YES  NO

DATE

12-21-05

STATE OF CALIFORNIA

## CRIME / INCIDENT REPORT

## ARTC-STAFF REPORT

DC 837-C (Rev. 09/03)

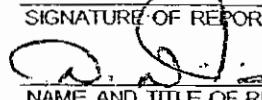
|   |   |  |  |   |
|---|---|--|--|---|
| NAME: LAST <b>WILLIAMS</b>  |   | FIRST <b>[REDACTED]</b>  | PAGE <b>1</b> OF <b>2</b>  | INCIDENT LOG NUMBER <b>KUD-FBS-05-12-0125</b>   |
| POST # <b>21710</b>   | POSITION <b>B YARD OFFICER #2</b>       | YEARS OF SERVICE <b>9 YR 8 MO.</b>   | MI <b>12</b>   | DATE OF INCIDENT <b>12/21/05</b> TIME OF INCIDENT <b>0920</b>   |
| DO's <b>SM</b>  | DUTY HOURS <b>0600-1400</b>             | DESCRIPTION OF CRIME / INCIDENT <b>BATTERY ON A PEACE OFFICER</b>  | CCR SECTION / RULE <b>3005 (c)</b> <input type="checkbox"/> N/A  |   |
| YOUR ROLE   |   | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER) <b>M. LOZANO (S)</b>   | INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESS) <b>HIGGINS (J-06160) S</b><br><b>WOODS (P-71320) S</b>  |   |
| FORCE USED BY YOU   |   | WEAPONS USED BY YOU  | SHOTS FIRED BY YOU   |   |
| <input checked="" type="checkbox"/> WEAPON<br><input checked="" type="checkbox"/> PHYSICAL<br><input type="checkbox"/> NONE |   | <input type="checkbox"/> MINI-14<br><input type="checkbox"/> 9 MM<br><input type="checkbox"/> 38 CAL<br><input type="checkbox"/> SHOTGUN<br><input type="checkbox"/> 37 MM<br><input type="checkbox"/> 40 MM<br><input type="checkbox"/> HFRWS | <small>CHEM TYPE:</small><br><input checked="" type="checkbox"/> OC <b>MK 9</b><br><input type="checkbox"/> CN<br><input type="checkbox"/> CS<br><input type="checkbox"/> OTHER: _____ | <small>TYPE: NO: NO:</small><br>37 MM _____ 9 MM _____<br>L8 _____ 38 CAL _____<br>40 MM _____ MINI-14 _____<br>40 MULTI _____<br>SHOTGUN <input checked="" type="checkbox"/> N/A |
| EVIDENCE COLLECTED BY YOU   |   | EVIDENCE DESCRIPTION   | EVIDENCE DISPOSITION   | BIO HAZARD <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO  |   | <input checked="" type="checkbox"/> N/A  | <input checked="" type="checkbox"/> N/A  | PPE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO   |
| REPORTING STAFF INJURED   | DESCRIPTION OF INJURY                   |  | LOCATION TREATED (HOSPITAL / CLINIC)   | FLUID EXPOSURE <input type="checkbox"/> BODILY <input checked="" type="checkbox"/> N/A  |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO  | <input checked="" type="checkbox"/> N/A |  | <input checked="" type="checkbox"/> N/A  | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO   |

## NARRATIVE:

ON 12/21/05, AT APPROXIMATELY 0920 HRS WHILE PERFORMING MY DUTIES AS B YARD OFFICER #2, CORRECTIONAL OFFICER M. LOZANO, AND MYSELF WERE CONDUCTING UNCLOTHED BODY SEARCHES OF INMATES HIGGINS (J-06160) B/S-206L AND WOODS (P-71320) B/S-206U DURING THE MASS HOUSING UNIT SEARCH B/S.

AFTER BOTH INMATES HAD DRESSED I PLACED WOODS IN HANDCUFFS AND ORIENTED HIM TO GO TO THE BACK OF THE

CHECK IF NARRATIVE IS CONTINUED ON PART C1

|   |                               |  |  |                      |
|---|-------------------------------|--|--|----------------------|
| SIGNATURE OF REPORTING STAFF  | TITLE <b>C6</b>               | BADGE # <b>54203</b>   | ID # <b>2461519</b>  | DATE <b>12/21/05</b> |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE) <b>José O. Lee</b>   | DATE RECEIVED <b>12/21/05</b> | APPROVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE <b>12/21/05</b> |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

EXHIBIT m.

INCIDENT REPORT  
C1-SUPPLEMENT  
C1 (Rev. 09/03)

DEPARTMENT OF CORRECTIONS

PAGE 2 OF 2

INCIDENT LOG NUMBER

KUD-FBS-05-12-0125

AST

FIRST

MI

WILLIAMS

R

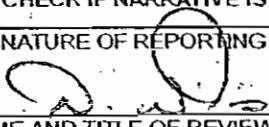
INFORMATION:

CONTINUATION OF REPORT

 CLARIFICATION OF REPORT ADDITIONAL INFORMATION

NARRATIVE: CELL. I THEN ORDERED HIGGINS TO STEP TO THE DOOR AND FIE THE BACK WALL. AS I TOOK HIGGINS BY HIS LEFT WRIST IN ORDER TO PLACE HIM IN HANDCUFFS, HIGGINS DROD AROUND TO HIS LEFT SIDE AND TOOK A BLADED STANCE WITH CLINCHED FISTS. OFFICER M. LOZANO AND I DUSITED HIGGINS TOWARDS THE BACK OF THE CELL AND ORDERED BOTH HIGGINS AND WOODS TO GET DOWN AND PRONE OUT. BOTH INMATES REFUSED OUR ORDERS. HIGGINS ATTEMPTED TO RUN TOWARDS US WITH CLINCHED FISTS. I THEN PRESSED HIGGINS IN THE FACIAL AREA WITH A 5-7 SECOND BURST OF O.C. PEPPER SPRAY. THE BURST OF O.C. PEPPER SPRAY HAD THE DESIRED EFFECT, AND HIGGINS HALTED HIS ATTEMPTED ATTACK. HIGGINS AND WOODS THEN PRONED OUT FACE DOWN ON THE CELL FLOOR. OFFICER M. LOZANO THEN PLACED HIGGINS IN HANDCUFFS. RESPONDING STAFF PRIORIZED AND ESCORTED HIGGINS AND WOODS TO B FACILITY MEDICAL FOR DECONTAMINATION AND MEDICAL EVALUATION.

CHECK IF NARRATIVE IS CONTINUED ON ADDITIONAL C1

| NATURE OF REPORTING STAFF  | TITLE         | BADGE #   | ID #  | DATE     |
|--|---------------|---|---|----------|
|  | C6            | 54203   | 2461519   | 12/21/05 |
| ME AND TITLE OF REVIEWER (PRINT / SIGNATURE)                                       | DATE RECEIVED | APPROVED  | CLARIFICATION NEEDED  | DATE     |
| Sgt. P. Jose (P)   | 12/21/05      | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | 12/21/05 |

STATE OF CALIFORNIA  
CRIME / INCIDENT REPORT  
ARTC-STAFF REPORT  
DC 837-C (Rev. 09/03)

DEPARTMENT OF CORRECTIONS

|   |                                |   |  |  |  |   |
|---|--------------------------------|---|--|--|--|---|
|   |                                | PAGE <u>1</u> OF <u>2</u>   | INCIDENT LOG NUMBER<br><u>KVP-F05-03-12-0125</u>   |  |  |   |
| NAME: LAST<br><u>LORANU</u>   |                                | FIRST<br><u>[REDACTED]</u>  | MI<br><u></u>  |  |  |   |
| POST #<br><u>21706</u>  | POSITION<br><u>B-SYC H-4</u>   | YEARS OF SERVICE<br><u>5 YR 8</u>   | DATE OF REPORT<br><u>MO. 12/21/05</u>  |  |  |   |
| IDO's<br><u>WF</u>  | DUTY HOURS<br><u>0600-1400</u> | DESCRIPTION OF CRIME / INCIDENT<br><u>BATTLEY ON A PEACE OFFICER</u>  |  |  |  |   |
| YOUR ROLE   |                                | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)   |  |  |  |   |
| <input checked="" type="checkbox"/> PRIMARY<br><input type="checkbox"/> RESPONDER<br><input type="checkbox"/> WITNESS<br><input type="checkbox"/> VICTIM<br><input type="checkbox"/> CAMERA |                                | <u>% D. WILLIAMS</u><br><u>(S)</u>  | <u>WOODS P-71320</u><br><u>(S)</u><br><u>HIGGINS J-06160</u><br><u>(S)</u>   |  |  |   |
| FORCE USED BY YOU   |                                | WEAPONS USED BY YOU   |  |  |  |   |
| <input checked="" type="checkbox"/> WEAPON<br><input checked="" type="checkbox"/> PHYSICAL<br><input type="checkbox"/> NONE   |                                | <input type="checkbox"/> MINI-14<br><input type="checkbox"/> 9 MM<br><input type="checkbox"/> 38 CAL<br><input type="checkbox"/> SHOTGUN<br><br><input type="checkbox"/> 37 MM <input type="checkbox"/> L8<br><input type="checkbox"/> 40 MM <input type="checkbox"/> 40 MULTI<br><input type="checkbox"/> HWRNS <input type="checkbox"/> BATON | CHEM. TYPE:<br><br><input checked="" type="checkbox"/> OC MK-96<br><input type="checkbox"/> CN<br><input type="checkbox"/> CS<br><input type="checkbox"/> OTHER: | TYPE:<br><br>37 MM<br>L8<br>40 MM<br>40 MULTI<br>SHOTGUN   | NO:<br><br>9 MM<br>38 CAL<br>MINI-14<br><br><input checked="" type="checkbox"/> N/A                      | NO:<br><br>9 MM<br>38 CAL<br>MINI-14<br><br><input checked="" type="checkbox"/> N/A |
| EVIDENCE COLLECTED BY YOU   |                                | EVIDENCE DESCRIPTION<br><br><input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO <u>NA</u>  | EVIDENCE DISPOSITION<br><br><input checked="" type="checkbox"/> NA   | BIO HAZARD<br><br><input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO   | PPE<br><br><input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO                        |   |
| REPORTING STAFF INJURED   | DESCRIPTION OF INJURY          |   | LOCATION TREATED (HOSPITAL/CLINIC)<br><br><input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO <u>NA</u>                                       | FLUID EXPOSURE<br><br><input type="checkbox"/> BODILY<br><input type="checkbox"/> UNKNOWN<br><input type="checkbox"/> OTHER:<br><br><input checked="" type="checkbox"/> NA | SCIF 3301 / 3067 COMPLETED<br><br><input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO |   |

## NARRATIVE:

ON DECEMBER 21, 2005 AT APPROX. 0920 HIS WALL PERIODICALLY MY DUTIES AS B-YARD SEARCH & ESCORT OFFICER #4, I WAS ASSISTING OFFICER D. WILLIAMS PERFORM AN ULLACHT BODY SEARCH ON INMATE HIGGINS J-06160 (B-S 2064) AND INMATE WOODS P-71320 (B-S 2061) DURING THE MASS SEARCH OF B-YARD BUILDING #5, OFFICER D. WILLIAMS CUFFED INMATE WOODS AND TOLD HIM TO GO TO THE BACK OF THE CELL, AS HE WAS GOING TO CUFF INMATE HIGGINS. INMATE HIGGINS SPUN AROUND TO HIS LEFT, TOOK A BLADED STANCE AND PLACED HIS HANDS ABOUT CHIN LEVEL AND INTO A FIST.

 CHECK IF NARRATIVE IS CONTINUED ON PART C1

|   |                                  |   |   |                         |
|---|----------------------------------|---|---|-------------------------|
| SIGNATURE OF REPORTING STAFF<br>  | TITLE<br><u>%</u>                | BADGE #<br><u>61613</u>   | ID #<br><u>2461046</u>  | DATE<br><u>12/21/05</u> |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br><br><u>Sgt. B. Jake [Signature]</u> | DATE RECEIVED<br><u>12/21/05</u> | APPROVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE                    |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

EXHIBITEN-1

## / INCIDENT REPORT

## C1-SUPPLEMENT

C1 (Rev. 09/03)

|                           |   |
|---------------------------|---|
| PAGE <u>2</u> OF <u>2</u> | INCIDENT LOG NUMBER<br>KVP-FBS-05-12-0125 |
|---------------------------|---|

AST

FIRST

MI

L2 AND

INFORMATION:

CONTINUATION OF REPORT

 CLARIFICATION OF REPORT ADDITIONAL INFORMATION

NARRATIVE:

OFFICER D. WILLIAMS AND I PUSHED INMATE HIGGINS TOWARDS THE BACK OF THE CELL, AND ORDERED BOTH INMATES TO GET DOWN WITH NEGATIVE RESULTS, HIGGINS GAINED HIS BALANCE HE ATTEMPTED TO RUN TOWARDS THE DOOR WITH ENCLINED FISTS. INMATE WOODS P-71320 ALSO TURNED AROUND AND FACED THE DOOR, I PULLED MY MK-90 OC PEPPER SPRAY AND ORDERED BOTH INMATES TO GET DOWN WITH NEGATIVE RESULTS, I THEN DEPLOYED MY MK-90 OC PEPPER SPRAY WITH A 5-7 SECOND LST, INMATE HIGGINS GOT SPRAYED IN THE FACIAL AREA. AS THE OC PEPPER SPRAY HAD THE DESIRED EFFECT BOTH INMATES PILED OUT FACE DOWN. I PLACED INMATE HIGGINS IN HANDCUFFS, RESPONDING STAFF ARRIVED AND ESCORTED BOTH INMATES OUT OF THE UNIT TO THE PROGRAM MEDICAL OFFICE FOR A MEDICAL EVALUATION (7219) AND CONTAMINATION.

