

# EXHIBIT B

STEP 1-3 AMF-17-06-1437-12E4 GRIEVANCE  
OF DELIBERATE INDIFFERENCE to a serious medical  
need. ON 5-25-17 INSUPPORT OF 1983 COMPLAINT  
CIVIL ACTION

1. STEP 1-3 AMF-17-06-1437-12E4 EXHIBITS R-16 THROUGH  
R-22

2. SUPPORTING EXHIBITS Z-11 DISBURSEMENT AUTHORIZATION  
L2SAL EXPEDITED MAIL ROOM CST-318

SHOWING STEP 1-3 WAS SENT TO LANSING (STEP 3 GRIEVANCE)  
ON 7-19-17 WITHIN OH STEP 3 RESPONSE (APPEAL)

3. <sup>SUPPORTING</sup> MEDICAL EXHIBITS OF X-RAYS AND MEDICAL RESPONSES IN  
SUPPORT OF DELIBERATE INDIFFERENCE FROM AMX HEALTH CARE  
SEE: EXHIBITS K-1 THROUGH K-37. ALL THE SYMPTOMS OF  
EXPOSURE IMPLICATED ON 5-25-17 THAT WERE NOT  
TREATED

4. SUPPORTING MEDICAL ~~STEP~~ GRIEVANCE EXHIBITS SHOWING  
A CONTINUOUS PATTERN OF DELIBERATE INDIFFERENCE BY  
DEPENDANT (~~PHYSICIAN~~ ASSISTANT) KRISTINE NYQUIST  
SEE: <sup>SUPPORTING</sup> GRIEVANCE EXHIBITS AMX-17-07-00046.12d3  
Dated 12-21-16 K-38. K-39

5. SUPPORTING EXHIBIT ~~K-40 THROUGH K-49~~ ~~90~~ PAGE EXHIBIT  
SHOWING DENIAL OF MEDICATION AND ACCESS OF CONTINUED  
(~~DETENTION~~) FROM DEPENDANT ~~FOR~~ PSYCHOLOGICAL AND MEDICAL STAFF  
ACTS

6. ALSO SEE: EXHIBIT Z-11-B LETTER SENT TO LANSING STEP 3 GRIEVANCE  
APPEAL SECTION REQUESTING STEP 3 RESPONSE



# Michigan Department of Corrections

"Expecting Excellence Every Day"

## Memorandum

**Date:** 6/29/2017  
**To:** MAYS MARCUS 218101 3 - 214  
**From:** Warden's Office  
 Baraga Correctional Facility  
**Subject:** Grievance Appeal Receipt - Step II

I acknowledge receipt of your Step II grievance appeal, identifier **AMF 17 — 06 — 1437 — 12 E** which was received in this office on **6/29/2017** unless you are otherwise notified you should be provided a Step II response within 15 business days of the date your appeal was received or no later than: **7/20/2017**

*EXHAUSTED STEP 1-3*  
*SENT TO LAWYERS ON*  
*7-19-17 JUST WAITING*  
*ON STEP 3 RESPONSE*  
*SEE EXHIBIT*  
*OF 2-11 019*  
*EXPEDITED*  
 STEP 3  
711 APPEALS legal mail  
 Disburst. memo  
 will send to court  
 WHEN I get my  
 STEP 3 RESPONSE  
 back from  
 LAWYERS



EXHIBIT P-16

MICHIGAN DEPARTMENT OF CORRECTIONS  
PRISONER/PAROLEE GRIEVANCE FORM

4835-4247 10/94  
CSJ-247A

Date Received at Step I 6/1/17 Grievance Identifier: AMF 1706 11437 1254

Be brief and concise in describing your grievance issue. If you have any questions concerning the grievance procedure, refer to PD 03.02.130 and OP 03.02.130 available in the prison Law Library.

Name (print first, last)	Number	Institution	Lock Number	Date of Incident	Today's Date
MARENS B MOYS	218101	AMF	3-214	5-25-17	5-31-17

What attempt did you make to resolve this issue prior to writing this grievance? On what date? TRIED TO RESOLVE ISSUES WITH

If none, explain why. (SECOND REQUEST FOR GRIEVANCE TO BE PROCESSED) ON 5-25-17 I TOLD MS. RM ELIZABETH CORKISAN ABOUT MY EXCESSIVE BEATING AND MY JAW WAS SWOLLEN AND IN PAIN AND MY HEAD WAS HURTING FROM HEADACHES SHE SAID I DON'T CARE IF THEY KNOW YOU FILED A LAW SUIT ON ME. SHE CONTINUED PASSING UP MEDS

HEALTH CARE ONLY TO CONTINUE TO BE DENIED MEDICAL TREATMENT WHO IS KNOWN FOR COVERING UP INJURIES INFLICTED BY OFFICERS AT AMF

State problem clearly. Use separate grievance form for each issue. Additional pages, using plain paper, may be used.

