

Name: BRIAN DONTE DICKERSON

CDC No: 2104994

Address: 17695 Industrial farm Road  
Bakersfield CA 93308

**FILED**

APR 20 2015

CLERK, U.S. DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA

BY S. MARTIN-GILL  
DEPUTY CLERK

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA  
FRESNO DIVISION

BRIAN DICKERSON

Plaintiff/Petitioner,

vs.

DONNY YOUNGBLOOD, et al.

Defendants/Respondent.

CASE NUMBER: 1:15-cv-00518 GSA (PC)

APPLICATION TO PROCEED  
IN FORMA PAUPERIS  
BY A PRISONER

I, BRIAN DICKERSON, declare that I am the plaintiff in the above-entitled proceeding; that, in support of my request to proceed without prepayment of fees under 28 U.S.C. section 1915, I declare that I am unable to pay the fees for these proceedings or give security therefor and that I am entitled to the relief sought in the complaint.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated?  Yes  No (If "no" DO NOT USE THIS FORM)

State the place of your incarceration. 17695 Industrial farm Road Bakersfield CA 93308

2. Are you currently employed (includes prison employment)?  Yes  No

a. If the answer is "yes" state the amount of your pay. \_\_\_\_\_

b. If the answer is "no" state the date of your last employment, the amount of your take-home salary or wages and pay period, and the name and address of your last employer.

3. Have you received any money from the following sources over the last twelve months?

a. Business, profession, or other self-employment:  Yes  No

b. Rent payments, interest or dividends:  Yes  No

- c. Pensions, annuities or life insurance payments:    \_\_\_ Yes     No
- d. Disability or workers compensation payments:    \_\_\_ Yes     No
- e.. Gifts or inheritances:    \_\_\_ Yes     No
- f. Any other sources:    \_\_\_ Yes     No

If the answer to any of the above is "yes," describe by that item each source of money. Also state the amount received **and** what you expect you will continue to receive (attach an additional sheet if necessary).

- 4. Do you have cash (includes balance of checking or savings accounts)?    \_\_\_ Yes     No

If "yes" state the total amount: \_\_\_\_\_

- 5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?    \_\_\_ Yes     No

If "yes" describe the property and state its value: \_\_\_\_\_

- 6. Do you have any other assets?    \_\_\_ Yes     No

If "yes," list the asset(s) and state the value of each asset listed:

- 7. List all persons dependent on you for support, stating your relationship to each person listed and how much you contribute to their support. *THE MISFEASMENT, DISCRIMINATION, WRONGFUL IMPRISONMENT, MALICIOUS PROSECUTION, AND CONSPIRACY TO COVER UP CRIME OF OFFICERS/DEPUTY HAVE LEFT ME HOMELESS, FAMILYLESS, AND DEEPLY DEPRESSED*

**IMPORTANT:**    This form must be dated and signed below in order for the court to consider your application.

I hereby authorize the agency having custody of me to collect from my trust account and forward to the Clerk of the United States District Court payments in accordance with 28 U.S.C. section 1915(b)(2).

April 15- 2015  
DATE

*Bruce D...*  
SIGNATURE OF APPLICANT

**NOTE:**    Within sixty days from the date of this application you must forward to the court a certified copy of your prison trust account statement showing transactions for the past six months.