CHECK IF NARRATIVE IS CONTINUED ON ADDITIONAL C1

SIGNATURE OF REPORTING STAFF

TITLE

TO

BADGE #

61613

ID #

2461046

DATE

12/21/05

ME AND TITLE OF REVIEWER (PRINT / SIGNATURE)

DATE RECEIVED

12/21/05

APPROVED

 YES  NO

CLARIFICATION NEEDED

 YES  NO

DATE

12-21-05

Information: Original: Incident Package — Canary: Reporting Employee — Pink: Reviewing Supervisor

D. J. R. B. n.s

N-2

## CRIME / INCIDENT REPORT

## RT C-STAFF REPORT

C 837-C (Rev. 09/03)

PAGE 01 OF 02

DEPARTMENT OF CORRECTIONS

INCIDENT LOG NUMBER

KVPFB5-05-12-0125

|   |  |  |   |   |  |
|---|--|--|---|---|--|
| ME: LAST<br>GIBBS                           | FIRST<br>[REDACTED]  | MI<br>R  | DATE OF INCIDENT<br>12-21-05  | TIME OF INCIDENT<br>0920  |  |
| ST #<br>21791                               | POSITION<br>B5 CONTROL   | YEARS OF SERVICE<br>4 YR. 1 MO.                  | DATE OF REPORT<br>12-21-05  | LOCATION OF INCIDENT<br>B-5 206                                     |  |
| O's DUTY HOURS<br>IS 000-1400               | DESCRIPTION OF CRIME / INCIDENT<br>BATTERY ON A PEACE OFFICER    | CCR SECTION / RULE<br>3008(c)                    |   |   |  |
| YOUR ROLE                                   | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)                  | INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESS) |   |   |  |
| <input type="checkbox"/> PRIMARY            | Gibbs et al (s)  | Woods P71320(g)<br>Higginson J06160(s)           |   |   |  |
| <input type="checkbox"/> RESPONDER          |  |  |   |   |  |
| <input checked="" type="checkbox"/> WITNESS |  |  |   |   |  |
| <input type="checkbox"/> VICTIM             |  |  |   |   |  |
| <input type="checkbox"/> CAMERA             |  |  |   |   |  |
| FORCE USED BY YOU                           | WEAPONS USED BY YOU  | SHOTS FIRED BY YOU                               |   |   |  |
| <input type="checkbox"/> WEAPON             | <input type="checkbox"/> MINI-14      CHEM. TYPE:                | TYPE:  | NO:   | NO:   |  |
| <input type="checkbox"/> PHYSICAL           | <input type="checkbox"/> 9 MM                                    | 37 MM  |   | 9 MM  |  |
| <input checked="" type="checkbox"/> NONE    | <input type="checkbox"/> 38 CAL                                  | L8   |   | 38 CAL  |  |
| FORCE OBSERVED BY YOU                       | <input type="checkbox"/> SHOTGUN                                 | 40 MM  |   | MINI-14   |  |
| <input type="checkbox"/> WEAPON             | <input type="checkbox"/> 37 MM <input type="checkbox"/> L8       | 40 MULTI   |   | <input checked="" type="checkbox"/> N/A                             |  |
| <input type="checkbox"/> PHYSICAL           | <input type="checkbox"/> 40 MM <input type="checkbox"/> 40 MULTI | SHOTGUN  |   |   |  |
| <input checked="" type="checkbox"/> NONE    | <input type="checkbox"/> HFWRS <input type="checkbox"/> BATON    |  |   |   |  |
| EVIDENCE COLLECTED BY YOU                   | EVIDENCE DESCRIPTION   | EVIDENCE DISPOSITION                             |   | BIO HAZARD  | PPE                                    |
| <input type="checkbox"/> YES                |  | <input checked="" type="checkbox"/> N/A          |   | <input type="checkbox"/> YES  | <input type="checkbox"/> YES           |
| <input checked="" type="checkbox"/> NO      | <input checked="" type="checkbox"/> N/A                          | <input checked="" type="checkbox"/> N/A          |   | <input checked="" type="checkbox"/> NO                              | <input checked="" type="checkbox"/> NO |
| REPORTING STAFF INJURED                     | DESCRIPTION OF INJURY  | LOCATION TREATED (HOSPITAL / CLINIC)             | FLUID EXPOSURE  | SCIF 3301 / 3067 COMPLETED  |  |
| <input type="checkbox"/> YES                |  |  | <input type="checkbox"/> BODILY <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> YES  |  |
| <input checked="" type="checkbox"/> NO      | <input checked="" type="checkbox"/> N/A                          | <input checked="" type="checkbox"/> N/A          | <input type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER: _____  | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |  |

## NARRATIVE:

ON DECEMBER 21<sup>ST</sup>, 2005 AT ABOUT 0920 HOURS WHILE CONDUCTING MY ASSIGNED DUTIES AS B-5 CONTROL BOOTH OFFICER. I OFFICER M. GIBBS OBSERVED BOTH INMATE HIGGINS J06160, B5-206L AND INMATE WOODS P71320, B5 206U NOT COMPLYING TO STAFFS ORDERS TO COME OUT OF THEIR CELL. I IMMEDIATELY DRESSED MY PERSONAL ALARM DEVICE AND ADDITIONAL STAFF MEMBERS RESPONDED BY

 CHECK IF NARRATIVE IS CONTINUED ON PART C1

|  |                               |  |   |                  |
|--|-------------------------------|--|---|------------------|
| SIGNATURE OF REPORTING STAFF<br><i>Unj</i>                       | TITLE<br>CORRECTIONAL OFFICER | BADGE #<br>14458   | ID #<br>2113440   | DATE<br>12-21-05 |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br><i>C. JOSE</i> | DATE RECEIVED<br>12-21-05     | APPROVED<br><input type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE<br>12-21-05 |

STATE OF CALIFORNIA  
IME / INCIDENT REPORT  
RT C1- SUPPLEMENT  
C 837-C1 (Rev. 09/03)

PAGE 02 OF 02

INCIDENT LOG NUMBER

KVPFB5-05-12-0125

ME: LAST

GIBBS

FIRST

MI

R

PE OF INFORMATION:

 CONTINUATION OF REPORT CLARIFICATION OF REPORT ADDITIONAL INFORMATION

NARRATIVE:

ESCORTING BOTH INMATES OUT OF THE  
BUILDING. THIS CONCLUDES THIS REPORT.

 CHECK IF NARRATIVE IS CONTINUED ON ADDITIONAL C1

SIGNATURE OF REPORTING STAFF

|  |                                  |   |   |                  |
|--|----------------------------------|---|---|------------------|
| SIGNATURE OF REPORTING STAFF                   | TITLE<br>CORRECTIONAL<br>OFFICER | BADGE #<br>14458  | ID #<br>2113440   | DATE<br>12/21/05 |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE) | DATE RECEIVED<br>12/21/05        | APPROVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE<br>12/21/05 |

NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)

C. Jose, C. Jan

DATE RECEIVED

12/21/05

APPROVED

 YES  NO

CLARIFICATION NEEDED

 YES  NO

STATE OF CALIFORNIA  
**CRIME / INCIDENT REPORT**  
**PART C-STAFF REPORT**  
CDCR 837-C (Rev. 07/05)

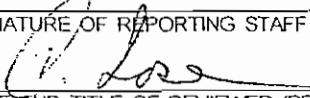
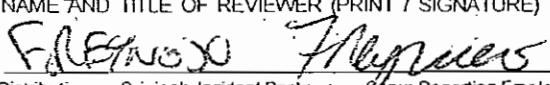
DEPARTMENT OF CORRECTIONS AND REHABILITATION

|   |                                    |   |   |   |
|---|------------------------------------|---|---|---|
|   |                                    | PAGE <u>1</u> OF <u>1</u>   |   | INCIDENT LOG NUMBER<br>KVP-FBS-05-12-0125   |
| NAME: LAST<br>JOSE  |                                    | FIRST<br><u>██████████</u>  | MI<br>S   | INCIDENT DATE<br>12/21/05   |
| POST #<br>220326  | POSITION<br>Facility B Program Sgt | YEARS OF SERVICE<br>10 Years 11 Months  | DATE OF REPORT<br>12/21/05  | INCIDENT TIME<br>09:20  |
| RDO's<br>S/S  | DUTY HOURS<br>0600/1400            | DESCRIPTION OF CRIME / INCIDENT<br>Battery on a Peace Officer   |   | LOCATION OF INCIDENT<br>Facility B-5 212  |
|   |                                    |   |   | CCR SECTION / RULE<br>3005 (c) <input checked="" type="checkbox"/>  |
| YOUR ROLE   |                                    | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)   |   | INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESS)  |
| <input type="checkbox"/> PRIMARY  | C. JOSE Sgt (S)                    |   | I/M Woods P71320 (S)  |   |
| <input checked="" type="checkbox"/> RESPONDER   | D. Williams C/O (S)                |   | I/M Higgins J06160 (S)  |   |
| <input type="checkbox"/> WITNESS  | M. Lozano C/O (S)                  |   |   |   |
| <input type="checkbox"/> VICTIM   |                                    |   |   |   |
| <input type="checkbox"/> CAMERA   |                                    |   |   |   |
| FORCE USED BY YOU   |                                    | WEAPONS AND SHOTS FIRED BY YOU  |   | CHEMICAL AGENTS USED BY YOU   |
| <input type="checkbox"/> WEAPON<br><input type="checkbox"/> PHYSICAL<br><input type="checkbox"/> CHEMICAL<br><input checked="" type="checkbox"/> NONE |                                    | NO:<br><br><input type="checkbox"/> MINI-14 _____<br><input type="checkbox"/> 9 MM _____<br><input type="checkbox"/> 38 CAL _____<br><input type="checkbox"/> SHOTGUN _____ | NO:<br><br><input type="checkbox"/> 37 MM _____<br><input type="checkbox"/> 40 MM _____<br><input type="checkbox"/> L8 _____<br><input type="checkbox"/> 40 MULTI _____<br><input type="checkbox"/> HFWRS _____<br><input type="checkbox"/> BATON _____ | TYPE:<br><br><input type="checkbox"/> OC _____<br><input type="checkbox"/> CN _____<br><input type="checkbox"/> CS _____<br><input type="checkbox"/> OTHER: _____ |
| FORCE OBSERVED BY YOU   |                                    | <input checked="" type="checkbox"/> N/A   |   | <input checked="" type="checkbox"/> N/A   |
| <input type="checkbox"/> WEAPON<br><input type="checkbox"/> PHYSICAL<br><input type="checkbox"/> CHEMICAL<br><input checked="" type="checkbox"/> NONE |                                    |   |   |   |
| EVIDENCE COLLECTED BY YOU   |                                    | EVIDENCE DESCRIPTION  | EVIDENCE DISPOSITION  | BIO HAZARD  |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO  |                                    | <input checked="" type="checkbox"/> N/A   | <input checked="" type="checkbox"/> N/A   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> N/A   |
| REPORTING STAFF INJURED   |                                    | DESCRIPTION OF INJURY   | LOCATION TREATED (HOSPITAL / CLINIC)  | FLUID EXPOSURE  |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO  |                                    | <input checked="" type="checkbox"/> N/A   | <input checked="" type="checkbox"/> N/A   | <input type="checkbox"/> BODILY <input checked="" type="checkbox"/> N/A<br><input type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER: _____                 |
|   |                                    |   |   | SCIF 3301 / 3067 COMPLETED  |

## NARRATIVE:

On December 21, 2005 at approximately 0920 hours, while performing duties as Facility B Program Sergeant, I was supervising the cell searches in housing unit B-5 due to the modified program. I heard the alarm activation in B-5 activated by Control Booth Officer Gibbs I looked up at the top tier and saw officers rushing toward cell 206. I responded to the top tier cell 206 and observed officers Williams and Lozano assisting inmates Woods P71320 FAB-5 206U and Higgins J06160 FAB-5 206L off the cell floor. I instructed officers Medina, Miranda, Mosqueda and Palmer to escort both inmates to the MTA for a Medical Evaluation report CDC 7219 and decontamination. While escorting inmate Higgins in the middle of the yard he had broke loose from officer Miranda grasp turning and attempted to head butt Medina in the shoulder area. It was necessary to force him to the ground. Once staff had control officers Miranda and Copeland assisted Higgins up to his feet. I instructed Medina if he needed medical attention and to go to CTC for a medical Evaluation CDC 7219. Officer Copeland assisted Miranda in escorting Higgins to the MTA for CDC 7219. Subsequently he was placed in holding cell #2.

 CHECK IF NARRATIVE IS CONTINUED ON PART C1

|  |                    |                           |   |   |
|--|--------------------|---------------------------|---|---|
| SIGNATURE OF REPORTING STAFF<br>                  | TITLE<br>Sergeant. | BADGE #<br>50978/2461350  |   | DATE<br>12/21/05  |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br> |                    | DATE RECEIVED<br>12/21/05 | APPROVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
|  |                    |                           |   | DATE<br>12/21/05  |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

Exhibit = P-1

|  |   |   |   |  |
|--|---|---|---|--|
| NAME / LAST<br><b>Badger</b>   |   | FIRST<br>[REDACTED]   | ML<br><b>E</b>  | INCIDENT LOG NUMBER<br><b>KVP-FBS-05-12-0125</b>   |
| PAGE <b>1</b> OF <b>2</b>  |   |   |   |  |
| OST #<br><b>21718</b>  | POSITION<br><b>B upper yard observation</b> | YEARS OF SERVICE<br><b>3 YR</b>   | DATE OF REPORT<br><b>12-21-05</b>   | TIME OF INCIDENT<br><b>0920</b>  |
| DO's<br><b>1/T</b>   | DUTY HOURS<br><b>0600-1400</b>              | DESCRIPTION OF CRIME / INCIDENT<br><b>Battery on a Peace officer</b>  |   | CCR SECTION / RULE<br><b>3005 (e)</b>  |
| YOUR ROLE  |   | WITNESSES (PREFACE S-STAFF, V-VISITOR, O-OTHER)   |   | INMATES (PREFACE S-SUSPECT, V-VICTIM, W-WITNESS)   |
| <input type="checkbox"/> PRIMARY   | J. Meding (S)                               |   |   | Woods P-71320 (S)  |
| <input type="checkbox"/> RESPONDER   | G. Miranda (S)                              |   |   | Higgins J06160 (S)   |
| <input checked="" type="checkbox"/> WITNESS  | J. Mosqueda (S)                             |   |   |  |
| <input type="checkbox"/> VICTIM  | J. Palmer (S)                               |   |   |  |
| <input type="checkbox"/> CAMERA  |   |   |   |  |
| FORCE USED BY YOU  |   | WEAPONS USED BY YOU   |   | SHOTS FIRED BY YOU   |
| <input type="checkbox"/> WEAPON<br><input type="checkbox"/> PHYSICAL<br><input checked="" type="checkbox"/> NONE |   | <input type="checkbox"/> MINI-14<br><input type="checkbox"/> 9 MM<br><input type="checkbox"/> 38 CAL<br><input type="checkbox"/> SHOTGUN<br><br><input type="checkbox"/> 37 MM <input type="checkbox"/> L8<br><input type="checkbox"/> 40 MM <input type="checkbox"/> 40 MULTI<br><input type="checkbox"/> HFWRS <input type="checkbox"/> BATON | CHEM. TYPE:<br><br><input type="checkbox"/> OC _____<br><input type="checkbox"/> CN _____<br><input type="checkbox"/> CS _____<br><input type="checkbox"/> OTHER: _____ | TYPE: NO: NO:<br><br>37 MM _____ 9 MM _____<br>L8 _____ 38 CAL _____<br>40 MM _____ MINI-14 _____<br>40 MULTI _____ <input checked="" type="checkbox"/> N/A<br>SHOTGUN _____ |
| FORCE OBSERVED BY YOU  |   |   |   |  |
| <input type="checkbox"/> WEAPON<br><input type="checkbox"/> PHYSICAL<br><input checked="" type="checkbox"/> NONE |   |   |   |  |
| EVIDENCE COLLECTED BY YOU  |   | EVIDENCE DESCRIPTION  |   | EVIDENCE DISPOSITION   |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO   |   | <input checked="" type="checkbox"/> N/A   |   | <input checked="" type="checkbox"/> N/A  |
| REPORTING STAFF INJURED  |   | DESCRIPTION OF INJURY   |   | LOCATION TREATED (HOSPITAL/CLINIC)   |
| <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO   |   | <input checked="" type="checkbox"/> N/A   |   | <input type="checkbox"/> BOOBY <input checked="" type="checkbox"/> N/A<br><input type="checkbox"/> UNKNOWN<br><input type="checkbox"/> OTHER: _____                          |
|  |   |   |   | SCIF 3301 / 3067 COMPLETED   |
|  |   |   |   | <input type="checkbox"/> YES<br><input checked="" type="checkbox"/> NO   |

**NARRATIVE:**

On Wednesday, December 21, 2005 at approximately 0920 hours, I was performing my duties as Bravo facility upper yard observation. I saw 2 black inmates later identified as inmate Woods P-71320 housed in B5-206U and inmate Higgins J06160 housed in B5-206L being escorted across the recreation yard by officers J. Meding, G. Miranda, J. Mosqueda, and J. Palmer. I turned my attention to clearing the patio for the escort and I heard someone yell, Get down.