Four copies of each page and supporting documents must be submitted with this form. The grievance must be submitted to the Grievance Coordinator in accordance with the time limits of OP 03.02.130.

I WAS SHOT IN PAIN FROM THE BEATINGS I RECEIVE FROM THE OFFICERS PARABOLIMASSUR, GEMEMAN, ANDERSON, PYNNONEN AND CORONADO THEN TOLD HER ABOUT HOW MY FOOD HAD BEEN TEMPERED WITH BY ANDERSON AND CHOP UNKNOWN AND THAT MY THROAT WAS BURNING AND I WAS SPITTING UP SPECKS OF BLOOD (SHE SAID FUCK YOU) AND KEEPT PASSING OUT MEDS SAME DAY AFTER NOON SHIFT DURING I TOLD NURSE SUPERVISOR SABRINA ABOUT MY EXCESSIVE FORCE BEATINGS AND UNJUSTIFIED FOOD POISONING AND MY THROAT WAS STILL SWELLING AND THE SPECKS OF BLOOD I WAS SPITTING UP I WAS REFUSED MEDICAL TREATMENT ON 5-25-17. (ON FIRST SHIFT) ON 5-25-17 I MADE A CLEAR STATEMENT TO UNKNOWN RN EYELA ABOUT MY SWOLLEN JAW PAIN AND BURNING THROAT AND SPECKS OF BLOOD FROM FOOD POISONING AND EXCESSIVE FORCE INJURIES I WAS REFUSED AND ON SECOND SHIFT ON 5-26-17 I GAVE UNKNOWN RN MS USHATA MY HEALTH STILL AND SHOWED HER MY SWOLLEN JAW AND TOLD HER HEAD WAS STILL HURTING FROM HEADACHES AND MY THROAT WAS BURNING AND I WAS SPITTING UP SPECKS OF BLOOD FROM FOOD POISONING AND WAS STILL HURT FROM EXCESSIVE FORCE BEATINGS I WAS SAID NEVER TREATED OR CALLED OUT FOR MEDICAL TREATMENT BY EITHER NURSE

SEE PAGE 2 OF CONTINUATION OF THIS STEP 1 GRIEVANCE IN CONTINUED PMS

RESPONSE (Grievant Interviewed?)  Yes  No If No, give explanation. If resolved, explain resolution.)

Respondent's Signature Aaron Jeffrey Date 6-15-17  
Respondent's Name (Print) Aaron Jeffrey Working Title RN 13  
Reviewer's Signature Snyder Date 6-15-17  
Reviewer's Name (Print) Snyder Working Title RN 13

Date Returned to Grievant: 6/1/17 If resolved at Step I, Grievant sign here. Resolution must be described above. Grievant's Signature \_\_\_\_\_ Date \_\_\_\_\_



Page 2

Continuation of Step Grievance on Nurses who intentionally refused medical attention once I made it known due to my serious injuries

AM# 17-06-1457-1284

EXHIBIT R-17

ON 5-27-17 FIRST SHIFT MED ROUNDS I TOLD RN NICOLE SUNBURG AND SAID MY KITE ~~HAND~~ HAD HER THAT MY JAW WAS IN PAIN AND SHOWED HER MY SWOLLEN JAW AND TOLD HER MY HEAD WAS HURTING FROM CONTINUOUS HEADACHES, AND THAT THE FACT THAT TWO OF THOSE OFFICERS WHO BEAT ME DOWN TAMPERED WITH MY SOAP TRAY WHICH TASTED LIKE DISINFECTED CLEANER WHICH HAD MY THROAT BURNING AND HAD ME SPITTING UP SPECKS OF BLOOD, I WAS NEVER CALLED OUT

THOSE RN'S WAS WELL AWARE OF MY PAIN AND SUFFERING AND REFUSED ME MEDICAL TREATMENT. ON SECOND SHIFT MED ROUNDS I TOLD AND SHOWED RN DAVID PINEGAN THESE SPECKS OF BLOOD I WAS SPITTING

UP AND MY SWOLLEN JAW AND TOLD HIM MY HEAD HURTS REALLY BADLY HE SAID YOU LOOK LIKE SO MUCH A LITTLE ASS WHIPPINGS AND IT SOING TO HURT YOU MAYS AND THAT BLOOD YOU NEED TO SAG ON IT AND PIS THIS SAME DAY ON 5-27-17.

