

1 **COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983**

2 Name: Sims Rickey Lee
3 (Last) (First) (Middle Initial)

4 Prisoner Number: AR-7-7-65

5 Institutional Address: Salinas Valley State Prison
6 P.O. Box 1050, Soledad CA. 93960

(PR)

8 **UNITED STATES DISTRICT COURT**

9 **NORTHERN DISTRICT OF CALIFORNIA**

10 Rickey Lee Sims
11 (Enter your full name.)

CV16 6779

12 vs.

13 Captain R. Sullivan.
14 C/O S. ZAVALA/C/O G. MARQUEZ
15 Lieutenant J. Stevenson
16 (Enter the full name(s) of the defendant(s) in this action.)

Case No. _____
(Provided by the clerk upon filing)

**COMPLAINT UNDER THE
CIVIL RIGHTS ACT,
42 U.S.C. § 1983**

NOV 23 2016

SUSAN Y. SOONG
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

17 **I. Exhaustion of Administrative Remedies.**

18 **Note:** You must exhaust available administrative remedies before your claim can go
19 forward. The court will dismiss any unexhausted claims.

20 A. Place of present confinement Salinas Valley State Prison

21 B. Is there a grievance procedure in this institution? YES NO

22 C. If so, did you present the facts in your complaint for review through the grievance
23 procedure? YES NO

24 D. If your answer is YES, list the appeal number and the date and result of the appeal at each
25 level of review. If you did not pursue any available level of appeal, explain why.

26 1. Informal appeal: _____

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2. First formal level: _____

3. Second formal level: ~~Denied~~ Denied

6-6-2016

4-29-2016 Appeal Inquiry

4. Third formal level: Denied

8-19-2016

E. Is the last level to which you appealed the highest level of appeal available to you?

YES NO

F. If you did not present your claim for review through the grievance procedure, explain why.

I DID

II. Parties.

A. Write your name and present address. Do the same for additional plaintiffs, if any.

Rickey dee Sims AR7765 Salinas Valley State
Prison, P.O. Box 1050 D-9 ASU
Soledad CA. 93960

B. For each defendant, provide full name, official position and place of employment.

P. Sullivan Captain Salinas Valley Prison CDOR
S. ZAVALA Corrections officer S.V.S. PCOR
G. MARQUEZ Corrections officer S.V.S. PCOR
Lieutenant J. Stevenson
All B Yard Place of work

1 **III. Statement of Claim.**

2 State briefly the facts of your case. Be sure to describe how each defendant is involved
3 and to include dates, when possible. Do not give any legal arguments or cite any cases or
4 statutes. If you have more than one claim, each claim should be set forth in a separate
5 numbered paragraph.

6 1. On The week of March 6-12-2016 Inmate Curry AP
7 5300, Asked C/O G Marquez for a cell move, C/O G. Marquez
8 stated to Inmate Curry AP 5300, The Two of you are
9 gonna have to fight, At this time, I Ricket Sims AR
10 7765 lived in cell 116 with Inmate Curry AP 5300
11 in Salinas Valley State Prison Building 2 Block, G
12 Marquez was then the Floor officer. He returned
13 back to cell 116, and stated the C/O said that in
14 order to get a cell move we would have to fight
15 On orders from the floor staff G. Marquez, on
16 March, 17-2016 once again, Inmate Curry AP 5300
17 Ask G. Marquez for a cell move, he and I were

18 **IV. Relief.**

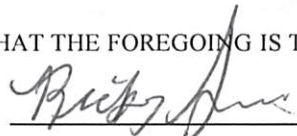
19 Your complaint must include a request for specific relief. State briefly exactly what you
20 want the court to do for you. Do not make legal arguments and do not cite any cases or
21 statutes.