CHECK IF NARRATIVE IS CONTINUED ON PART C1

|   |                                  |                         |                                   |                         |
|---|----------------------------------|-------------------------|-----------------------------------|-------------------------|
| SIGNATURE OF REPORTING STAFF<br><b>D. Badger</b>                  | TITLE<br><b>CIO</b>              | BADGE #<br><b>65455</b> | ID #<br><b>2461517</b>            | DATE<br><b>12-21-05</b> |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br><b>F. Negus</b> | DATE RECEIVED<br><b>12-21-05</b> | APPROVED<br><b>ES</b>   | CLARIFICATION NEEDED<br><b>NO</b> | DATE<br><b>12-21-05</b> |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

Exhibit 9-1

STATE OF CALIFORNIA  
**CRIME / INCIDENT REPORT**  
**PART C1-SUPPLEMENT**  
CDC 837-C1 (Rev. 09/03)

DEPARTMENT OF CORRECTIONS

PAGE 2 OF 2

INCIDENT LOG NUMBER

KVP-FBS-0512-0125

NAME: LAST

Bogdger

FIRST

MI  
E

TYPE OF INFORMATION:

 CONTINUATION OF REPORT CLARIFICATION OF REPORT ADDITIONAL INFORMATION

## NARRATIVE:

I turned my attention back to the escort and the inmates were already down. The officers assisted the inmates back to their feet and were escorted to the M.T.A. clinic without further incident. This concludes my involvement in this incident.

 CHECK IF NARRATIVE IS CONTINUED ON ADDITIONAL C1

|   |                                  |   |   |                         |
|---|----------------------------------|---|---|-------------------------|
| SIGNATURE OF REPORTING STAFF<br><u>D. Ba</u>                            | TITLE<br><u>C/O</u>              | BADGE #<br><u>65455</u>   | ID #<br><u>2461517</u>  | DATE<br><u>12-21-05</u> |
| NAME AND TITLE OF REVIEWER (PRINT / SIGNATURE)<br><u>F. Lewis Myers</u> | DATE RECEIVED<br><u>12-21-05</u> | APPROVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | CLARIFICATION NEEDED<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | DATE<br><u>12-21-05</u> |

Distribution: Original: Incident Package Copy: Reporting Employee Copy: Reviewing Supervisor

EXHIBIT=92

|  |  |
|--|--|
| DISTRIBUTION:<br>WHITE - CENTRAL FILE<br>BLUE - INMATE (2ND COPY)<br>GREEN - ASU | CANARY - WARDEN<br>PINK - HEALTH CARE MGR<br>GOLDENROD - INMATE (1ST COPY) |
|--|--|

INMATE'S NAME

CDC NUMBER

REASON(S) FOR PLACEMENT (PART A)

- PRESENTS AN IMMEDIATE THREAT TO THE SAFETY OF SELF OR OTHERS
- JEOPARDIZES INTEGRITY OF AN INVESTIGATION OF ALLEGED SERIOUS MISCONDUCT OR CRIMINAL ACTIVITY
- ENDANGERS INSTITUTION SECURITY
- UPON RELEASE FROM SEGREGATION, NO BED AVAILABLE IN GENERAL POPULATION

DESCRIPTION OF CIRCUMSTANCES WHICH SUPPORT THE REASON(S) FOR PLACEMENT: On December 11, 2008, at approximately 0800 hours, the [REDACTED] was hospitalized due to the loss of consciousness suddenly, which caused [REDACTED] to vomit and [REDACTED] fell onto the floor. After being hospitalized, [REDACTED] was released from the hospital on December 12, 2008. On December 13, 2008, [REDACTED] was admitted to the hospital again due to the loss of consciousness again. [REDACTED] was released from the hospital on December 14, 2008. [REDACTED] you are being transferred to [REDACTED] for administrative review. To protect your privacy, your name, date of birth, and other identifying information will not be included in the administrative review. You are entitled to [REDACTED] to be kept separate from the general population system.

CONTINUED ON ATTACHED PAGE (CHECK IF ADDITIONAL)  IF CONFIDENTIAL INFORMATION USED, DATE OF DISCLOSURE:

|                       |                                      |  |            |
|-----------------------|--------------------------------------|--|------------|
| DATE OF ASU PLACEMENT | SEGREGATION AUTHORITY'S PRINTED NAME | SIGNATURE  | TITLE      |
| 12/14/08              | [REDACTED]                           | [REDACTED]   | [REDACTED] |
| DATE NOTICE SERVED    | TIME SERVED                          | PRINTED NAME OF STAFF SERVING ASU PLACEMENT NOTICE | SIGNATURE  |

STAFF'S TITLE

|   |                    |            |
|---|--------------------|------------|
| <input type="checkbox"/> INMATE REFUSED TO SIGN | INMATE'S SIGNATURE | CDC NUMBER |
|---|--------------------|------------|

ADMINISTRATIVE REVIEW (PART B)

The following to be completed during the initial administrative review by Captain or higher by the first working day following placement

STAFF ASSISTANT (SA)

INVESTIGATIVE EMPLOYEE (IE)

|                      |       |                               |       |
|----------------------|-------|-------------------------------|-------|
| STAFF ASSISTANT NAME | TITLE | INVESTIGATIVE EMPLOYEE'S NAME | TITLE |
|----------------------|-------|-------------------------------|-------|

IS THIS INMATE:

|   |                              |                             |  |                              |                             |
|---|------------------------------|-----------------------------|--|------------------------------|-----------------------------|
| LITERATE?   | <input type="checkbox"/> YES | <input type="checkbox"/> NO | EVIDENCE COLLECTION BY IE UNNECESSARY        | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| FLUENT IN ENGLISH?                                    | <input type="checkbox"/> YES | <input type="checkbox"/> NO | DECLINED ANY INVESTIGATIVE EMPLOYEE          | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ABLE TO COMPREHEND ISSUES?                            | <input type="checkbox"/> YES | <input type="checkbox"/> NO | ASU PLACEMENT IS FOR DISCIPLINARY REASONS    | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| FREE OF MENTAL HEALTH SERVICES DELIVERY SYSTEM NEEDS? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | DECLINED 1ST INVESTIGATIVE EMPLOYEE ASSIGNED | <input type="checkbox"/> YES |                             |
| DECLINING FIRST STAFF ASSISTANT ASSIGNED?             | <input type="checkbox"/> YES |                             |  |                              |                             |

Any "NO" requires SA assignment

Any "NO" may require IE assignment

NOT ASSIGNED

NOT ASSIGNED

INMATE WAIVERS

|   |   |
|---|---|
| <input type="checkbox"/> INMATE WAIVES OR DECLINES INTERVIEW WITH ADMINISTRATIVE REVIEWER | <input type="checkbox"/> INMATE WAIVES RIGHT TO 72 HOURS PREPARATION TIME |
| <input type="checkbox"/> NO WITNESSES REQUESTED BY INMATE                                 | INMATE SIGNATURE  |

DATE

WITNESSES REQUESTED FOR HEARING

|               |                  |               |                  |
|---------------|------------------|---------------|------------------|
| WITNESS' NAME | TITLE/CDC NUMBER | WITNESS' NAME | TITLE/CDC NUMBER |
| WITNESS' NAME | TITLE/CDC NUMBER | WITNESS' NAME | TITLE/CDC NUMBER |

DECISION:  RELEASE TO UNIT/FACILITY  RETAIN PENDING ICC REVIEW  DOUBLE CELL  SINGLE CELL PENDING ICC

REASON FOR DECISION:

|  |       |  |      |                                     |
|--|-------|--|------|-------------------------------------|
| ADMINISTRATIVE REVIEWER'S PRINTED NAME                   | TITLE | DATE OF REVIEW   | TIME | ADMINISTRATIVE REVIEWER'S SIGNATURE |
| CORRECTIONAL ADMINISTRATOR'S PRINTED NAME (if necessary) |       | CORRECTIONAL ADMINISTRATOR'S CO-SIGNATURE (if necessary) |      | DATE OF REVIEW                      |

STATE OF CALIFORNIA  
ADMINISTRATIVE SEGREGATION UNIT PLACEMENT NOTICE  
CDC 114-D (Rev 10/98)

|  |  |
|--|--|
| DISTRIBUTION:<br>WHITE - CENTRAL FILE<br>BLUE - INMATE (2ND COPY)<br>GREEN - ASU | CANARY - WARDEN<br>PINK - HEALTH CARE MGR<br>GOLDENROD - INMATE (1ST COPY) |
|--|--|

|                                 |                              |
|---------------------------------|------------------------------|
| INMATE'S NAME<br><b>HIGGINS</b> | CDC NUMBER<br><b>J-06160</b> |
|---------------------------------|------------------------------|

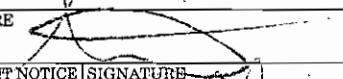
**REASON(S) FOR PLACEMENT (PART A)**

- PRESENTS AN IMMEDIATE THREAT TO THE SAFETY OF SELF OR OTHERS  
 JEOPARDIZES INTEGRITY OF AN INVESTIGATION OF ALLEGED SERIOUS MISCONDUCT OR CRIMINAL ACTIVITY  
 ENDANGERS INSTITUTION SECURITY       UPON RELEASE FROM SEGREGATION, NO BED AVAILABLE IN GENERAL POPULATION

DESCRIPTION OF CIRCUMSTANCES WHICH SUPPORT THE REASON(S) FOR PLACEMENT: On December 21, 2005, at approximately 0920 hours, you were involved in a battery of a Peace Officer. Specifically, while being escorted to Facility B Medical Clinic, you struck C/O J. Medina in the shoulder with your forehead. Based on this information, you are deemed a threat to the Safety and Security of the Institution. Therefor you are being re-housed in Administrative Segregation. You will remain in Admin Seg pending Administrative Review. Due to this placement your privilege group, credit earning, custody and visiting status are subject to change.

Inmate Higgins is / is not a participant in the Mental Health Delivery System.

CONTINUED ON ATTACHED PAGE (CHECK IF ADDITIONAL)     IF CONFIDENTIAL INFORMATION USED, DATE OF DISCLOSURE: / /

|  |  |   |   |
|--|--|---|---|
| DATE OF ASU PLACEMENT<br><b>12/21/05</b>                   | SEGREGATION AUTHORITY'S PRINTED NAME<br><b>M. DURDEN</b> | SIGNATURE<br> | TITLE<br><b>LIEUTENANT (A)</b>  |
| DATE NOTICE SERVED<br><b>12-21-05</b>                      | TIME SERVED<br><b>1335</b>                               | PRINTED NAME OF STAFF SERVING ASU PLACEMENT NOTICE<br><b>C/n Clare</b>                          | SIGNATURE<br> |
| <input checked="" type="checkbox"/> INMATE REFUSED TO SIGN |  | INMATE SIGNATURE  | CDC NUMBER<br><b>C/o</b>  |

**ADMINISTRATIVE REVIEW (PART B)**

The following to be completed during the initial administrative review by Captain or higher by the first working day following placement

**STAFF ASSISTANT (SA)****INVESTIGATIVE EMPLOYEE (IE)**

|                      |       |                               |       |
|----------------------|-------|-------------------------------|-------|
| STAFF ASSISTANT NAME | TITLE | INVESTIGATIVE EMPLOYEE'S NAME | TITLE |
|----------------------|-------|-------------------------------|-------|

**IS THIS INMATE:**

|   |  |   |  |
|---|--|---|--|
| LITERATE?<br>FLUENT IN ENGLISH?<br>ABLE TO COMPREHEND ISSUES?<br>FREE OF MENTAL HEALTH SERVICES DELIVERY SYSTEM NEEDS?<br>DECLINING FIRST STAFF ASSISTANT ASSIGNED? | <input type="checkbox"/> YES <input type="checkbox"/> NO | EVIDENCE COLLECTION BY IE UNNECESSARY<br>DECLINED ANY INVESTIGATIVE EMPLOYEE              | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|   | <input type="checkbox"/> YES <input type="checkbox"/> NO | ASU PLACEMENT IS FOR DISCIPLINARY REASONS<br>DECLINED 1ST INVESTIGATIVE EMPLOYEE ASSIGNED | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|   | <input type="checkbox"/> YES                             |   | <input type="checkbox"/> YES                             |

Any "NO" requires SA assignment

Any "NO" may require IE assignment

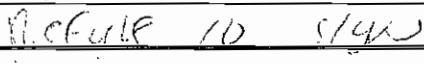
NOT ASSIGNED

NOT ASSIGNED

**INMATE WAIVERS**

INMATE WAIVES OR DECLINES INTERVIEW WITH ADMINISTRATIVE REVIEWER     INMATE WAIVES RIGHT TO 72 HOURS PREPARATION TIME

NO WITNESSES REQUESTED BY INMATE

INMATE SIGNATURE  


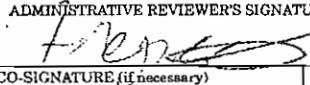
DATE  
**12-22-05**

**WITNESSES REQUESTED FOR HEARING**

|              |                  |              |                  |
|--------------|------------------|--------------|------------------|
| WITNESS NAME | TITLE/CDC NUMBER | WITNESS NAME | TITLE/CDC NUMBER |
| WITNESS NAME | TITLE/CDC NUMBER | WITNESS NAME | TITLE/CDC NUMBER |