ON 5-28-17 I TOLD UNKNOWN RN MS. USITAO THAT I WAS NEVER CALLED OUT ABOUT MY SERIOUS INJURIES SHE SAID THAT'S TOO BAD AND I WAS SUPPOSE TO HAVE BEEN CALLED OUT BY RN NICOLE SUNBURG, ON

5-28-17 SAME DAY SECOND SHIFT DURING ROUTINE MED ROUNDS I MADE IT CLEAR AGAIN TO DAVID PINEGAN RN WHO SAID YOU FILED A GRIEVANCE ON ME AND THE P.O. ON 12-23-16 DAMN YOUR FUCKING INJURIES. IT'S VERY CLEAR THAT THESE AMX HEALTH CARE PRISON OFFICIALS WILL RETALIATE AND DO WHAT EVER IT TAKE TO COVER UP EXCESSIVE FORCE INJURIES INFLICTED AND KIDN POISONING BY OFFICERS. THIS STEP 1 GRIEVANCE CONTINUTION IS KNOWN FOR REFUSING TO PROCESS GRIEVANCES FOR HIS CO-WORKERS WITH INTENT TO COVER UP SERIOUS INCIDENT AND CONSPIRE WITH AMX PRISON OFFICIALS AND RAISING MISCONDUCT WITH INTENT TO STOP THE GRIEVANCE PROCESS AND A PRISONER ACCESS TO COURT.

THESE MAY BE RETALIATION DUE TO THIS GRIEVANCE WRITTEN BY HIM AND THESE PRISON ADMINISTRATIONS. BY PLACING ME ON MODIFIED GRIEVANCE RESTRICTION. I WAS TOLD BY NURSE DAVID PINEGAN THAT NONE OF THE ~~OTHER~~ NURSES WILL ALLOW YOU TO SEE A DOCTOR AND YOU CANT SEE A DOCTOR WITHOUT ORAL APPROVAL

ON 6-2-17 ARTER REPECT KITES I WAS ONLY CALLED OUT BY SUPERVISOR, AND YOU CANT SEE A DOCTOR WITHOUT ORAL APPROVAL



EXHIBIT R-18

Michigan Department of Corrections

AMF-17-06-1437-124

Grievance Step I Response

Mays #240622 <sup>218101</sup> #218101

The Grievant alleges he was assaulted by staff, reported it to multiple nurses and was not evaluated for his injuries.

The grievant's allegations of assault by staff were reported to custody administrative staff and upon investigation, it was determined his allegations were unfounded.

The grievant was scheduled to be seen by the nurse on 5-26-17 after he alleged he was assaulted. However he refused to allow the nurse to evaluate him. The grievant submitted a health care request which was processed on 5-26-17 alleging injury from assault and he was scheduled to be evaluated by the nurse again. On the 27<sup>th</sup> the grievant refused to be evaluated by the nurse. Another health care request was submitted by the grievant and processed on 5-27-17. An appointment was scheduled on the 29<sup>th</sup>. During rounds the nurse spoke with grievant cell-side on the 28<sup>th</sup> at which time the nurse determined the grievant was in no apparent distress, provided patient education and informed the grievant that he was scheduled to be evaluated by the nurse the following day. On 5-29-17 when the nurse attempted to evaluate the grievant he became disruptive and hostile and it was necessary to end the visit. On 5-29-17 a health care request from the grievant was processed regarding the alleged assault. The grievant was scheduled to see the nurse on the 31<sup>st</sup> although due to the grievant's threatening behavior toward housing staff and the nurse the appointment was cancelled. On 6-1-17 a fourth health care request was received and processed. An appointment was scheduled on 6-2-17. The grievant was evaluated by the nurse and referred to the medical provider. The medical provider evaluated the grievant on 6-5-17. At no time did the grievant have any visible bruising, swelling, abrasions or evidence of injury. The medical provider recommended the grievant continue his current prescribed medication, increase fluid intake, provided education and reassurance.

Should the grievant have further medical complaints he is encouraged to contact health care.