22 my specific Relief, I would like this court to Grant
23 me monetary Damages from all 4 Fore Persons in my
24 complaint, 100,000. 25,000 from each Person. I would
25 also like this court to Grant me an order of Protection
from all four CDC-R Employees in this Issue, I would

26 I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

27 Executed on: 11-2-2016

Date



Signature of Plaintiff

IV Relief

1 like this court to Grant me relief in the form of no
2 more Retaliation from these defendants in this complaint.
3 I also would like a stay - away order and never to
4 be place in any prison where these 4 people ~~are~~ may
5 work or be placed in any prison where any of there
6 relatives may work also or spouses. Also as relief
7 I would like all my fines and Restitution paid
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9 off.
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III STATEMENT of Claim

1 not getting along. On orders of staff on 3-16-16
2 G. MARQUEZ, was called to cell 116 B Yard, and Inmate
3 CURRY stated he needed to get out of that cell, once
4 again. At the time Inmate Curry AP 5300 was
5 bleeding from his head and cheek, G. MARQUEZ
6 Then stated you know what you have to DO in order
7 to get out of the cell, (Fight) and that's what we
8 DiD, on the 16th on orders from staff, on the 17th
9 on orders from staff on the 18th on orders from

10 Salinas Valley State Prison corrections officer G. MARQUEZ
11 Based on his action and failure to protect us from
12 each other, his failure under the color of authority
13 did force me in-to and act of violence, I fear for my
14 life and SAFETY, as a result Inmate Curry was hurt and so
15 WAS I, I WAS shot and my Tibia on my Right leg was
16 broken. I know have 4 screws and one TITANIUM Rod
17 for the rest of my life.

18 2. S. ZAVALA on 3-18-2016, officer S. ZAVALA WAS
19 working 2 Building Tower, when me and Inmate CURRY
20 AP 5300 started fighting on orders from floor G
21 MARQUEZ's staff, S. ZAVALA shot me in my Right
22 leg breaking it, At the time he shot, Inmate Curry
23 AP 5300 and my-self were not fighting we were
24 we were standing still in a corner of Building
25 2. S. ZAVALA did not act in good faith by

1 Shooting me with a Glock Gun and breaking my
2 leg, At that very moment we were standing still
3 In mate CURRY was holding both my arms. S
4 ZAVALA shot me with the intent to hurt me, and
5 he D.I.D.
6

7 3. Lieutenant J. Stevenson D.I.D in fact respond to
8 This incident, I was laying on the floor bleeding
9 with a broken leg, Lieutenant J. Stevenson stepped
10 over my body and stated to another C/O I'll bet
11 you they will get down the next time. J Stevenson
12 is the Supervisor of G. Marquez and S. ZAVALA, I
13 feel he is also responsible for given the order to act
14 and run the building AS (They) C/Os see fit with
15 the protection of the position of J. Stevenson as
16 "Lieutenant." I also believe, did in fact use his position
17 to protect the wrong doing of G. Marquez and
18 S. ZAVALA and also by denying me due process try
19 to cover up this whole situation.
20


21 4. P. Sullivan Captain, he is the Boss or Supervisor
22 of all three, I would like this court to hold him
23 responsible, for his involvement, ON 3-21-24, I D.I.D
24 in fact speak to Captain Sullivan, he stated to me that
25 none of what I will say will be believed, Captain Sullivan
26 I do believe did use his power to also cover up this
27 entire situation.
28


The following witnesses were questioned: N/A. The following information was reviewed as a result of your allegations of staff misconduct: Appeal Log# SVSP-L-16-02190/Incident: SVSP-FB2-16-03-0202, CDCR-128-C, SBI Medical Evaluation Chrono and Medical Report of Injury (7219). Staff: *did* *did not* violate CDCR policy with respect to one or more of the issues appealed.

ALL STAFF PERSONNEL MATTERS ARE CONFIDENTIAL IN NATURE.

- As such, the details of any inquiry will not be shared with staff, members of the public, or offender appellants.
- 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. A variety of personnel actions may be initiated by the Department based upon the content of your complaint and the outcome of any investigation or inquiry conducted as a result of your complaint.
- 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 and/or exhaust administrative remedies, you must submit your staff complaint appeal through all levels of appeal review up to, and including, the Secretary's/Third Level of Review. Once a decision has been rendered at the Third Level, administrative remedies will be considered exhausted.