DECISION:  RELEASE TO UNIT/FACILITY     RETAIN PENDING ICC REVIEW     DOUBLE CELL     SINGLE CELL PENDING ICC

REASON FOR DECISION  
**RETAIN A SAI POSITIVE SH/1 TERN**

|  |                             |  |  |
|--|-----------------------------|--|--|
| ADMINISTRATIVE REVIEWER'S PRINTED NAME<br><b>F. M. G. J. WOODS</b> | TITLE<br><b>CAPTAIN (A)</b> | DATE OF REVIEW<br><b>12-21-05 110</b>                    | ADMINISTRATIVE REVIEWER'S SIGNATURE<br> |
| CORRECTIONAL ADMINISTRATOR'S PRINTED NAME (if necessary)           |                             | CORRECTIONAL ADMINISTRATOR'S CO-SIGNATURE (if necessary) |  |
|  |                             | DATE OF REVIEW   |  |

MEDICAL REPORT OF INJURY  
UNUSUAL OCCURRENCE

|                                   |                                  |   |                                     |  |                         |
|-----------------------------------|----------------------------------|---|-------------------------------------|--|-------------------------|
| NAME OF INSTITUTION<br><b>NSP</b> | FACILITY/UNIT<br><b>B5</b>       | REASON FOR REPORT (circle)<br><b>USE OF FORCE</b> | INJURY<br><b>UNUSUAL OCCURRENCE</b> | ON THE JOB INJURY<br><b>PRE AD/SEG ADMISSION</b> | DATE<br><b>12-21-05</b> |
| IS SECTION FOR<br>MATE ONLY       | NAME <b>LAST</b><br><b>Woods</b> | FIRST<br><b>[Redacted]</b>                        | CDC NUMBER<br><b>P-71320</b>        | HOUSING LOC.<br><b>B5-206</b>                    | NEW HOUSING LOC.        |
| IS SECTION FOR<br>AFF ONLY        | NAME <b>LAST</b><br><b>N/A</b>   | FIRST<br><b>[Redacted]</b>                        | BADGE #                             | RANK/CLASS                                       | ASSIGNMENT/RDOs         |
| IS SECTION FOR<br>SITOR ONLY      | NAME <b>LAST</b><br><b>N/A</b>   | FIRST<br><b>[Redacted]</b>                        | MIDDLE                              | DOB  | OCCUPATION              |
| HOME ADDRESS<br><b>N/A</b>        | CITY                             | STATE   | ZIP                                 | HOME PHONE                                       |                         |

AGE OF OCCURRENCE  
**1** DATE/TIME OF OCCURRENCE  
**12-21-05 0930** NAME OF WITNESS(ES)

|                           |                          |                               |   |        |            |                  |                    |                 |
|---------------------------|--------------------------|-------------------------------|---|--------|------------|------------------|--------------------|-----------------|
| ME NOTIFIED<br><b>130</b> | TIME SEEN<br><b>0933</b> | ESCORTED BY<br><b>Custody</b> | MODE OF ARRIVAL (circle)<br><b>AMBULATORY</b> | LITTER | WHEELCHAIR | AGE<br><b>38</b> | RACE<br><b>BLK</b> | SEX<br><b>M</b> |
|---------------------------|--------------------------|-------------------------------|---|--------|------------|------------------|--------------------|-----------------|

JEF STATEMENT IN SUBJECT'S WORDS OF THE CIRCUMSTANCES OF THE INJURY OR UNUSUAL OCCURRENCE

*"Rained after  
wetted up."* "No Comments at this time"

|                        |  |
|------------------------|--|
| JURIES FOUND? YES / NO |  |
| brasion/Scratch        | <input checked="" type="checkbox"/> 1  |
| active Bleeding        | <input type="checkbox"/> 2             |
| broken Bone            | <input type="checkbox"/> 3             |
| ruise/Discolored Area  | <input type="checkbox"/> 4             |
| um                     | <input type="checkbox"/> 5             |
| islocation             | <input type="checkbox"/> 6             |
| ried Blood             | <input type="checkbox"/> 7             |
| resh Tattoo            | <input type="checkbox"/> 8             |
| ut/Laceration/Slash    | <input type="checkbox"/> 9             |
| I.C. Spray Area        | <input checked="" type="checkbox"/> 10 |
| ain                    | <input type="checkbox"/> 11            |
| rotrusion              | <input type="checkbox"/> 12            |
| unciture               | <input type="checkbox"/> 13            |
| eddened Area           | <input checked="" type="checkbox"/> 14 |
| kin Flap               | <input type="checkbox"/> 15            |
| swollen Area           | <input type="checkbox"/> 16            |
| ther                   | <input type="checkbox"/> 17            |
|                        | <input type="checkbox"/> 18            |
|                        | <input type="checkbox"/> 19            |

I.C. SPRAY EXPOSURE?  YES  NODECONTAMINATED?  YES  NOSelf-decontamination  
instructions given?  YES  NORefused decontamination?  YES  NO

Q 15 min. checks

Staff issued exposure packet? YES / NO

RN NOTIFIED/TIME  
**Parks 0940 Patel 0940**PHYSICIAN NOTIFIED/TIME  
**Cleared for  
0940 Ad-Sec Relocation**

REPORT COMPLETED BY/TITLE (PRINT AND SIGN)

**N Kush LVN N Kush**

BADGE #

RDOs

**2440181 names**

(Medical data is to be included in progress note or emergency care record filed in UHR)

## RULES VIOLATION REPORT - PART C

PAGE 1 OF 4

| CDC NUMBER                            | INMATE  | LOG NUMBER   | INSTITUTION | TODAY'S DATE |
|---------------------------------------|---|--------------|-------------|--------------|
| J06160                                | HIGGINS   | FB-05-12-039 | KVSP        | 04/27/2006   |
| <input type="checkbox"/> SUPPLEMENTAL | <input checked="" type="checkbox"/> CONTINUATION OF: <input type="checkbox"/> 115 CIRCUMSTANCES <input checked="" type="checkbox"/> HEARING <input type="checkbox"/> IE REPORT <input type="checkbox"/> OTHER |              |             |              |

On Tuesday, April 9, 2006, at approximately 1039 hours, Correctional Lieutenant, J. Hamlin introduced himself to Inmate HIGGINS as the Senior Hearing Officer (SHO), for this Rules Violation Report (RVR) hearing. HIGGINS stated that he was in good health with no hearing or visual impairments. HIGGINS acknowledged that he received copies of the following documents more than 24 hours, in advance of the hearing: CDC-115, CDC-115-A, and including Crime/Incident report Log # KVP-FB1-05-12-0135, Investigative Employee reports. HIGGINS was advised that the results of this hearing are not final until reviewed and approved by the Chief Disciplinary Officer and after that review he will receive his final copy of the completed CDC-115.. These reports as well as the disciplinary charges of BATTERY ON A PEACE OFFICER were reviewed with HIGGINS in the hearing. HIGGINS stated that he understood both and that he was prepared to begin the hearing.

**MENTAL HEALTH:** HIGGINS is not a participant in the Mental Health Services Delivery System at any level of care. Upon review of this RVR, it has been determined that HIGGINS did not show bizarre, unusual, or uncharacteristic behavior indicating a possible mental disorder and he is not one of the groups requiring a Mental Health Assessment. Accordingly, a Mental Health Assessment is not required.

**DISTRICT ATTORNEY:** This case has been referred for criminal prosecution. Inmate HIGGINS initially requested a postponement pending the referral, but rescinded the request on March 11, 2006. Inmate Higgins was asked at the start of the hearing if he still desired to continue. HIGGINS indicated his desire to continue and resigned the CDC-115-A.

**DUE PROCESS:** The disciplinary was served on the inmate within 15 days of discovery. The hearing was not completed within the allowed 30 days therefore there was a due process violation.

**STAFF ASSISTANT:** A Staff Assistant (SA) was not assigned in accordance with the California Code of Regulations, Title 15, Section 3315 (d)(2), as HIGGINS agrees that he does speak English, is literate, the issues are not complex, and a confidential relationship is not required.

**INVESTIGATIVE EMPLOYEE:** Officer D. Pare was assigned as the Investigative Employee (IE), was assigned in accordance with the California Code of Regulations, Title 15, Section 3315 (d)(1), as HIGGINS cannot complete his own investigation due to Administrative Segregation placement. In the IE report, HIGGINS indicated that he did not request the IE to be present during the hearing. HIGGINS did request the presence of Inmate Woods (P71320), LVN N. Kush and F. Beshirs, Facility B Laundry supervisor at the RVR hearing.

HIGGINS states that he is satisfied with the IE report.

**WITNESS:**

The SHO requested no additional witnesses.

**INMATE STATEMENT:** Lieutenant Hamlin read aloud the written violation to HIGGINS and he pled **Not Guilty**, stating, "The IE report is my statement. The officers that worked the control didn't observe any of this and the Officer that works in the yard gun didn't observe any of this."

|   |   |
|---|---|
| SIGNATURE OF WRITER<br>J. HAMLIN, Correctional Lieutenant             | DATE SIGNED<br>05/18/06                     |
| GIVEN BY: (Staff's Signature)<br><i>J. Hamlin</i>                     | DATE SIGNED<br>TIME SIGNED<br>5/18/06 11:55 |
| <input checked="" type="checkbox"/> COPY OF CDC-115-C GIVEN TO INMATE |   |

EXHIBIT U-1

## RULES VIOLATION REPORT - PART C

PAGE 2 OF 4

|   |                   |                            |                     |                            |
|---|-------------------|----------------------------|---------------------|----------------------------|
| CDC NUMBER<br>J06160  | INMATE<br>HIGGINS | LOG NUMBER<br>FB-05-12-039 | INSTITUTION<br>KVSP | TODAY'S DATE<br>04/27/2006 |
| <input type="checkbox"/> SUPPLEMENTAL <input checked="" type="checkbox"/> CONTINUATION OF: <input type="checkbox"/> 115 CIRCUMSTANCES <input checked="" type="checkbox"/> HEARING <input type="checkbox"/> IE REPORT <input type="checkbox"/> OTHER |                   |                            |                     |                            |

The SHO contacted Inmate Woods in FBB7-123U via the floor officer in the housing unit. Inmate Woods was placed on the speaker phone to allow for Inmate HIGGINS to hear the conversation. The SHO directed the following questions towards Inmate Woods:

1. Do you remember what occurred outside the housing unit during the escort on December 21, 2005 at approximately 0920 hours?"

Inmate Woods responded, "Yes, we were slammed to the ground for no reason".

2. How many officers were escorting you and Inmate HIGGINS?"

Inmate Woods responded, "There were two with each of us".

3. Who was placed on the ground first?

Inmate Woods responded, "It seemed like we were both slammed at the same time"

4. Were you in front or behind during the escort?

Inmate Woods responded, "I was in the front".

5. So, with the officers escorting you across the yard, you could not see what was happening behind you?

Inmate Woods responded, "No"

No further questions were asked of Inmate Woods.

The SHO contacted F. Beshirs via speaker phone. The SHO directed the following questions towards Beshirs:

1. Do you remember the incident on December 21, 2005 at approximately 0920 hours?

Beshirs responded, "No, I don't remember the incident."

2. Do you remember standing outside Laundry and seeing the escort coming across the yard?

Beshirs responded, "No, I don't remember."

No further questions were asked of Beshirs.

The hearing was suspended due to LVN. Kush not being available.

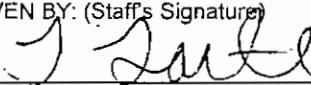
|   |                         |
|---|-------------------------|
| SIGNATURE OF WRITER<br><br>J. HAMLIN, Correctional Lieutenant | DATE SIGNED<br>05/18/06 |
| GIVEN BY: (Staff's Signature)<br>                              | DATE SIGNED<br>5/3/06   |
| <input checked="" type="checkbox"/> COPY OF CDC-115-C GIVEN TO INMATE   | TIME SIGNED<br>1155     |

Exhibit U-2

STATE OF CALIFORNIA

## RULES VIOLATION REPORT - PART C

PAGE 3 OF 4

|                                       |   |                            |                     |                            |
|---------------------------------------|---|----------------------------|---------------------|----------------------------|
| CDC NUMBER<br>J06160                  | INMATE<br>HIGGINS   | LOG NUMBER<br>FB-05-12-039 | INSTITUTION<br>KVSP | TODAY'S DATE<br>04/27/2006 |
| <input type="checkbox"/> SUPPLEMENTAL | <input checked="" type="checkbox"/> CONTINUATION OF: <input type="checkbox"/> 115 CIRCUMSTANCES <input checked="" type="checkbox"/> HEARING <input type="checkbox"/> IE REPORT <input type="checkbox"/> OTHER |                            |                     |                            |

On 5/3/06 the hearing was continued. The SHO contacted LVN Kush via speaker phone. The SHO directed the following questions towards Kush:

1. On the day of the incident on December 21, 2005 at approximately 0920 hours, do you remember walking out the housing unit and seeing the escort crossing the yard?

Kush responded, "I don't remember if I walked out the building."

2. Do you remember seeing the escort of the two inmates across the yard?

I responded to the alarm in the building. I don't remember stepping out and seeing the escort.

No further questions were asked of LVN Kush.

FINDING: HIGGINS is being found **GUILTY** of a Division "B" offense for BATTERY ON A PEACE OFFICER. This finding is based upon the following preponderance of evidence:

- A. The written testimony in the RVR submitted by Officer J. Medina who describes the circumstances of the escort on December 21, 2005. Officer Medina described how Inmate HIGGINS resisted during the escort by swinging his head left to right and was given order to cease his actions. Officer Medina further describes how he was struck on his right shoulder by the head of Inmate Higgins and the subsequent forcing HIGGINS to the ground.
- B. The written testimony in the RVR submitted by Officer G. Miranda who describes his assisting Officer Miranda with the escort of the inmates to the Facility B Program. Officer Miranda describes HIGGINS actions prior to the battery on Officer Medina and assisting in forcing HIGGINS to the ground.
- C. During the hearing, HIGGINS failed to provide a defense or offer a reasonable alternative to the charges. In consideration of the evidence listed above, I believe that a reasonable person would find a preponderance of evidence that HIGGINS was involved in the incident.
- D. It is reasonable to conclude based on the evidence therefore that HIGGINS did, in fact, participate in this incident, and culpable of violating CCR § 3005 (c).

DISPOSITION: HIGGINS has been assessed:

0 Days Credit Forfeiture, due to due process violation.

10 days loss of yard starting 5-3-2006 to 5-13-2006.

30 days loss of canteen starting on 5-3-2006 to 6-3-2006.

|   |  |
|---|--|
| SIGNATURE OF WRITER<br><br>J. HAMLIN, Correctional Lieutenant | DATE SIGNED<br>05/18/06                    |
| GIVEN BY: (Staff's Signature)<br><br><i>J. Hamlin</i>         | DATE SIGNED<br>TIME SIGNED<br>5/18/06 1155 |

COPY OF CDC-115-C GIVEN TO INMATE

Exhibit U-3

## RULES VIOLATION REPORT - PART C

PAGE 4 OF 4

|                                       |   |                            |                     |                            |
|---------------------------------------|---|----------------------------|---------------------|----------------------------|
| CDC NUMBER<br>J06160                  | INMATE<br>HIGGINS   | LOG NUMBER<br>FB-05-12-039 | INSTITUTION<br>KVSP | TODAY'S DATE<br>04/27/2006 |
| <input type="checkbox"/> SUPPLEMENTAL | <input checked="" type="checkbox"/> CONTINUATION OF: <input type="checkbox"/> 115 CIRCUMSTANCES <input checked="" type="checkbox"/> HEARING <input type="checkbox"/> IE REPORT <input type="checkbox"/> OTHER |                            |                     |                            |

HIGGINS was counseled and reprimanded regarding future behavior expectations, specifically in the area of the CCR § 3005(c).