Monday, April 13, 2015 @13:36

For BOOKING: 2104994 DICKERSON, BRIAN DONTE

Date	Transaction	Description	Amount	Balance	Owed	Held	Reference
04/07/2015	EPR	OID:101106279-ComisaryPur	-24.84	0.31	0.00	0.00	04/07/2015
04/06/2015	PHONE PURCH	PHONE CALL CHARGE	-1.00	25.15	0.00	0.00	04/06/2015
04/06/2015	PHONE PURCH	PHONE CALL CHARGE	-1.00	26.15	0.00	0.00	04/06/2015
04/06/2015	PHONE PURCH	PHONE CALL CHARGE	-3.00	27.15	0.00	0.00	04/06/2015
04/06/2015	TOUCHPAY	12076383	30.00	30.15	0.00	0.00	04/06/2015
03/31/2015	<INP>	OID:101104245-ComisaryPur	0.00	0.15	0.00	0.00	03/31/2015
03/31/2015	INP	OID:101104245-ComisaryPur	0.00	0.15	0.00	0.00	03/31/2015
03/28/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	0.15	0.00	0.00	03/28/2015
03/28/2015	PHONE PURCH	PHONE CALL CHARGE	-3.00	2.15	0.00	0.00	03/28/2015
03/27/2015	PHONE PURCH	PHONE CALL CHARGE	-1.00	5.15	0.00	0.00	03/27/2015
03/27/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	6.15	0.00	0.00	03/27/2015
03/27/2015	PHONE PURCH	PHONE CALL CHARGE	-5.00	8.15	0.00	0.00	03/27/2015
03/26/2015	PHONE PURCH	PHONE CALL CHARGE	-3.00	13.15	0.00	0.00	03/26/2015
03/26/2015	PHONE PURCH	PHONE CALL CHARGE	-3.00	16.15	0.00	0.00	03/26/2015
03/26/2015	PHONE PURCH	PHONE CALL CHARGE	-1.00	19.15	0.00	0.00	03/26/2015
03/25/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	20.15	0.00	0.00	03/25/2015
03/25/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	22.15	0.00	0.00	03/25/2015
03/25/2015	PHONE PURCH	PHONE CALL CHARGE	-1.00	24.15	0.00	0.00	03/25/2015
03/25/2015	TOUCHPAY	11974343	25.00	25.15	0.00	0.00	03/25/2015
03/24/2015	EPR	OID:101102176-ComisaryPur	-15.05	0.15	0.00	0.00	03/24/2015
03/24/2015	PHONE PURCH	PHONE CALL CHARGE	-1.00	15.20	0.00	0.00	03/24/2015
03/23/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	16.20	0.00	0.00	03/23/2015
03/23/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	18.20	0.00	0.00	03/23/2015
03/23/2015	TOUCHPAY	11944605	20.05	20.20	0.00	0.00	03/23/2015
03/17/2015	<INP>	OID:101100065-ComisaryPur	0.00	0.15	0.00	0.00	03/17/2015
03/17/2015	INP	OID:101100065-ComisaryPur	0.00	0.15	0.00	0.00	03/17/2015
03/10/2015	EPR	OID:101097839-ComisaryPur	-18.35	0.15	0.00	0.00	03/10/2015
03/06/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	18.50	0.00	0.00	03/06/2015
03/06/2015	PHONE PURCH	PHONE CALL CHARGE	-2.00	20.50	0.00	0.00	03/06/2015
03/06/2015	PHONE PURCH	PHONE CALL CHARGE	-3.00	22.50	0.00	0.00	03/06/2015
03/06/2015	TOUCHPAY	11818045	25.00	25.50	0.00	0.00	03/06/2015
03/05/2015	<INP>	OID:101096386-ComisaryPur	0.00	0.50	0.00	0.00	03/05/2015
03/05/2015	INP	OID:101096386-ComisaryPur	0.00	0.50	0.00	0.00	03/05/2015
03/02/2015	ADD CASH	INTAKE/KLK	0.50	0.50	0.00	0.00	03/02/2015
03/02/2015	REACHOUT OP	INITIAL DEPOSIT	0.00	0.00	0.00	0.00	03/02/2015