Print: ^{hair} Captain P. Sullivan _____ Sign:  _____ Date: 5/9/16

Print: V. Solis, CDW (A) _____ Sign:  _____ Date: 5/9/16

Interviewer
Reviewing Authority

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

THIRD LEVEL APPEAL DECISION

Date: **AUG 19 2016**

In re: Ricky Sims, AR7765
Salinas Valley State Prison
P.O. Box 1020
Soledad, CA 93960-1020

TLR Case No.: 1514182 Local Log No.: SVSP-16-02190

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

I APPELLANT'S ARGUMENT: It is the appellant's position that on March 18, 2016, he was in an alleged mutual combat with another inmate at the Facility "B" Building 2 Dayroom. At this time, Correctional Officer (CO) S. Zavala twice fired a wooden block round at him breaking his "Tibula" during a simple fight. CO Zavala then falsified his report to indicate he fired two XM 1006 Exact Impact sponge rounds when in fact he fired lethal wooden rounds from his 40 mm launcher. He claims that the Salinas Valley State Prison (SVSP) is historically corrupt. He also claims that several investigations have shown SVSP custody staff have adopted gang like attitudes and mentalities fostering a strict "Code of Silence" such as the "Green Wall." Other officers distanced themselves from CO Zavala stating they did not see what type of round Zavala used. He further claims that he is in severe pain and does not deserve this. He is requesting a full and fair investigation by the Office of Internal Affairs; and no further retaliation for using the appeal process.

II SECOND LEVEL'S DECISION: The reviewer found a basis to partially grant the appeal. The review of the allegation of staff misconduct presented in the written complaint was completed; and, based upon this review the appellant's appeal was processed as an appeal inquiry. The inquiry included a review of the evidence, an evaluation of any interview conducted, and a review of pertinent documents and current policies, laws, and procedures. The appellant was informed that all staff personnel matters are confidential in nature. The appellant will only be notified whether the actions of staff were or were not in compliance with policy. The inquiry was completed and it was found that staff did not violate policy with respect to the issue appealed. The appeal was partially granted in that an inquiry was completed and has been reviewed.

III THIRD LEVEL DECISION: Appeal is denied.

A. FINDINGS: Upon review of the documentation submitted, the appellant's Electronic Records Management System and Strategic Offender Management System files, regarding the incident, the Third Level of Review (TLR) Examiner determined that the appellant's allegation was appropriately reviewed and evaluated by administrative staff. All staff personnel matters are confidential in nature and will not be disclosed to other staff, the general public, the inmate population, or the appellant. If the conduct of staff was determined not to be in compliance with policy, the institution will take the appropriate course of action. In this case, the Second Level of Review (SLR) informed the appellant that an inquiry was completed and disclosed the determination of the inquiry. The appellant's request for staff training, to place documentation in a staff member's personnel file; to reprimand staff; to remove staff from a position; and/or requests for monetary compensation, is beyond the scope of the appeals process. The confidential inquiry was reviewed at the TLR. The TLR Examiner concurs with the determination of the SLR. The institution's response complies with departmental policy and the appellant's staff complaint allegation was properly addressed. Pursuant to CCR 3084.1(d), "No reprisal shall be taken against an inmate or parolee for filing an appeal." No relief is warranted from the TLR.

B. BASIS FOR THE DECISION:

California Penal Code Section: 832.5, 832.7, 832.8, 5058
California Code of Regulations, Title 15, Section: 3000, 3000.5, 3001, 3084.1, 3084.3, 3084.9, 3268, 3268.1, 3270, 3271, 3275, 3278, 3286, 3291, 3315, 3316, 3317, 3318, 3320, 3323, 3380, 3391

Memorandum

Date : April 29, 2016

To : Sims, AR7765
Z9-148
Salinas Valley State Prison

Subject: **STAFF COMPLAINT RESPONSE - APPEAL # SVSP-L-16-02190 SECOND LEVEL RESPONSE**

APPEAL ISSUE: Appellant states on March 18, 2016, he was involved in an alleged mutual combat with another inmate and Correctional Officer Zavala utilized a wood-Block round at him twice causing severe crippling injury. (Broken Tibula) Appellant further alleges that Officer Zavala falsified his report to indicate he utilized two (2) XM1006 Exact Impact Sponge Rounds when in fact he utilized Lethal Wood rounds from his 40mm Launcher. .