HIGGINS was referred to classification for SHU term assessment.

HIGGINS was informed pursuant to the CCR, § 3327 (a) (1), credit restoration is not available for this offense.

Appeal rights were explained to HIGGINS. HIGGINS was referred to CCR §3084 and following for additional information on appeal procedures.

|   |  |
|---|--|
| SIGNATURE OF WRITER<br>J. HAMLIN, Correctional Lieutenant | DATE SIGNED<br>05/18/06                    |
| GIVEN BY: (Staff's Signature)<br><i>J. Hamlin</i>         | DATE SIGNED<br>TIME SIGNED<br>5/31/06 1155 |

COPY OF CDC-115-C GIVEN TO INMATE

EXHIBIT U-4

STATE OF CALIFORNIA

## RULES VIOLATION REPORT - PART C

| CDC NUMBER  | INMATE'S NAME | LOG NUMBER   | INSTITUTION | TODAY'S DATE |
|---|---------------|--------------|-------------|--------------|
| J-06160   | HIGGINS       | FR-05-12-039 | K.V.C.P.    |              |
| <input type="checkbox"/> SUPPLEMENTAL <input checked="" type="checkbox"/> CONTINUATION OF: <input type="checkbox"/> 115 CIRCUMSTANCES <input type="checkbox"/> HEARING <input checked="" type="checkbox"/> IE REPORT <input type="checkbox"/> OTHER _____ |               |              |             |              |

began to remove my tennis shoes, socks and gym shorts and then placed me on my feet. As we started to walk down the tier, a C/O yelled " He's bleeding, He's bleeding!" As I was escorted off the upper tier, through the A-Section of B-5 door, we walked pass a medical staff. As I was being escorted to the physician office, midway there, I was slumped to the ground by C/O G. Miranda and J. Medina, causing me to suffer extreme pain from my busted chin and exposure to the Chemical Agent. Once I was on the ground, Lieutenant Paynes stood over me and said " If you ever touch my C/O Officers, I will make sure your brains is all over this field." Then Lt. Paynes relieved C/O J. Medina and G. Miranda and C/O J. Copeland continued to escort me to the Medical clinic... "That's what happen, the hole truth."

REPORTING INMATE'S STATEMENT: None.

STAFF WITNESS STATEMENT: None.

DIRECTIONS QUESTIONS FOR WITNESSES:

(note: The questions directed to the INMATE AND STAFF Correctional Officer D. Bear were found to be irrelevant to the charges against you as your witnesses and questions pertained to inside of Housing Unit Five (5). The incident occurred on the yard. You requested for the L.E. to interview unknown individuals without having specific questions you wanted asked. It is not possible to interview unknown individuals or conduct an interview without specific questions. S.A.O., please note that inmates statement was recorded and a copy of his question have been attached for your review.)

First incident that occurred inside cell # B-5-206. Witness who seen everything. Inmate #0005, CO# P-71320. Witnesses who seen me come out of my cell B-5-206 Bleeding and sprayed with pepper spray. Inmate Hackett, B-6-106 and Inmate Givens, B-5-107. Medical staff "Gust" (arrived to the alarm in Building 5.) Correctional Officers Walsh, B-6, B-5 Correctional Officers, B-7 Correctional Officers, B-8 Correctional Officer, B-4 Correctional Officers, B-3 Correctional Officers, B-2 Correctional Officers, B-5 Control Officer M. Gibbs, and Sgt. C. Jose. All Bottom tier inmates and inmates from cell 207-211. I want you to ask inmates, Did they see me bleeding at the chink? I want the name of Officers who sprayed me inside B-5-206 and I want them interviewed. I want the incident reports of all staff, Correctional Officers who was responding to the alarm. I want name of C/O's who were assigned to searches in B-5. It's in the logs.

Second incident that occurred on B-Yard 12/21/05 at 0920 hours. Witnesses who seen everything from when I walked across the grass area being escorted by C/O J. Medina and G. Miranda to Medical Clinic. They will say that I didn't touch C/O Medina and that Lt. Paynes stood over me. Free Staff Laundry worker Sonya Bashire. Medical Staff Parks. Medical staff 3 other females (I don't know their names) who was standing outside watching the whole thing. I want you to interview them all. I want a copy of every witness on here, statements and I want a copy of the medical reports. I want a copy of the doctor who put the stitches in my chin. Medical Report.

(note: Inmate Higgins was given a copy of the CDC-115 (date 12/27/05 at 1230 hours), CDC-115A (date 12/27/05 at 1230 hours), CDC-837 and CDC-721B (date 01/07/05 at 1300 hours). Some of the information requested, the inmate already has. The only information not available is the name of Doctor who treated inmate Higgins. He would have to repeat the information from medical.)

I advised inmate Higgins of his right to have witnesses interviewed and to request them present at his hearing. I asked Subject if he had any witnesses to be interviewed and present at his hearing? Subject stated "I wrote it down."

REPORTING STAFF REQUESTED AT HEARING? No.

STAFF WITNESS'S REQUESTED AT HEARING? No.

INMATE WITNESS'S REQUESTED AT HEARING? No.

INVESTIGATING STAFF REQUESTED AT HEARING? No.

|   |  |                         |
|---|--|-------------------------|
| SIGNATURE OF WRITER<br>D. PER, CORRECTIONAL OFFICER                   |  | DATE SIGNED<br>11/16/06 |
| <input checked="" type="checkbox"/> COPY OF CDC 115-C GIVEN TO INMATE | GIVEN BY: (Staff's Signature)<br><i>D. PER</i> | DATE SIGNED<br>11/16/06 |
|   |  | TIME SIGNED<br>0902     |

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS

## RULES VIOLATION REPORT - PART C

PAGE \_\_\_\_ OF \_\_\_\_

|                                       |  |  |                                  |   |                                |
|---------------------------------------|--|--|----------------------------------|---|--------------------------------|
| CDC NUMBER<br>J-06160                 | INMATE'S NAME<br>HIGGINS                             | LOG NUMBER<br>FB-05-12-039                 | INSTITUTION<br>REV. C.P.S.       | TODAY'S DATE                                  |                                |
| <input type="checkbox"/> SUPPLEMENTAL | <input checked="" type="checkbox"/> CONTINUATION OF: | <input type="checkbox"/> 115 CIRCUMSTANCES | <input type="checkbox"/> HEARING | <input checked="" type="checkbox"/> IE REPORT | <input type="checkbox"/> OTHER |

On 03/11/06, at approximately 1030 hours, I received correspondence (Via CDC-Inmate Request Form) dated 01/26/06 from inmate HIGGINS, CDC# J-06160, Housing # ASU-2-134. He requested that his Rule Violation Report (RVR) dated 12/21/05, LOG# FB-05-12-039, hearing postponement be lifted and that his RVR Hearing be heard as soon as possible. His signature on CDC-115A indicates as such.

X

S

|  |                        |                     |
|--|------------------------|---------------------|
| SIGNATURE OF WRITER<br>T. FORKE, CORRECTIONAL OFFICER                  | DATE SIGNED<br>3/11/06 |                     |
| GIVEN BY: (Staff's Signature)<br><i>J. Forke</i>                       | DATE SIGNED<br>3/11/06 | TIME SIGNED<br>1155 |
| <input checked="" type="checkbox"/> COPY OF CDC 115-C GIVEN TO INMATE. |                        |                     |

@CJR



EXHIBIT U.6

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS  
CDC-128G (REV.12/95)

NO.: J06160

NAME: HIGGINS

HOUSING: 5C-211

Custody: CLOB-R CS 70 Level: IV WG/PG: A1A Effective Date: 7/11/07

Type/Release Date: EPRD: LWOP

TT: LWOP BPT: N/A Assignment/Action Taken: BMU PROGRAM REVIEW/IN PERSON/ RET 26-  
IVA/RELEASE FROM BMU TO CCI-IVA GP/GWGC @ A1A EFF 7/11/07 BASED ON BRIDGING/  
REAFFIRM D/C / PLACE SSWL AND ABE III.

Inmate HIGGINS appeared before U.C.C. for Program Review with receipt of 72 hour advance notice provided. Effective verbal communication was established with the Subject.

On 1/31/07 Subject was placed in the Behavior Modification Unit (BMU) Program by UCC /ICC action of 11/29/07 RECOMMENDED Subjects placement program.

Subjects placement is based upon receiving a SHUable RVR 12/21/05 Battery on a Non Prisoner of an offense for which a determinate term of confinement has been assessed, Subject has participated in the required BMU Programs and has remained disciplinary free for this 30- day review period Based on Subjects participation Committee is electing to GRADUATE Higgins from the BMU Program and release to CCI-IVA GP.

**COMMITTEE ACTION**

Subject stated that he and cellmate are compatible.. Annual Review is AUGUST

Appropriate Facility Design 180 Based on A-1 Criteria.

**COMMITTEE:**

D. CHAPMAN, CC-II  
MEMBER

D. ZANCHI, PC  
CHAIRPERSON

CC-1 D. Rhode  
RECORDER

6/1/07 AM

UNIT CLASSIFICATION COMMITTEE

Inst.: CCI-IVA

07-2542

Exhibit V-1

STATE OF CALIFORNIA  
**SHU TERM ASSESSMENT WORKSHEET**  
CDC 629-A (Rev 3/96)

DEPARTMENT OF CORRECTIONS

|            |                        |             |       |
|------------|------------------------|-------------|-------|
| CDC NUMBER | NAME (LAST, FIRST, MI) | INSTITUTION | UNIT  |
| J06160     | Higgins                | KUSP        | Fa. B |

**1. RULE VIOLATION RESULTING IN SHU TERM ASSESSMENT**

(If more than one SHU assessable offense and no SHU term has been established, use most serious as base term and less serious as aggravation.)

- a. Rule No. 3003f Date Issued 12-21-05 Title P. Higgins P/O
- b. Specific Act Assault on another inmate w/ physical force intent to cause serious injury.  
(Must be an offense on SHU Term Assessment Chart.)
- c. List range of months for the offense using  
SHU Time Computation Table..... 6 12 18  
LOW EXP HIGH
- d. Enter "expected" (mid-range) years, months, days of confinement..... 12  
YR MO DAYS

**2. FACTORS IN MITIGATION AND AGGRAVATION**

(Enter "NONE" for item 2c or indicate amount of time. Describe factors and document sources. Use only factors listed in the DOM 62050 or concurrent offenses.)

- a. Mitigating Factors. Time subtracted for mitigations..... 0  
YR MO DAYS
- 1)
  - 2)
  - 3)
- b. Aggravating Factors. Time added for aggravations..... 3  
  - 1) Battleyan Staff 2-19-06 A-00-020060 1 YR MO DAYS
  - 2) Merd 11-19-06 1 YR MO DAYS
  - 3) 1 YR MO DAYS
- c. Total time added or subtracted..... 3  
YR MO DAYS

**3. TOTAL SHU CONFINEMENT TIME ASSESSED.....**  
(Subtract or add time for mitigation or aggravation to expected, item 1d plus or minus 2c) YR MO DAYS**4. DATE OF ADMINISTRATIVE SEGREGATION CONFINEMENT/VIOLATION.....****5. MAXIMUM DATE OF RELEASE FROM SHU.....**  
(Add total time assessed to date of confinement, item 3 plus 4) YR MO DAYS**6. MINIMUM SHU CONFINEMENT TIME TO SERVE.....**  
(Enter 75% of the total SHU time (item 3) using the SHU Time Computation Table) YR MO DAYS

a. Date of confinement/violation (item 4).....

**7. MINIMUM ELIGIBLE RELEASE DATE (MERD).....**  
(Add the minimum SHU time to the date of confinement, item 6 plus 6a) YR MO DAYS**8. FORFEITURE OF GOOD CONDUCT CREDITS FOR SUBSEQUENT MISCONDUCT**

(Enter "NONE" for item 8a or indicate the amount of time lost and describe and document the misconduct for which credit is being forfeited). SHU inmates may forfeit up to 45 days of clean conduct credits for each disciplinary infraction that is not serious enough to warrant the assessment of a subsequent or concurrent SHU term. Such forfeiture may be assessed against credits already earned or future credits.

a. Time forfeited for CDC 115 - Dated: \_\_\_\_\_ YR MO DAYS

1)  
2)b. **ADJUSTED MERD Cannot Exceed MAXIMUM.....**  
(Add the amount of time forfeited to the prior MERD, item 7 plus 8a) YR MO DAYS

|  |               |                           |
|--|---------------|---------------------------|
| NAME AND TITLE OF STAFF COMPUTING TERM | DATE SIGNED   | DATE ICC ESTABLISHED TERM |
| <u>A. C. L. M. M. T.</u>               | <u>6-6-06</u> | <u>6/6/06</u>             |

DISTRIBUTION: ORIGINAL - CENTRAL FILE - YELLOW - INMATE - PINK - AUDITOR

C-100-2-2 V-2

1765055 + 3 page

**DATE:** April 18, 2007  
**NAME/NUMBER:** Higgins, J-06160  
**APPEAL LOG NUMBER:** CCI-0-07-00974  
**INTERVIEWED BY:** T. Gassaway, Correctional Counselor II (A)  
**APPEAL DECISION:** **DENIED**  
**APPEAL ISSUE:** **CUSTODY/CLASSIFICATION**

Appellant alleges he was inappropriately housed in the Behavior Modification Unit (BMU), as he does not meet the criteria for placement in that program.

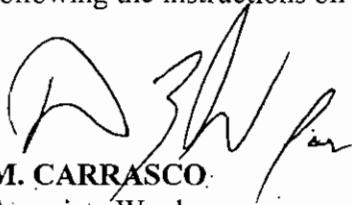
**APPEAL RESPONSE:**

All relevant documents and information submitted in writing have been carefully reviewed and considered. A thorough review has been conducted and evaluated in accordance with departmental policies and institutional procedures. Appellant was interviewed by T. Gassaway, Correctional Counselor II (A), on April 17, 2007, and had nothing to add to this appeal.

Operational Procedure #154, *Behavior Modification Unit Pilot Program*, Section VI, Number 2, has been reviewed in response to this appeal. Operational Procedure #154 states, "If the inmate has been found guilty of an offense for which a determinate term of confinement has been assessed or is deemed to be a threat to the safety and security of the institution, the inmate may be referred to a Classification Committee for placement in the Behavior Modification Unit. Prior to release from the Security Housing Unit, the Institutional Classification Committee (ICC) shall review the circumstances of the disciplinary offense and the inmate's behavior history to determine if placement in the Behavior Modification Unit is appropriate."