05:35 AM  
04/14/2015

KEEFE COMMISSARY NETWORK SALES  
P.O. BOX 17490, St Louis, MO 63178-7490  
NAME: DICKERSON, BRIAN DONTE 050109

PAGE: 1 OF 1  
SHIP FROM: 359

Case 1:15-cv-00518-GSA Document 4 Filed 04/20/15 Page 4 of 11

NUMBER: 2104994

CPR : 101108319

FACILITY NUMBER: 18686(32980J-001)  
BLOCK: PT TIER: A5 CELL: 07  
FACILITY NAME: KERN COUNTY JAIL

BEG FUND BAL: 0.31  
ORDER DATE: 04/14/2015  
ORDER : 4335334

BAY	SEQ	*ALIAS	QTY	UOM	DESCRIPTION	ITEM#	T	PRICE	TOTAL
WBAKK			9801	1	KIT KIT #41741 - KERN COUNT	41741		0.00	0.00

-----+-----								SUBTOTAL	0.00
!I=Invalid(NotOnMenu) B=Backordered C=Cancelled !								SALES TAX	0.00
!N=NotAvailable/Sub S=Substituted V=NonInventory !								ORDER TOTAL	0.00
-----+-----									

						END FUND BAL	0.31
LIST ITEM#	OF	SHORTAGES	AND/OR	DAMAGES	QTY	CATEGORY/DESCRIPTION	

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

WITNESSED BY \_\_\_\_\_ DATE \_\_\_\_\_

*Brian Dickerson*

APR 15 2015

UNITED STATE DISTRICT COURT

EASTERN DISTRICT OF CALIFORNIA

I, BRIAN DICKERSON, declare that I am THE Plaintiff in the above-entitled Proceeding:

I HAVE SUFFERED YEARS OF SEXUAL ASSAULT, HARASSMENT, DISCRIMINATION, WRONGFUL IMPRISONMENTS, MALICIOUS PROSECUTION, CONSPIRACY TO COVER A CRIME OF OFFICERS, AND CIVIL RIGHTS VIOLATIONS. ALL BE THE HANDS OF THE AUTHORITIES HERE IN KERN COUNTY. AUGUST 13, 2012 WHILE IN CUSTODY AT BOOKING AND RECEIVING DETENTION FACILITIES OF THE KERN COUNTY SHERIFF'S DEPARTMENT, I WAS SEXUALLY ASSAULTED BY 3 DETENTION DEPUTIES. DEPUTIES INVOLVED IN SEXUAL ASSAULT NAMES ARE DEPUTY MONTGOMERY AND WHINELY. OTHER NAME OF DEPUTY IS UNKNOWN. RECORDER CHECK OF INCIDENT WILL REVEAL NAME. SGT INGRIM AND SGT JACKSONS WAS ON RECORDER AS SUPERVISORS.

ON AUGUST 13, 2012 I ENTERED along with MR Patrick Jackson President of NAACP into Bakersfield Police Department to file complaint # 2012-0017, because of my fear of retaliation of the authorities MR JACKSON agreed to be spokesmen between I and the authorities. Interview was conducted by SR DEPUTY HINKLE, Recorder of interview will show and prove that SR DEPUTY HINKLE of the (KESO) agreed that we will receive a line up giving me the opportunity to point out the deputies involve in the sexual assault. The KERN county Sheriff's Department and internal affair unit have refuse to investigate complaint. By doing so the authorities have violated my civil rights to due process. No assistances have been provided by the county of KERN to help me deal with the pain and suffering of the sexual assault. Instead the authorities have use there authorize authority as a tool of fear. I have been forces to take pleas (under-duress) and pleading of drugs by the Sheriff's Department. ON APRIL 3, 2015 I filed complaint against ATTORNEY PUBLIC DEFENDER SHEILA S. JOHNSON of KERN County Public Defender 1315 TRUXTON AVENUE BAKERSFIELD CA. 93301 Reference Number Y28 Coordinator of Records P. ORTIZ of the STATE BAR of CALIFORNIA 845 South figueroa street LOS ANGELES CALIFORNIA 90017-2515 Acknowledge Receipt Dated 04-03-15 State A check of records indicate that person mentioned in complaint is not licensed to practice law in California. COPIES AND REQUEST TO SEEK AND FILE CHARGES WITH THE US. DEPT OF JUSTICES. AND FBI ARE BEEN SENT OUT TO BOTH AGENICES. I am mailing