All issues unrelated to the allegation of staff misconduct must be appealed separately and will not be addressed in this response. You do not exhaust administrative remedies on any unrelated issue not covered in this response or concerning any staff member not identified by you in this complaint. If you are unable to name all involved staff you may request assistance in establishing their identity.

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 is: Being processed as an Appeal Inquiry.

INTERVIEW/EFFECTIVE COMMUNICATION:

A review of the Test of Adult Basic Education (TABE) list reveals the appellant has a Reading Grade Point Level above 4.0 and the Disability and Effective Communication System (DECS) reveals the appellant does not have a physical impairment that would limit effective communication. Therefore the appellant did not require special accommodation to achieve effective communication and interactions with the interviewer convinced the interviewer that the appellant understood the issues of the appeal.

On April 25, 2016, Correctional Captain P. Sullivan conducted an interview with appellant regarding his allegation. Appellant had no additional information to provide regarding this appeal.

Your appeal is **PARTIALLY GRANTED** in that: The Appeal inquiry has been complete and all issues has been reviewed and were adequately addressed.

1514182



AR7765

USE ONLY

Institution/Parole Region:

SUSP

Log #:

SUSP-L-16-02190

Category:

7

MISUSE OF FORCE

FOR STAFF USE ONLY

You may appeal any California Department of Corrections and Rehabilitation (CDCR) decision, action, condition, policy or regulation that has a material adverse effect upon your welfare and for which there is no other prescribed method of departmental review/remedy available. See California Code of Regulations, Title 15, Section (CCR) 3084.1. You must send this appeal and any supporting documents to the Appeals Coordinator (AC) within 30 calendar days of the event that lead to the filing of this appeal. If additional space is needed, only one CDCR Form 602-A will be accepted. Refer to CCR 3084 for further guidance with the appeal process. No reprisals will be taken for using the appeal process.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First): <u>SIMS, RICKY</u>	CDC Number: <u>AR7765</u>	Unit/Cell Number: <u>Z9-148</u>	Assignment: <u>N/A</u>
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State briefly the subject of your appeal (Example: damaged TV, job removal, etc.):

<STAFF COMPLAINT - EXCESSIVE FORCE - COVERUP>

A. Explain your issue (If you need more space, use Section A of the CDCR 602-A):

ON 3-18-16, I WAS INVOLVED IN AN ALLEGED MUTUAL COMBAT WITH ANOTHER INMATE @ FACILITY B, BLDG. 2 DAYROOM; AT THIS TIME, CDCR GUARD, S. ZAVALA FIRED A WOODEN-BLOCK ROUND AT ME TWICE. (602A) ->

B. Action requested (If you need more space, use Section B of the CDCR 602-A):

I REQUEST: (1) A FULL & FAIR INVESTIGATION BY INTERNAL AFFAIRS, ETC.; (2) NO FURTHER RETALIATION FOR USING THE APPEALS PROCESS.

Supporting Documents: Refer to CCR 3084.3.

Yes, I have attached supporting documents.

List supporting documents attached (e.g., CDC 1083, Inmate Property Inventory; CDC 128-G, Classification Chrono):

- ORIGINAL RVR
- REPORT OF C/O ZAVALA

No, I have not attached any supporting documents. Reason:

3/18/16
CLAIMS
that
correctional
officer
Zavala used
an unauthorized
round breaking
his "tibia".

RECEIVED
JUN 10 2016
APPEALS BRANCH
APR 1 2016

Inmate/Parolee Signature: Ricky Sims Date Submitted: 4-14-2016

By placing my initials in this box, I waive my right to receive an interview.

C. First Level - Staff Use Only

Staff - Check One: Is CDCR 602-A Attached? Yes No

This appeal has been:

- Bypassed at the First Level of Review. Go to Section E.
- Rejected (See attached letter for instruction) Date: _____ Date: _____ Date: _____ Date: _____
- Cancelled (See attached letter) Date: _____
- Accepted at the First Level of Review.

Assigned to: _____ Title: _____ Date Assigned: _____ Date Due: _____

First Level Responder: Complete a First Level response. Include interviewer's name, title, interview date, location, and complete the section below.

Date of Interview: _____ Interview Location: _____

Your appeal issue is: Granted Granted in Part Denied Other: _____

See attached letter. If dissatisfied with First Level response, complete Section D.