The appellant appeared before Institutional Classification Committee on November 29, 2006, for a Pre-MERD review. At that time appellant's case was reviewed and Committee made the determination that appellant's case factors warranted placement in a BMU. Appellant's case was referred to the Classification Services Representative for endorsement to CCI-IVA for placement in the BMU. The referral for placement was based on a CDC 115, Rules Violation Report, dated December 21, 2005, for Battery on a Non-Prisoner, which resulted in a 15-month, aggravated SHU term. The ICC noted in their CDC 128G chrono dated November 29, 2006, that the appellant met the criteria for BMU placement. Appellant was endorsed for CCI-IVA for placement in the BMU. Unit Classification Committee affirmed that placement on January 31, 2007. The appellant does meet the criteria for placement in the BMU and will be retained in that program until completion.

Based on the above, this appeal is **DENIED**. If dissatisfied, appellant may request a Director's Level review by following the instructions on the appeal form.

  
**M. CARRASCO**  
Associate Warden  
Units IVA and IVB

Date 4/27/07

  
**F. GONZALEZ**  
Chief Deputy Warden  
Units IVA and IVB  
Date 4-27-07

Exhibit = W-1

**INMATE/PAROLEE - TENACHAII** Location: Institution/Parole Region Log No. Category  
**APPEAL FORM** APPEALS OFFICE, CCIO 07-0974 Z  
 CDC 602 (12/07)

2007 FEB -2 PM 1:29

You may appeal any policy, action or decision which has a significant adverse effect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

| NAME    | NUMBER  | ASSIGNMENT | UNIT/ROOM NUMBER |
|---------|---------|------------|------------------|
| Higgins | J-06160 |            | 4A 53 205        |

A. Describe Problem: This is A 602 INMATE APPEAL BASED ON CCIO ADMINISTRATION CONDUCT- INTRODUCTION INTO ALLEGATIONS & BASE ON THE CRITERIA OF THE "BMU" PROGRAM THAT WAS IMPLEMENTED UP NORTH AT HIGH DESERT STATE PRISON, THE POLICY OF THIS PROGRAM WAS DESIGNED TO DISCIPLINE INMATE IN WHICH ARE GENERAL POPULATION, IS THE GROUP WHO ARE SUPPOSED TO BE PLACED IN PRIVILEGE GROUP "C-STATUS" ONLY, PER THE CRITERIA SET FORTH IN SECTION 3044 (F). IN WHICH STATE THE PLACEMENT OF PROGRAM FAILURE, A INMATE REFUSE TO PERFORM WORK DUTY OR TRAINING ASSIGNMENTS, UNSATISFACTORILY IF YOU NEED MORE SPACE, ATTACH ONE ADDITIONAL SHEET.

B. Action Requested: 1.) THAT INMATE HIGGINS BE REMOVED FROM "BMU" PROGRAM BECAUSE HE DOES NOT MEET THE CRITERIA!

2.) I WOULD LIKE THE CRITERIA "BMU" DOCUMENT FORM STATING THIS PROGRAM IS TO PLACE "SHU" KICK OUT INMATES FOR PAST DISCIPLINARY ACTION!

Inmate/Parolee Signature: Higgins Date Submitted: 02/07/07 1:30-0

C. INFORMAL LEVEL (Date Received: \_\_\_\_\_)

Staff Response: \_\_\_\_\_

# BYPASS

Staff Signature: \_\_\_\_\_ Date Returned to Inmate: PM

D. FORMAL LEVEL

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chronicle, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response.

# BYPASS

Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Note: Property/Funds appeals must be accompanied by a completed Board of Control form BC-1E, Inmate Claim

1) INMATE COPY.

4) AT TORNAL GENERAL COPY.

|  |
|--|
|  |
|--|

2) THE "CCIO" ADMINISTRATION COPY.

5) ETERNAL AFFAIRS COPY.

W-2

3) HIGGINS FAMILY COPY.

First-Level     Granted     P. Granted     Denied     Other \_\_\_\_\_

E. REVIEWER'S ACTION (Complete within 15 working days): Date assigned: \_\_\_\_\_ Due Date: \_\_\_\_\_

Interviewed by: \_\_\_\_\_

**BYPASS**~~ESI LIVING  
PAROLE~~

Staff Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Division Head Approved: \_\_\_\_\_ Returned \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date to Inmate: \_\_\_\_\_

F. If dissatisfied, explain reasons for requesting a Second-Level Review, and submit to Institution or Parole Region Appeals Coordinator within 15 days of receipt of response.

**BYPASS**

Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Second Level     Granted     P. Granted     Denied     Other \_\_\_\_\_G. REVIEWER'S ACTION (Complete within 10 working days): Date assigned: 4-10-07 Due Date: 5-4-07 See Attached LetterSignature: \_\_\_\_\_ Date Completed: 5/2/07Warden/Superintendent Signature: \_\_\_\_\_ Date Returned to Inmate: 5/20

H. If dissatisfied, add data or reasons for requesting a Director's Level Review, and submit by mail to the third level within 15 days of receipt of response.

Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

For the Director's Review, submit all documents to: Director of Corrections  
P.O. Box 9428B3  
Sacramento, CA 94283-0001  
Attn: Chief, Inmate AppealsDIRECTOR'S ACTION:     Granted     P. Granted     Denied     Other \_\_\_\_\_ See Attached Letter Date: \_\_\_\_\_

07-0974

CCI - TEHACHAPI  
APPEAL'S OFFICE  
PERFORMANCE AS TO DISRESPECTING STAFF - FIGHTS WITH INMATES -  
2007 FEB - 2 PM 1:29  
THAT IS WRITTEN UP AS A SERIOUS RULE VIOLATION - NOW ON 7-1-06

I Inmate Higgins was found guilty for a battery on a peace officer in which is a "SHU" able offence. The classification committee action at Delano State Prison recommended that I serve a "15 month SHU" "only" for the above case and upon my next date I be placed back into "general population". Yes I received a "115" while in the "SHU" for refusing a cellmate but the "chief officer Rick Grenz" Regulation and Policy Management Branch Office of Correctional Planning signed a document that states, any inmates who refuse to double cell cannot be placed into "privilege group "C" or BMU program. And is not consider a program failure or have his property confiscated. By placing inmate Higgins into this BMU program in which he ~~DOES NOT~~ meet the criteria nor is a "C STATUS" inmate. You CCI Higher Power Administration, is violating Mr. Higgins due process of the California Rules of Regulation of the Title 15 and DOM, CONSTITUTIONAL RIGHTS OF His 8th Amendments and 14th Amendments. And IF failure to do the right thing CRIMINAL NEGLECT can be brought upon THE ADMINISTRATION according to the United States Law of California.

I Inmate Higgins would like to be placed into general population like "CSR" recommended upon next date, so I can "Program". NOTED THE classification committee chairman person "REFUSE" to accept this. Thank you for your time.

DATE 07-07-2007

W-3

Sign: Higgins

**INMATE/PAROLEE  
APPEAL FORM**  
CDC 602 (12/87)

Location: Institution/Parole Region

Log No.

Category

1. CCT - O1. 07-0000497

2. \_\_\_\_\_

2. \_\_\_\_\_

You may appeal any policy, action or decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

|         |         |            |                  |
|---------|---------|------------|------------------|
| NAME    | NUMBER  | ASSIGNMENT | UNIT/ROOM NUMBER |
| Higgins | J-06160 | N/A        | 4A 5B 205        |

A. Describe Problem: This is a 602 Inmate Appeal Based on RER STAFF conduct. Introduction into Allegations: On 2-6-07 at approx. 12:00pm THE APPELLANT MR. HIGGINS WAS CALL OVER THE LOUD SPEAKER BY HOUSING UNITS CONTROL OFFICER, I WAS INFORM THAT I WAS TO REPORT TO RER, once I ARRIVED TO RER, THE RER STAFF G/M ROBINSON INFORM ME THAT I COULD NOT HAVE ANYTHING OTHER THAN MY LEGAL MATERIAL AND (2) BOOKS AND THAT WAS IT. G/M ROBINSON THEN INFORM ME THAT IF I DID NOT HAVE ANY MONEY ON MY ~~TRUST~~ TRUST ACCOUNT HE WAS GOING TO CONFISCATE AND DESTROYED MY PROPERTY. I

If you need more space, attach one additional sheet.

- B. Action Requested:
- 1.) I would like a full investigation into this matter!
  - 2.) I would like afforded time to send my belongings home!
  - 3.) That this 602 be placed in M.Robinson "file"!
  - 4.) I would like to be reimbursed for my property!

Inmate/Parolee Signature: Higgins

Date Submitted: 2-12-07

C. INFORMAL LEVEL (Date Received: \_\_\_\_\_)

Staff Response:

RECEIVED  
INMATE APPEALS  
JUL 19 2007  
BRAUN

**BYPASS**

CC-1  
APPEALS  
SECTION  
FEB 21  
PM 2:36

Staff Signature: \_\_\_\_\_

Date Returned to Inmate: \_\_\_\_\_

D. FORMAL LEVEL

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response.

**BYPASS**

Signature: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Note: Property/Funds appeals must be accompanied by a completed Board of Control form BC-1E, Inmate Claim

CDC Appeal Number: \_\_\_\_\_

F.H.R. + X-1

Interviewed by: \_\_\_\_\_

# BYPASS

Staff Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Division Head Approved: \_\_\_\_\_ Title: \_\_\_\_\_ Returned \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date to Inmate: \_\_\_\_\_

F. If dissatisfied, explain reasons for requesting a Second-Level Review, and submit to Institution or Parole Region Appeals Coordinator within 15 days of receipt of response.

# BYPASS

Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Second Level  Granted  P. Granted  Denied  Other \_\_\_\_\_

G. REVIEWER'S ACTION (Complete within 10 working days): Date assigned: 3-8-07 Due Date: 4-4-07

See Attached Letter

Signature: \_\_\_\_\_ Date Completed: 4-4-07

Warden/Superintendent Signature: M. Canas (initials) Date Returned to Inmate: 4-4-07

H. If dissatisfied, add data or reasons for requesting a Director's Level Review, and submit by mail to the third level within 15 days of receipt of response.

Appellant Higgins contend That He Had Money To send His Personal Property Home THAT WAS IN CANTEEN THAT Appellant Higgins informed The RSR STAFF Robinson, THAT HE WAS not going To Spend And THE FACT HE COULD CALL "Canteen" And HAVE Them PUT THE MONEY BACK ~~on~~ <sup>ATTACHED</sup> on Appellant Book, now The EXHIBIT = A = Pg-1-2" Show That Inmate Higgins Had Money Hold up In CANTEEN THAT WAS WAITING TO BE PLACE BACK INTO HIS TRUST Account From The DATES OF Jan.1, 2007 To Feb. 20, 2007 <sup>\$18.00</sup>

Signature: Higgins Date Submitted: 4-15-07

For the Director's Review, submit all documents to: Director of Corrections  
P.O. Box 942883  
Sacramento, CA 94283-0001  
Attn: Chief, Inmate Appeals

DIRECTOR'S ACTION:  Granted  P. Granted  Denied  Other \_\_\_\_\_

See Attached Letter

OCT 03 2007

Date: \_\_\_\_\_

Explain To c/o m.Robinson THAT I Had money In The canteen  
THAT I Had not spend nor signed FOR, And I wish To spend  
THE money To send my Belonging Home That mean so much To  
me such AS my, "OBITUARY OF My DECEASE FATHER and grandmother"  
"Family Photos" — T.V. — COSMETICS — THERMAL Top & Bottoms c/o m.Robinson  
DISRESPECTED me And said I Do not give A F---K, And since you Do  
not HAVE money In The TRUST OFFICE I AM CONFISCATED THESE ITEMS  
And IT will BE DESTROYED. c/o m.Robinson Then STATED you can leave  
now, I THEN explain To Him IF I could AT LEASE send my (2)  
OBITUARY AND Family Photos, In A Big yellow Envelope with stamps  
And send Them Home; His Words was "NO" And Then c/o m.Robinson  
STATED IF [REDACTED] SAY Another word About my Property, Then He THREATEN  
To SPRAY me with HIS "CHEMICAL AGENTS OR SPRAY". I WAS "NOT" given  
A 30 DAYS notice To HAVE money in my Account To send my Property home.  
when I FIRST ARRIVED To 4A FAC 5B BMU Pilot Program, THE STAFF HERE  
STATED THAT ALL my PROPERTY will BE HELD UNTIL my TIME IS UP ON THE  
BMU Program. now TITLE 15.3193 (B) STATES, THE DEPARTMENT SHALL ACCEPT  
LIABILITY FOR THE LOSS OR DESTRUCTION OF INMATE PERSONAL PROPERTY  
when IT is ESTABLISHED THAT such LOSS OR DESTRUCTION RESULTS FROM  
EMPLOYEE NEGLIGENCE. ALSO, THE ABOVE ACTION MENTION HEREIN, WERE  
WANTON, MALICIOUS AND DELIBERATELY, AND such ACTION IS IN DIRECT  
VIOLATION OF THE CDC TITLE 15 RULES AND REGULATIONS such AS  
3004. RIGHTS AND RESPECT OF OTHER. § 3391. EMPLOYEE CONDUCT (A)

UP TO AND INCLUDING TERMINATION OF EMPLOYMENT OR CIVIL ACTION, CRIMINAL PROSECUTION MAY RESULT FROM CONDUCT WHICH VIOLATES PENAL CODE SECTION 502!

THE ACTION MENTION HEREIN DOES NOT ONLY VIOLATE THE RULES, REGULATIONS, AND POLICIES THAT GOVERN THE CALIFORNIA DEPARTMENT OF CORRECTION, BUT ALSO VIOLATE MY U.S. CONSTITUTIONAL RIGHTS, UNFAIRNESS OR CORRUPTION OF OFFICER IN PERFORMANCE OF ADMINISTRATIVE FUNCTIONS IN CIVIL OR CRIMINAL CASES IN STATE COURTS AS IN VIOLATIONS OF THE FOURTEENTH AMENDMENTS. THIS IS CLEARLY AN ACT OF CRUELTY BY CORRECTIONAL STAFF MR. ROBINSON. A PRIME EXAMPLE OF EMPLOYEE, FURTHERMORE, THE LT AND SGT. OF R&R FAILURE TO SUPERVISE, OFFICER MR. ROBINSON COMMITTED THIS CRUEL ACT AND IS IN VIOLATION HERE AND HE CHOOSE TO CONDONE MISCONDUCT.