Document Case 1:15-cv-00518-GSA Document 4 Filed 04/20/15 Page 6 of 11  
file CASE NUMBER 1:15-cv-00518 GSA (PC). I am currently in  
1 THE KERN County Jail. going through the Abuse I mention early.  
2 BASE on situation I took the time to write and seen following  
3 documents. IT'S all I CAN do to protect my legal documents.  
4 THE EXPERIENCES HAVE taught me that the authorities here in  
5 KERN County CAN'T BE TRUSTED. So your assistances will  
6 BE greatly appreciated. Also please check date of KERN County  
7 Sheriff's Inmate Grievance form IT HAVE BEEN OVER 3 years  
8 And Sheriff's Department and internal affair unit have Refuse to  
9 ANSWER ARE investigate into I RECEIVE notice of Electronic  
10 filing Dated 4-9-15, But did not receive into 4-12-15 THERE  
11 ARE ALSO medical RECORDERS and complaint that was filed when due  
12 to DETENTION facility wrongly miss housing me with higher level  
13 inmates I WAS STAP 11 TIMES. All complaints have BEEN properly  
14 NOTED, But NONE HAVE RECEIVE the investigation of the authorities  
15 OF KERN County. COURT RECORDERS will All show that I wrote writ  
16 OF HABEAS CORPUS ASKING COURT to have matter investigated  
17  
18  
19  
20  
21  
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23  
24  
25  
26  
27  
28

THANK YOU AND GOD BLESS

APR 15 2015

Bernie D

**Kern County Sheriff's Department Detentions Facilities**  
Department De El Sheriff De El Condado De Kern Facilda De Detencion

**Answer to Inmate Grievance**  
**Forma De Queja O Reclamacion Para Presos**

BRIAN DICKERSON                      2104994                      SOLER PTP A0507  
Inmate's Name                      Booking Number                      Housing Location

**Answer / Respuesta**

Your grievance dated March 31, 2015 has been received. The delay in the response back to you was due to the fact the grievance had to be sent to the Central Receiving Facility Manager for review.

California law requires this agency to have a procedure to investigate citizen complaints against peace officers. 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.

The Kern County Sheriff's Office strives to maintain a relationship of trust and confidence with the community. In keeping with this goal, it is the policy of the department to diligently investigate all personnel complaints in a fair and impartial manner.

You filed a complaint regarding this matter on August 13, 2012. The incident was fully investigated. Rest assured citizens' complaints are not taken lightly by this department and in every case a thorough investigation has been conducted. In cases where the investigation reveals the allegation is valid, we take prompt corrective or disciplinary action. After a thorough evaluation of all information concerning your complaint in this matter, the review board determined your complaint to be classified as exonerated. (This means the acts which provided the basis for the complaint or allegation occurred), however, investigation revealed that they were justified, lawful and proper. Internal Affairs Case Number 2012-0017 was assigned to this investigation. A letter was sent to you, via mail, dated July 12, 2013, of the findings in this matter. I have attached a copy of the letter to this grievance.

*Please Read  
under LINE  
admission*

March 31, 2015                      April 1, 2013  
Date of Grievance                      Date Received

Lieutenant Adam Plugge                      201032                      April 7, 2013  
Officer responding to Grievance                      I.D. #                      Date of Response

REFUSED TO SIGN                      4/9/15  
Inmate Signature (acknowledging receipt of response)                      Date Delivered to Inmate