Interviewer: _____ Title: _____ Signature: _____ Date completed: _____

Reviewer: _____ Title: _____ Signature: _____

Date received by AC: _____

AC Use Only

Date mailed/delivered to appellant ___/___/___

D. If you are dissatisfied with the First Level response explain the reason below; attach supporting documents and submit to the Appeals Coordinator for processing within 30 calendar days of receipt of response. If you need more space, use Section D of the CDCR 602-A.

Inmate/Parolee Signature: _____

Date Submitted: _____

Staff - Check One: Is CDCR 602-A Attached? Yes No

E. Second Level - Staff Use Only

This appeal has been:

- By-passed at Second Level of Review. Go to Section G.
- Rejected (See attached letter for instruction) Date: _____ Date: _____ Date: _____
- Cancelled (See attached letter)
- Accepted at the Second Level of Review

Assigned to: Scullion Title: CAPT Date Assigned: 4/15 Date Due: 5/27

Second Level Responder: Complete a Second Level response. If an interview at the Second Level is necessary, include interviewer's name and title, interview date and location, and complete the section below.

Date of Interview: 4/25/16 Interview Location: 29

Your appeal issue is: Granted Granted in Part Denied Other: _____

See attached letter. If dissatisfied with Second Level response, complete Section F below.

Interviewer: Scullion Title: CAPT Signature: _____ Date completed: 4/29/16

Reviewer: VSS Title: CAPI Signature: _____

Date received by AC: _____

AC Use Only
Date mailed/delivered to appellant May 12 2016

F. If you are dissatisfied with the Second Level response, explain reason below; attach supporting documents and submit by mail for Third Level Review. It must be received within 30 calendar days of receipt of prior response. Mail to: Chief, Inmate Appeals Branch, Department of Corrections and Rehabilitation, P.O. Box 942883, Sacramento, CA 94283-0001. If you need more space, use Section F of the CDCR 602-A.

① I Request that the CDCR provide me with the monetary compensation for the life time injuries caused by SVSP staff. ② To be given a life time Single cell status, these injuries made me defenseless and can't protect myself from any cell mates. ③ To be transferred to a prison closer to my family due to PTSD, caused by SVSP staff, chatting me, so I can cope well. Folsom SP

Inmate/Parolee Signature: Ricky Sims Date Submitted: 6-6-2016

G. Third Level - Staff Use Only

This appeal has been:

- Rejected (See attached letter for instruction) Date: _____ Date: _____ Date: _____
- Cancelled (See attached letter) Date: _____
- Accepted at the Third Level of Review. Your appeal issue is Granted Granted in Part Denied Other: _____

See attached Third Level response.

Third Level Use Only
Date mailed/delivered to appellant AUG 23 2016

Request to Withdraw Appeal: I request that this appeal be withdrawn from further review because: State reason. (If withdrawal is conditional, list conditions.)

Inmate/Parolee Signature: _____ Date: _____

Print Staff Name: _____ Title: _____ Signature: _____ Date: _____

INMATE/PAROLEE USE ONLY Institution/Parole Region Log # Category

1514182

16-2190

FOR STAFF USE ONLY

Attach this form to the CDCF 602, only if more space is needed. Only one CDCF 602-A may be used.

Appeal is subject to rejection if one row of text per line is exceeded.

WRITE, PRINT, or TYPE CLEARLY in black or blue ink.

Name (Last, First)	CDC Number	Unit/Cell Number	Assignment
SIMS, RICKY	AR7765	E9-148	2/A