DATE 2-12-07

Sign Nuggins

EXHIBIT = A

now, LET me Remind The Reviewing OFFicerS THAT The Appellate HAD TALK To The R&R STAFF on Feb. 6, 2007 OF When The Incident FIRST occurred, THAT He Had money Hold up In canteen waiting To Be PUT BACK on His TRUST ACCOUNT, And The TRUST ACCOUNT STAFF Informed OFFicer R&R STAFF Robinson This, now AT some Point Doing JAN. 2007 And Feb. 2007, IT shows THAT The money \$18.00 was PLACE BACK INTO my ACCOUNT, And on 2-20-07 The money RETURN BACK INTO canteen. AFTER Feb. 6. 2007 When OFFicer R&R STAFF <sup>ROBINSON</sup> Confiscated my Personal Property. I ALSO Inform R&R STAFF Robinson THAT I would like To PUT my "Pictures—OBITUARY of my Decease Family IN A <sup>BIG</sup> yellow Envelope with PosteD STAMPS, so I can send Home Be BEFORE He CONFISCATE Them, He STATE IT No, NOT To mention The "misconduct" THAT He ACTed TOWARDS me, SEE ATTACHED I/m complaint 602 Pg-1-2. I would like This To Be Place In OFFicer Robinson File. And my Personal ITEM To Be SENT Home. Note: The second level Reviewing OFFicer Did not EXPLAIN IF He was going To give me The OPPORTUNITY To send my Personal Property Home.

Please Fully grant my Appeal, IT clearly  
Show misconduct on STAFF BEHALF Here,  
So I Pray The Director Reviewer OF Some  
Relief Here AT Hand.

god BLESS you And THANK you FOR  
HAVING THE TIME TO LOOK INTO THIS  
Complaint

DATE April 15, 2007 Sign Higgins

Exhibit 

STATE OF CALIFORNIA  
DEPARTMENT OF CORRECTIONS AND REHABILITATION  
INMATE APPEALS BRANCH  
P. O. BOX 942883  
SACRAMENTO, CA 94283-0001

**DIRECTOR'S LEVEL APPEAL DECISION**

Date: OCT 03 2007

In re: Carl Higgins, J06160  
California Correctional Institution  
P.O. Box 1031  
Tehachapi, CA 93581

IAB Case No.: 0701072      Local Log No.: CCI-07-00649

This matter was reviewed on behalf of the Director of the California Department of Corrections and Rehabilitation (CDCR) by Appeals Examiner A. A. Read. All submitted documentation and supporting arguments of the parties have been considered.

**I APPELLANT'S ARGUMENT:** It is the appellant's position that on February 6, 2007, the appellant was called over the loud speaker to report to the California Correctional Institution (CCI) Receiving & Release (R&R). The appellant states that upon arrival to R&R, the R&R staff, Correctional Officer (CO) M. Robinson, informed the appellant that he could not have anything other than the appellant's legal material and two books. CO Robinson informed the appellant that if the appellant did not have any money on his trust account, then the appellant's property would be confiscated and destroyed. The appellant states he informed the officer that the appellant had money in the canteen that the appellant had not spent nor signed for and the appellant wished to spend the money in sending his property home. It is contended that the appellant had an obituary of his deceased father and grandmother, family photographs, television, cosmetics, and thermal top/bottom. The appellant states that CO Robinson disrespected him and said, "I do not give a fuck and since you do not have money in the trust office, I am confiscating those items and they will be destroyed. The appellant attempted to explain the value of his property but the officer stated "NO" and threatened to spray the appellant with Oleoresin Capsicum Pepper spray, if the appellant did not leave the area. The appellant requests that a full investigation is conducted into this matter and that the appellant is given time to send his property home. It is also requested that this documentation is placed in CO Robinson's personnel file.

**II SECOND LEVEL'S DECISION:** The reviewer found that the appellant's concerns have been properly addressed by involved and/or assigned CCI staff. The Second Level of Review (SLR) states that the appellant was interviewed on March 26, 2007, by Correctional Lieutenant J. Jones regarding the appellant's appeal issues. The appellant was advised that the appeal inquiry was completed; however, the appellant was not advised of the specific finding, as all staff complaint findings are confidential and would not be released to the appellant. The appellant's appeal is granted in part at the SLR, as an inquiry into his allegations has been conducted. All staff personnel matters are confidential in nature and as such, results of any inquiry will not be shared with staff, members of the public or inmates. Although, the appellant has the right to submit a staff complaint, a request for administrative action regarding staff or the placement of documentation in a staff member's personnel file is beyond the scope of the staff complaint process. Based upon the aforementioned information, the SLR granted in part the appeal.

**III DIRECTOR'S LEVEL DECISION:** Appeal is denied.

**A. FINDINGS:** The documentation and presented arguments are persuasive that the appellant has failed to support his appeal issue with sufficient evidence or facts to warrant a modification of the SLR. The examiner reviewed California Code of Regulations, Title 15, Section (CCR) 3004; Rights and Respect of Others; CCR 3193, Liability; CCR 3271, Responsibility of Employees; and CCR 3391; Employee Conduct. Upon review of the documentation submitted, it is determined that the appellant's allegations have been reviewed and evaluated by administrative staff and an inquiry has been completed at the SLR. The examiner contacted Correctional Counselor II K. Sampson, Appeals Coordinator, in the CCI Appeals Office on September 6, 2007, to request and obtain a copy of the finalized inquiry report. On September 6, 2007, the examiner received a faxed copy of the inquiry report containing the institution's decision and/or action taken regarding the appellant's complaint. In the event that staff misconduct was

Exhibit X-4

CARL HIGGINS, J06160  
CASE NO. 0701072  
PAGE 2

substantiated, the institution would take the appropriate course of action. All staff personnel matters are confidential in nature and not privy to the inquiries of other staff, the general public or the inmate population, and would not be released to the appellant. Although the appellant has the right to submit an appeal as a staff complaint, the request for administrative action regarding staff or the placement of documentation in a staff member's personnel file is beyond the scope of the appeals process. The appellant has not shown any documentation or other verified evidence that would lend credence to his appeal issues and requests. The appellant has been duly informed regarding his appeal issues and responding institutional staff has addressed all pertinent areas of the appellant's complaint. The examiner finds that the appellant has failed to present any new documentation and/or evidence that would substantiate his claim; therefore, justification for intervention at the Director's Level of Review is not warranted.

**B. BASIS FOR THE DECISION:**

California Penal Code Section: 832.5, 832.7, 832.8, 5058

CCR: 3001, 3004, 3006, 3084.1, 3190, 3192, 3193, 3270, 3271, 3391

CDC Operations Manual Section: 13030.10, 31140.14, 54030.1, 54030.2, 54030.6, 54030.7, 54030.7.1, 54030.10.9, 54030.10.11

Administrative Bulletin (AB) 98/10: PROCESSING OF INMATE/PAROLEE APPEALS, CDC FORMS 602, WHICH ALLEGE STAFF MISCONDUCT

AB 05/03: PROCESSING OF ADULT INMATE/PAROLEE APPEALS, CDC FORM 602, WHICH ALLEGE STAFF MISCONDUCT

**C. ORDER:** No changes or modifications are required by the Institution.

This decision exhausts the administrative remedy available to the appellant within CDCR.



N. GRANNIS, Chief  
Inmate Appeals Branch

cc: Warden, CCI  
Appeals Coordinator, CCI

EXHIBIT = X-5

State of California

## Memorandum

Date : March 26, 2007

**C-FILE**

To : HIGGINS J-06160

4A-211L  
*5C*Subject: **STAFF COMPLAINT RESPONSE - APPEAL # CCI-0-07-00649**

**APPEAL ISSUE:** The Appellant alleges that on February 6, 2007, Officer M. Robinson refused to Inmate Higgins to send disallowed property home. Appellant also alleges that Officer M. Robinson disrespected him by stating to Appellant that he didn't give a F\_\_K, since he has no money on the Books.

**DETERMINATION OF ISSUE:** A review of the allegations of staff misconduct presented in the written complaint has been completed. Based upon this review your appeal has been handled as follows:

- PROCESSED AS A STAFF COMPLAINT APPEAL INQUIRY
- REFERRED TO THE OFFICE OF INTERNAL AFFAIRS (Note: You will be notified of the conclusion of any internal affairs investigation)

**SUMMARY FOR APPEAL INQUIRY:**

You were interviewed on Monday; March 26, 2007, by J. Jones, Correctional Lieutenant, and stated that Officer M. Robinson would not allow you to send home your personal property since you had no money in your trust account. You also stated that there was money in canteen that was supposed to be returned to you. You felt Officer Robinson should have waited till the money was put back on the books and then send your property home. Officer M. Robinson was interviewed by Lt. J. Jones on 3-27-07 he stated that there was no money in Appellants trust account on 2-06-07 and policy for sending property home is that you have to have money in your trust account to mail the property home. Operational Procedure 154, Behavior Modification Unit Pilot program, states in part that it will be the responsibility of the sending facility to ensure only authorized property is delivered to R&R. The disposition of unauthorized property will be per title 15, section 3191 ©, which states in part an inmate shall select one of the methods listed for disposing of personal property which is unauthorized pursuant to Title 15. if the inmate makes no selection or has insufficient funds, staff shall document that fact and determine the method of disposition.

**FINDINGS FOR AN APPEAL INQUIRY:**

Your appeal is PARTIALLY GRANTED at the  First level  Second level, as an inquiry into your allegation has been conducted. ALL STAFF PERSONNEL MATTERS ARE CONFIDENTIAL IN NATURE. As such, results of any inquiry/investigation will not be shared with staff, members of the public, or inmates. Although you have the right to submit a staff complaint, a request for administrative action regarding staff or the placement of documentation in a staff member's personnel file is beyond the scope of the staff complaint process.

*Exhibit**X-6***C-FILE**

Inmate Higgins J-06160  
CCI-07-00649  
Page 2

Allegations of staff misconduct do not limit or restrict the availability of further relief via the inmate appeals process. If you wish to appeal the decision, you must submit your staff complaint appeal through all levels of appeal review up to, and including, the Director's Level of Review. Once a decision has been rendered at the Director's Level of Review, your administrative remedies will be considered exhausted.

Please print and sign below:

M Carrasco M Canasio  
Warden/CDW/HCM (Second Level) AW/Med. Mgr. (First Level)

4-4-07  
Date

Exhibit - X

DEPARTMENT OF CORRECTIONS

## PROPERTY AND CASH RECEIPTS - ARRIVAL

## DISTRIBUTION

ORIG: Inmate (White)  
 CC: Property File (Canary)  
 Trust Office (Pink)  
 Central File (Green)

*DAC49*

| INMATE'S NAME | NUMBER | CASH PLACED IN INMATE'S ACCOUNT |
|---------------|--------|---------------------------------|
| HIGGINS       | 306160 |                                 |

DISPOSITION CODE: K=KEPT IN POSSESSION (WATCHES, RINGS, AND METALS VALUED LESS THAN \$30)

M=MAIL D=DONATED S=HELD IN SAFE V=VAULT

| QUANTITY | ARTICLES      | DISP. | QUANTITY | ARTICLES      | DISP. | QUANTITY | ARTICLES         | DISP. |
|----------|---------------|-------|----------|---------------|-------|----------|------------------|-------|
|          | BELT          |       |          | SUIT          |       |          | DENTURES         |       |
|          | BLOUSE        |       |          | SWEATER       |       |          | DRIVER'S LICENSE |       |
|          | CAP           |       |          | TANK TOP      |       |          | EYEGLASSES       |       |
|          | COAT          |       |          | UNDERWEAR     |       |          | KEYS             |       |
|          | DRESS         |       |          |               |       |          |                  |       |
|          | HANDKERCHIEF  |       |          |               |       |          |                  |       |
|          | HAT           |       |          | LEGAL PAPERS  |       |          | MEDICAL ID       |       |
|          | JACKET        |       |          | LETTERS       |       |          | MISC. ID         |       |
|          | NECKTIE/SCARF |       |          | PHOTOS        |       |          | MARR. CERT.      |       |
|          | OVERCOAT      |       |          | PURSE         |       |          | BIRTH CERT.      |       |
|          | PAJAMAS       |       |          | BILLFOLD      |       |          | SEL. SER. CARD   |       |
|          | PANTS/SLACKS  |       |          | BOOKS         |       |          | SOC. SEC. CARD   |       |
|          | SHIRT         |       |          | BIBLE         |       |          | RELIGIOUS MEDALS |       |
|          | SHOES         |       |          | DICTIONARY    |       |          | RING             |       |
|          | SHORTS        |       |          |               |       |          | SUNGASSES        |       |
|          | SKIRT         |       |          |               |       |          | WATCH            |       |
|          | SLIPPERS      |       |          | COIN          |       |          |                  |       |
|          | SOCKS         |       |          | CURRENCY      |       |          |                  |       |
|          | STOCKINGS     |       |          | CANTEEN DUCAT |       |          |                  |       |

DESCRIPTION OF ITEMS ALLEGED BY INMATE TO HAVE A VALUE OVER \$30

(1) T.V. (misc) paper work (12) Books (1) Thermal  
 top & bottom (2) soaps  
 No money on Books 2/6/7 MR  
 confiscated.

DESCRIPTION OF ITEMS "TO BE DESTROYED"

2007 FEB 2 PM 2:36  
 CCI - TURHACHAPY  
 APPEALS OFFICE

ARTICLES LISTED AS "MAIL" ABOVE ARE TO BE FORWARDED TO:

|      |                    |
|------|--------------------|
| NAME | ADDRESS            |
| CITY | STATE AND ZIP CODE |

## CLAIM AND RELEASE

I relinquish all claim to the articles listed above as "Donated", and hereby acknowledge receipt of articles listed as "Kept in Possession". The above is a correct inventory of personal property in my possession at the time of admission.

|                     |      |                    |
|---------------------|------|--------------------|
| SIGNATURE OF INMATE | DATE | WITNESSING OFFICER |
|---------------------|------|--------------------|

I hereby authorize destruction of articles listed above as "To be Destroyed".

|                     |      |                    |
|---------------------|------|--------------------|
| SIGNATURE OF INMATE | DATE | WITNESSING OFFICER |
|---------------------|------|--------------------|

I hereby acknowledge receipt of the articles listed above as "Held in Safe" which was given to me upon my release from the institution.

|                     |      |                    |
|---------------------|------|--------------------|
| SIGNATURE OF INMATE | DATE | WITNESSING OFFICER |
|---------------------|------|--------------------|

State of California

Department of Corrections and Rehabilitation

## ALLEGATION OF MISCONDUCT BY PEACE OFFICER

### Notice of Rights and Responsibilities

Pursuant with the Penal Code, §148 or anyone wishing to file an allegation of misconduct by a Departmental Peace Officer must read, sign and submit the following statement with the CDCR form to the Appeals Coordinator.

You have the right to make a complaint against a Departmental Peace Officer for any improper peace officer conduct. California law requires this agency to have a procedure to investigate complaints. You have a right to a written description of this procedure. This agency may find, after investigation, that there is not enough evidence to warrant action on your complaint; even if that is the case, you have the right to make the complaint and have it investigated if you believe an officer behaved improperly. Complaints and any reports relating to complaints must be retained by this agency for at least five years.