*WITNESSED BY DETENTIONS DEPUTY BLACKBURN # 792  
SR. DEPUTY HENKLE SD-777*

**Kern County Sheriff's Department Detention Facilities**

Departamento Del Sherife Del Condado De Kern Facilida De Detencion

Inmate Grievance Form

Forma De Queja O Reclamacion Para Presos

Brian Dickerson

2104994

A 507

Inmates Name/Nombre Preso

Booking Number/Numero

Housing Location/Situacion/Barraka y Cama

Federal: (Circle)  Y  N Check one box only  ICE  USM  BOP  Other

SECURITY/SEGURIDAD  CLASSIFICATION/ CLASSIFICACION  MENTAL HEALTH/ SALUD MENTAL  LAUNDRY/ LAVANDERIA

MEDICAL SERVICES/ SERVICIOS MEDICALES  FOOD SERVICE/ SERVICIOS DE COMIDA

OTHER \_\_\_\_\_

(ATTENTION Facility Manager)

Explain your complaint, including dates, times, names of persons involved, and the location where the incident occurred. You may grieve only one issue per grievance form and only one inmate may be listed on the form. A grievance must be filed within ten working days of the incident.

Explique su queja, incluso fechas y tiempos del incidente, los nombres de las personas implicadas en el incidente, donde ocurrió el incidente, y el remedio que usted solicita. Solamente una queja por cada forma. Nomás un prisionero puede quejarse por cada forma. Su queja tiene que ser sometida entre diez días laborables del incidente.

Grievance/Queja O Reclamacion:	Date/Fecha: April 9 2015	
Shaun Beaslet, Commander. Kern County Sheriff's Office Personnel Division/Internal Affairs Unit. Reference Complaint # 2012-0017		
Complaint was made by Patrick Jackson PRESIDENT of NAACP August 13, 2012 on 3 Detention Deputy for sexual abuse because of my fear of Retaliation MR Jackson agreed to Be the Spokemens Between the Sheriff's Department and I #1 There fore any Corresponding should of went through MR Jackson #2 RECORDER of interviews will show and Prove that SR Deputy Hinkle agreed that we will Receive a line up giving me the opportunity to Point out Deputies ocuse of sexual abuse. How could Proper investigation Been conducted without names or Line up. Therefore I ask for copies of Recorder during interview and documents concerning to Complaint # 2012-0017. This was clearly the Sheriff's Department way of Violating my Civil Rights of due-process. NO assistances was Provided By Sheriff's Department. And I Request a meeting out side of Kern		
Do Not Write Below This Line - To Be Completed By Sheriff's Staff No Escriba Bajo De Esta Linea Sera Completado Por Personal De El Sherife		
202417 BLACUBORN 792	4/9/15 @ 1120 SGT CHRISTOPHERSON	
Received By/Recebido Por	Date Received	Forwarded To/Adelantado A

Distribution: White - Administration  
Yellow - Inmate



Office Use Only  
File # \_\_\_\_\_

**Kern County Sheriff's Office  
Personnel Complaint**

Crime Report # 2012-0017

Complainant's Name: BRIAN DICKERSON DOB: 2-22-76

Address: 17695 Industrial farm Rd City: Bakersfield CA Zip: 93308

Phone Number: Home \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

Location of Occurrence: 17695 Industrial farm Rd Date/Time of Occurrence: April 9, 10:30

Personnel: Downy Young Blood Shaun Beasley commander  
(Employee's Name, Badge or Car Number)

Nature of Complaint: harassment Discrimination, sexual abuse,  
unlawful - containment Civil Rights Violations  
Please see attach

(Use additional sheets if necessary)

You have the right to make a complaint against a Sheriff's Office employee. California law requires this agency to have a procedure to investigate citizen complaints against peace officers. 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. Citizen complaints and any reports of findings relating to complaints must be retained by this agency for at least five years.

I have read and understood the above statement.