A. Continuation of CDCF 602 Section A only (Explain your issue): CAUSING SEVERE, CRIPPLING INJURY. C/O ZAVALA FALSIFIED HIS REPORT(S) TO INDICATE HE FIRED "TWO(2) XM1006 EXACT IMPACT [SPONGE ROUNDS]", WHEN IN FACT, HE FIRED LETHAL WOODEN ROUNDS FROM HIS 40MM LAUNCHER.
SALINAS VALLEY STATE PRISON IS HISTORICALLY CORRUPT: SEVERAL INVESTIGATIONS HAVE SHOWN SVSP CUSTODY STAFF HAVE ADOPTED GANG-LIKE ATTITUDES & MENTALITIES THAT HAVE HELPED TO FOSTER A STRICT "CODE-OF-SILENCE" AMONG GUARDS, RETALIATIONS, AND GUARD-GANGS SUCH AS "THE GREEN WALL", AND OTHERS THAT HAVE SINCE BEEN DRIVEN UNDERGROUND, ONLY TO REAR THEIR UGLY HEADS, LIKE HERE (WHEREIN AN OFFICER IS FOUND TO HAVE VIOLATED A PRISONER'S CIVIL RIGHTS). IN THE INSTANT COMPLAINT, C/O ZAVALA USED AN UNAUTHORIZED ROUND, BREAKING APPELLANT'S TIBULA DURING A SIMPLE FIGHT. ALL OF A SUDDEN, A WEAPON IS "FOUND"... THE WRITER OF THE RVR, (J. FUCH) AND OTHERS ATTEMPT TO DISTANCE THEMSELVES FROM ZAVALA, BY STATING, "I DID NOT SEE WHAT KIND OF ROUND [ZAVALA] UTILIZED". I AM IN SEVERE PAIN & DO NOT DESERVE THIS.

RECEIVED
 JUN 10 2016
 CRIMINAL APPEALS BRANCH

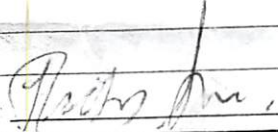
Inmate/Parolee Signature: [Signature] Date Submitted: 4-14-2016
APRIL 14, 2016

B. Continuation of CDCF 602 Section B only (Action requested):

Inmate/Parolee Signature: _____ Date Submitted: _____

D. Continuation of CDCR 602, Section D only (Dissatisfied with First Level response): I must be transferred to Folsom state Prison ASAP. I am having hard time dealing w/ this injury, physically and mentally. I need to recover, and the only way to be closer to my family so they can visit me. This injury is causing them lots of pain and suffering. Also my life is in danger if I am kept in SVSP, fearing any retaliation from the state officials in SVSP. PTSD is serious, and the longer SVSP keeping me here in Ad/seg. specifically will cause me more harm for the long run. CDCR must act quickly and transfer me to Folsom.

I do not believe that C/O ZAVILA acted in good faith to maintain order. I do contend that he shot me maliciously and sadistically for the very purpose of causing me harm. At the time he fired there was no punching or fighting going on.

Inmate/Parolee Signature: 

Date Submitted: 6-6-2016

F. Continuation of CDCR 602, Section F only (Dissatisfied with Second Level response):

I do not believe that C/O ZAVILA acted in good faith to maintain order, I do contend that C/O ZAVILA shot me in my right leg breaking it. I also contend that he did in fact act in a maliciously and sadistically manner for the sole purpose of causing me harm. At the time he shot me there was no fighting or punching going on.

Inmate/Parolee Signature: 

Date Submitted: 6-6-2016 7:30 pm

RIGHTS AND RESPONSIBILITY STATEMENT

The California Department of Corrections and Rehabilitation has added departmental language (shown inside brackets, in non-boldface type) for clarification purposes.

Pursuant to Penal Code 148.6, anyone wishing to file an allegation of misconduct by a departmental peace officer must read, sign and submit the following statement:

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER [this includes a departmental peace officer] **FOR ANY IMPROPER POLICE** [or peace] **OFFICER CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS'** [or inmates/parolees'] **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. CITIZEN** [or inmate/parolee] **COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.**

COMPLAINANT'S PRINTED NAME Rickey Sims	COMPLAINANT'S SIGNATURE <i>Rickey Sims</i>	DATE SIGNED 4-14-16
INMATE/PAROLEE PRINTED NAME RICKY SIMS	INMATE/PAROLEE'S SIGNATURE <i>Rickey Sims</i>	CDC NUMBER AR7765
RECEIVING STAFF'S PRINTED NAME	RECEIVING STAFF'S SIGNATURE	DATE SIGNED 4-14-16

DISTRIBUTION:
ORIGINAL -
Public - Institution Head/Parole Administrator
Inmate/Parolee - Attach to CDC form 602
Employee - Institution Head/Parole Administrator
COPY - Complainant