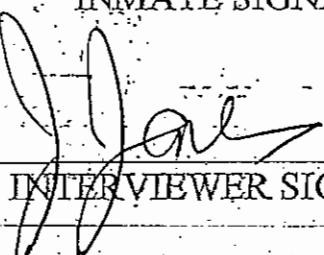
It is against the law to make a complaint that you know to be false. If you make a complaint against an officer knowing that it is false, you can be prosecuted on a misdemeanor charge in a criminal court.

Refused to Sign

INMATE SIGNATURE

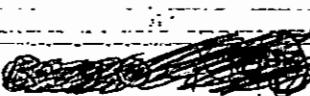
3-26-07

DATE

INTERVIEWER SIGNATURE

3-26-07

DATE

EXHIBIT = 

X-9

**INMATE APPEALS BRANCH**

1515 S Street, Sacramento, CA 95814  
P.O. Box 942883  
Sacramento, CA 94283-0001



June 15, 2007

HIGGINS, CDC #J-06160  
California Correctional Institution  
P.O. Box 1031  
Tehachapi, CA 93581

Re: Institution Appeal Log #CCI 07-00649 Staff Complaint

Dear Mr. HIGGINS:

The enclosed documents are being returned to you for the following reasons:

Only the original appeal form is accepted at the Director's Level of Review. If you do not have the original appeal, see your Appeals Coordinator for a replacement copy.

Your assigned counselor, the Appeals Coordinator, or your Parole Agent can answer any questions you may have regarding the appeals process. Library staff can help you obtain any addresses you need.

A handwritten signature in black ink, appearing to read "N. Grannis".

N. GRANNIS, Chief  
Inmate Appeals Branch

\*\*\*\*\*PERMANENT APPEAL ATTACHMENT-DO NOT REMOVE\*\*\*\*\*

FvH:Rit= X-# 10

REPORT ID: TS3030

REPORT DATE: 04/11/07  
PAGE NO:CALIFORNIA DEPARTMENT OF CORRECTIONS  
CALIF CORRECTIONAL INSTITUTION  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2007 THRU APR. 11, 2007

ACCOUNT NUMBER : J06160                             BED/CELL NUMBER: 4A5CSH000000211L  
ACCOUNT NAME : HIGGINS, CARL                         ACCOUNT TYPE: I  
PRIVILEGE GROUP: C

## TRUST ACCOUNT ACTIVITY

| TRAN | DATE       | CODE  | DESCRIPTION              | COMMENT | CHECK NUM | DEPOSITS | WITHDRAWALS | BALANCE |
|------|------------|-------|--------------------------|---------|-----------|----------|-------------|---------|
|      | 01/01/2007 |       | BEGINNING BALANCE        |         |           |          |             | 16.80   |
|      | 01/05      | D320  | TRUST FUNDS T 3439 NKSP  |         | 8.39      |          |             | 25.19   |
|      | 01/11      | W502  | POSTAGE CHARG 3560POSTAG |         |           | 1.59     |             | 23.60   |
|      | 01/16      | FC06  | DRAW-FAC 6 6-2-3604      |         |           | 18.00    |             | 5.60    |
|      | 01/19      | W536  | COPAY CHARGE 3702COPAY   |         |           | 5.00     |             | 0.60    |
|      | 02/20      | FR01  | CANTEEN RETUR 604261     |         |           | 18.00-   |             | 18.60   |
|      | 02/21      | FC04  | DRAW-FAC 4 1-4-2-4277    |         |           | 18.60    |             | 0.00    |
|      | 03/02      | *DD30 | CASH DEPOSIT 4548MR154   |         | 13.50     |          |             | 13.50   |
|      | 03/19      | FC04  | DRAW-FAC 4 -4-2-4877     |         |           | 13.50    |             | 0.00    |

## CURRENT HOLDS IN EFFECT

| DATE PLACED | HOLD CODE | DESCRIPTION        | COMMENT    | HOLD AMOUNT |
|-------------|-----------|--------------------|------------|-------------|
| 03/27/2007  | H109      | LEGAL POSTAGE HOLD | 4967LEGPOS | 1.41        |

## \* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 07/21/99                             CASE NUMBER: YA035529  
COUNTY CODE: LA   FINE AMOUNT: \$ 10,000.00

| DATE       | TRANS. | DESCRIPTION           | TRANS. AMT. | BALANCE  |
|------------|--------|-----------------------|-------------|----------|
| 01/01/2007 |        | BEGINNING BALANCE     |             | 9,661.43 |
| 03/02/07   | DR30   | REST DED-CASH DEPOSIT | 15.00-      | 9,646.43 |

Exhibits = [REDACTED] X = [REDACTED] ||

REPORT ID: TS3030

REPORT DATE: 04/11/07  
PAGE NO: 2CALIF CORRECTIONAL INSTITUTION  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2007 THRU APR. 11, 2007

ACCT: J06160 ACCT NAME: HIGGINS, CARL ACCT TYPE: I

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*

\* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. \*

## TRUST ACCOUNT SUMMARY

| BEGINNING BALANCE | TOTAL DEPOSITS | TOTAL WITHDRAWALS | CURRENT BALANCE | HOLDS BALANCE | TRANSACTIONS TO BE POSTED |
|-------------------|----------------|-------------------|-----------------|---------------|---------------------------|
| 16.80             | 21.89          | 38.69             | 0.00            | 1.41          | 0.00                      |

| CURRENT AVAILABLE BALANCE |
|---------------------------|
| 1.41-                     |

Exhibit=  X-12

NAME: HIGGINS, CARL

CDCR #: J06160

BED: ASU1-180L

## COMMITTEE ACTION SUMMARY

RETAIN IN ASU PENDING TRANSFER. ASSESS AND IMPOSED A 15 MONTH SHU TERM WITH A MERD OF 11-29-06 REFER TO SHU CSR RX AUDIT AND TXRX CCI/COR SHU. CONTINUE MAX CUSTODY CONTINUE D/I/D WG/P/G EFF 12-21-05. CONTINUE DOUBLE CELL STATUS AND W/A YARD W/CELLIE.

## COMMITTEE'S COMMENTS

Inmate HIGGINS, J06160 made a personal appearance before KVSP ICC on 6-8-06 for Special ASU Review. "S" received his 72-hour notice for the purpose of this review. Prior to committee reviewing and discussing this case, "S" was introduced to the committee members. "S" stated he was in good health and was ready to proceed.

**COMMITTEE NOTES:** "S" was placed in ASU on 12-21-05, as a result of being charged with BATTERY ON A PEACE OFFICER (CDC-115 Log# FB-05-12-039). On 4-9-06 this RVR was adjudicated and "S" was found guilty of the above charge and assessed NO forfeiture of credit due to lost time constraints. The review process for the RVR was completed on 5-23-06 and the "S" received his final copy on 5-31-06. A CDC-629A has been prepared for a 15 month aggravated SHU term with a MERD of 11-29-06. This SHU term has been aggravated due to prior RVR for the same nature dated: 2-19-00 BATTERY ON A PEACE OFFICER A-00-02-0060 MERD 11-19-00.

**COMMITTEE ACTION:** RETAIN IN ASU PENDING TRANSFER. ASSESS AND IMPOSED A 15 MONTH SHU TERM WITH A MERD OF 11-29-06 REFER TO SHU CSR RX AUDIT AND TXRX CCI/COR SHU. CONTINUE MAX CUSTODY CONTINUE D/I/D WG/P/G EFF 12-21-05. CONTINUE DOUBLE CELL STATUS AND W/A YARD W/CELLIE.

**CELL / YARD REVIEW:** After review of case factors "S" is approved for double-cell housing and walk alone yard with his cell partner.

**INMATE COMMENTS/PARTICIPATION:** "S" was a active participant in today's committee and stated that he understood committee's actions and is in agreement. "S" was advised of his appeal rights. No additional case concerns at this time.

**CLINICIAN REVIEW:** Mental Health Staff, provided a MH status review and indicated that "S" is not a participant in the Mental Health Delivery System.

**CASE FACTORS ADDITIONAL:** All case factors remain the same as noted in initial UCC CDC-128G dated 8-15-05.

| DISCUSSION | ASSESSMENT | W/C/P/RELEASE  | RELEASE DATE | GP# | RELEASE  | AGE | ETHNIC | PSYCH | NEED DATE & DATE |
|------------|------------|----------------|--------------|-----|----------|-----|--------|-------|------------------|
| MAX        | 56/IV      | DID-12/21/2005 | LWOP         | 8.1 | 9/1/2006 | 32  | BLA    | CLEAR | N/A-             |

## COMMITTEE MEMBERS

**CHAIRPERSON**  
NATE DILL CDW(a)

## MEMBERS

R. CARREIDO, C&PR (A), E. FLORES, FACILITY CAPTAIN,  
DR. SCHMIDT, PSY-

**RECORDER**  
D.A. WHITE ASU CC-II

Committee Date: 6/8/2006

## ASU REVIEW

Typed By: DAW - Distribution: C-File &amp; Inmate

KERN VALLEY STATE PRISON

Exhibit = ~~B~~ Y -

NAME: HIGGINS, CARL

CDC #: J06160

BED: ASU2-187L

**COMMITTEE ACTION SUMMARY**

RETAIN IN ASU PENDING COMPLETION OF THE DISCIPLINARY PROCESS. ESTABLISH MAX CUSTODY, D1D EFFECTIVE 12/21/05. REFER TO CSR RX 90 DAY ASU EXTENSION. DOUBLE CELL, WALK ALONE YARD WITH CELLIE. USE OF FORCE, PROPERTY, VISITING, AND APPEAL RIGHTS EXPLAINED.

**COMMITTEE'S COMMENTS**

Inmate HIGGINS, J06160 appeared before KVSP ICC AdSeg on 12/29/05 for Initial ASU Review. 'S' voiced no health concerns. 'S' was provided 72 hours notification prior to ICC regarding this review.

**CDC 114D REVIEW:**

'S' was placed in KVSP ASU on 12/21/05 per order of W. Durden, Lieutenant, due to battery on a Peace Officer. The administrative review was performed on 12/22/05 by F. Reynoso, Facility Captain (A); who retained 'S' in ASU pending review by ICC, and 'S' return to GP deemed a threat to the safety and security of the institution. The CDC 114D was reviewed by N. Dill, Associate Warden.

**COMMITTEE NOTES:**

**INMATE COPY**  
Committee notes while 'S' was being escorted to Facility B medical clinic, 'S' struck Correction Officer, J. Medina, in the shoulder with his forehead. Committee elects to retain 'S' in ASU pending completion of the disciplinary process. Establish MAX custody, D1D effective 12/21/05. REFER TO CSR RX 90 DAY ASU EXTENSION. Use of force, property, visiting, and appeal rights explained.

**CELL STATUS / YARD STATUS REVIEW:**

After review of 'S' case factors, noting no in cell predacious behavior, ICC elects to place 'S' on double cell status and walk alone yard while housed in ASU.

**INMATE COMMENTS/PARTICIPATION:**

'S' stated he understood classification action, and 'S' stated he agreed with committee's action. 'S' was informed of committee's decision and his appeal rights.

**CLINICIAN REVIEW:**

Dr. Metcalf, Clinical Psychologist, advised committee 'S' is not a participant in the MHSDS and is able to comprehend the issues under review.

**CASE FACTORS ADDITIONAL:**

'S' has a reading GPL of 8.1 per CDC I28B dated 5/15/03. Therefore, does not require a staff assistant for this review.

| GUSTODY | CS/LEVELS | LWG/PG & ETC<br>RELEASE DATE | RELEASE DATE | GPL | RECLASS | AGE | ETHNIC | PSYCH | NEXT RPT & DATE |
|---------|-----------|------------------------------|--------------|-----|---------|-----|--------|-------|-----------------|
| MAX     | 52 / IV   | DID<br>12/21/2005            | LWOP         | 8.1 | 3/30/06 | 31  | BLA    | CLEAR | N/A             |

**COMMITTEE MEMBERS****CHAIRPERSON**
  
 F. B. Haws, CDW (A)
**MEMBERS**
  
 H. Tyson, Captain (A) - Dr. Metcalf, PhD  
 D. Smith, C&PR - T. Billings, Captain (A)
**RECORDER**
  
 R. Thomas, CCII

Committee Date: 12/29/05

**ASU INITIAL**

Typed By: aat - Distribution: C-File &amp; Inmate

KERN VALLEY STATE PRISON

Classification Chrono CDC 128G (Rev: 5/01)

 Exhibit =  - 2

STATE OF CALIFORNIA  
**NOTICE OF CLASSIFICATION HEARING**

|                    |  |                   |                |             |
|--------------------|--|-------------------|----------------|-------------|
| <b>INMATE NAME</b> |  | <b>CDC NUMBER</b> | <b>HOUSING</b> | <b>DATE</b> |
| HIGGINS            |  | J-06160           | ASU1-180L      | 05/03/06    |

You will appear before a classification committee on **A.S.A.P.** for consideration of a major program change as follows:

TRANSFER

INCREASE IN CUSTODY

REMOVAL FROM PROGRAM       OTHER ICC      NOTED BELOW

**REASONS.** On 05/03/06 The above named inmate made a personal appearance before this Senior Hearing Officer (SHO) for Adjudication / Disposition of Rules Violation Report, Log # FB-05-12-039. Subject was subsequently found guilty and ordered to appear before I.C.C. for Program / Custody Review. AND ASSESSMENT FOR POSSIBLE SECURITY HOUSING UNIT PLACEMENT

|                        |                   |                       |
|------------------------|-------------------|-----------------------|
| <b>STAFF NAME</b>      | <b>LIEUTENANT</b> | <b>INSTITUTION</b>    |
| J. HAMLIN              |                   | CSP-KERN VALLEY       |
| <b>ORIGINAL C-FILE</b> |                   | <b>COPY TO INMATE</b> |

EXHIBIT = **Y-3**

CAR/L Higgins  
Plaintiff

Case Number: 1:07cv-00934-LJO-GSA-R

MEDINA, Miranda, Williams, Lozano,  
JOSE, Reynolds, Zanchi, Chapman,  
RHodes, Robinson

**PROOF OF SERVICE**

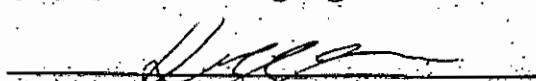
I hereby certify that on MARCH 3 2009, I served a copy  
of the attached Amended Complaint  
by placing a copy in a postage paid envelope addressed to the person(s) hereinabove  
listed, by depositing said envelope in the United States Mail at

CCI, Tehachapi, CA 93581

(List Name and Address of Each  
Defendant or Attorney Served)

United STATES DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA  
OFFICE OF THE CLERK  
2500 TULARE STREET, ROOM 1-505  
U.S. COURT HOUSE Building  
FRESNO, CA 93721-2201

I declare under penalty of perjury that the foregoing is true and correct.

  
(Signature of Person Completing Service)