Brian Dickerson  
Complainant's Signature

Date: April 9 2015

Received by: Blachburn #792

Date: 4/9/15

Copy Given To: BRIAN DICKERSON

Date: 4/9/15

Authorized: Yes \_\_\_\_\_ No \_\_\_\_\_ By: \_\_\_\_\_  
(Sheriff, Undersheriff, Chief Deputy)

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

Reviewed by Admin Svcs Bureau Chief: \_\_\_\_\_

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

Adverse Comment: \_\_\_\_\_ Pre-Investigation: \_\_\_\_\_ Divisional: \_\_\_\_\_ IA Investigation: \_\_\_\_\_

Authorized for PDSA: \_\_\_\_\_

Investigator Assigned: \_\_\_\_\_ Date: \_\_\_\_\_

Subject Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The KERN County Sheriff's Department  
Have denied and violated my Civil Rights  
August 13, 2012 while in custody in Booking and  
Receiving I WAS sexual assaulted By 3 Detention  
Deputies Reference Complaint # 2012-0017 Complaint  
was made by Patrick Jackson President of NAAEP  
Because of my fear of Retaliation MR Jackson  
agreed to Be Spokeners Between the Sheriff's  
Department. Interview was conducted by Sr Deputy  
HINKLE Recorder of interview will show and  
Prove that Sr Deputy HINKLE agreed that we will  
Receive a line up giving me the opportunity  
to point out the Deputies accuse of sexual assault  
How could Proper investigation Been conducted  
without the NAMES OR Line up identifying Deputies  
I Ask for copies of Records and any documents  
Pertaining and concerning to Complaint # 2012-0017  
This was clearly the Sheriff's Department way  
of violating my Civil Rights. No assistance  
was provided By the Sheriff's Department and  
any Evidents that was Required of investigation  
have Been tainted I requested that Base on  
Sheriff's Department Refusal to investigate that  
Out-side assistances Be brought in to investigate of  
The violation of my Civil Rights and  
Case # 2012-0017

**Kern County Sheriff's Department Detention Facilities**

Departamento Del Sherife Del Condado De Kern Facilida De Detencion

Inmate Grievance Form

Forma De Queja O Reclamacion Para Presos

DICKERSON, BRIAN

Inmates Name/Nombre Preso

2104994

Booking Number/Numero

A 507

Housing Location/Situacion/Barraka y Cama

Check one box only:

- CUSTODY/COSTODIA
- CLASSIFICATION/ CLASSIFICACION
- MENTAL HEALTH/ SALUD MENTAL
- LAUNDRY/LAVANDERIA
- MEDICAL SERVICES/ SERVICIOS MEDICALES
- FOOD SERVICE/ SERVICIOS DE COMIDA
- OTHER \_\_\_\_\_

(Facility Manager)

Explain your complaint, including dates, times, names of persons involved, and the location where the incident occurred. You may grieve only one issue per grievance form and only one inmate may be listed on the form. A grievance must be filed within ten working days of the incident.

Explique su queja, incluso fechas y tiempos del incidente, los nombres de las personas implicadas en el incidente, donde ocurrió el incidente, y el remedio que usted solicita. Solamente una queja por cada forma. Nomás un prisionero puede quejarse por cada forma. Su queja tiene que ser sometida entre diez días laborables del incidente.

<b>Grievance/Queja O Reclamacion:</b>	<b>Date/Fecha:</b> 4-15-2015	
<p>I was COURT ORDER By COURT S. Austin UNITED STATES DISTRICT COURT EASTERN District of California TO forward COPIES CONCERNING CASE 1:15-CV-00518-GSA (PC) BRIAN DICKERSON v DONNY YOUNGBLOOD et al The KERN County Detention facility Refuse to provide me with copies to meet and apply with Judge COURT ORDER. It is my BELIEF that I am BEEN DISCRIMINATED by the KERN County Sheriff's Department. This is therefore I ask that I BE provided ASSISTANCES to meet COURT ORDER dead LINE</p>		
<p><b>Do Not Write Below This Line - To Be Completed By Sheriff's Staff</b>  <b>No Escriba Bajo De Esta Linea Sera Completado Por Personal De El Sherife</b></p>		
<p>APR 10 / 2015 1702457</p>	<p>4/15/2015</p>	<p>JAT</p>
<small>Received By/Recebido Por</small>	<small>Date Received</small>	<small>Forwarded To/Adelantado A</small>