Aaron Jeffery  
Respondent Name

Aaron Jeffery  
Respondent Signature

15 June 2017  
Date

EXHIBIT R-18



MICHIGAN DEPARTMENT OF CORRECTIONS  
**PRISONER/PAROLEE GRIEVANCE APPEAL FORM**

4835-4248 5/09  
CSJ-247B

Date Received by Grievance Coordinator 6/29/17 <sup>EXHIBIT F-19</sup> Grievance Identifier: AMP 17-06-01437-12e4  
at Step II:

**INSTRUCTIONS:** THIS FORM IS ONLY TO BE USED TO APPEAL A STEP I GRIEVANCE.

The white copy of the Prisoner/Parolee Grievance Form CSJ-247A (or the goldenrod copy if you have not been provided with a Step I response in a timely manner) **MUST** be attached to the white copy of this form if you appeal it at both Step II and Step III.

If you should decide to appeal the Step I grievance response to Step II, your appeal should be directed to: \_\_\_\_\_  
Grievance Office by 6/30/17. If it is not submitted by this date, it will be considered <sup>untimely</sup> terminated.

If you should decide to appeal the response you receive at Step II, you should send your Step III Appeal to the Director's Office, P.O. Box 30003, Lansing, Michigan, 48909.

Name (Print first, last)	Number	Institution	Lock Number	Date of Incident	Today's Date
Marcus Demays	218100	AMP	3-214	5-25-17	6-25-17

**STEP II - Reason for Appeal** ON 6-4-17, I TOLD NURSE NICOLE SNIBURG THAT MY HEAD AND JAW REALLY HURTS AND I'M STILL SPOTTING UP BLOOD. I WAS REFUSED AND THEN TOLD THAT DIDNT I TELL YOU MAYS YOU WASNT GOING TO SEE NO DOCTOR AS SHE LAUGH AND WALKED OFF WITH THE OFFICER PYNNOYEN WHO BEAT ME DOWN AND POISON MY FOOD MAY ON 5-25-17. ON 6-5-17 I WAS CALLED OUT AND TOOK TO HEALTH CARE BY 3 OFFICERS WHO BEAT ME DOWN IN HANDCUFFS, ANDERSON, COCONARDOL PYNNOYEN WHO STATED FUCKINS NISSER ~~WE~~ WE ALWAYS GOT A WAY TO GOVICK UP WHEN WE WERE A PRISONER ASS ESP. WHEN WE PUT DISINFECTED CLEANER IN HIS FOOD, MY HYGIENE THE BIT IS NOT GOING TO HELP YOU NO MAKE THEM OUR NURSES DID FOR YOU STILL SPITTING UP BLOOD STATED PYNNOYEN HE STATED WE HAD TO BREAK YOUR FUCKING JAW AND NEXT AND KNOCK YOUR FUCKING HEAD OFF YOUR SHOULDERS. WHEN I CAME IN THE PREPARE

**STEP II - Response**

Date Received by Step II Respondent:  
**JUL 06 2017**

*See attached response*

Alicia Lamb Respondent's Name (Print)  
[Signature] Respondent's Signature  
7/14/17 Date

Date Returned to Grievant:  
7/17/17

**STEP III - Reason for Appeal** MY THROAT IS STILL BURNING AND SORE WHICH THEY REFUSE TO TREAT PLUS I'VE BEEN SPITTING UP BLOOD HEALTH CARE IS WELL AWARE OF MY INJURIES AND HAVE BEEN SINCE 5-25-17 DUE TO FOOD POISONING PLUS MY HEAD CONTINUES TO HURT FROM HEADACHES PLUS MY JAW HURTS ALSO FROM EXCESSIVE UNJUSTIFIED FORCE 05-25-17 AND THE P.A. MS. MYQUIST, I WAS DENIED MEDICAL TREATMENT AND TOLD BY NURSE ELIZABETH CORRISSAN SHE HOPE I DIE IVE ALSO BEEN TOLD BY SEVERAL NURSES

**NOTE:** Only a copy of this appeal and the response will be returned to you. that would put me

**STEP III - Director's Response** is attached as a separate sheet. Down AS A PRISONER WHO REFUSE MEDICAL TREATMENT AND SOLD BY HEAR NURSE SINDER THAT THERE

DISTRIBUTION: White - Process to Step III; Green, Canary, Pink - Process to Step II; Goldenrod - Grievant  
 WAS NOTHERS WRONGS WITH ME AND THAT ARE NOT GOING TO LET ME SEE A DOC JAIL IN FACT SHE STATED WE ARE GLAD YOU GOT FUCKED UP AND AS FAR AS SHE OR CONCERNED SHE DIDNT SEE NO INJURIES FROM A BEATING OF EXCESSIVE FORCE AND THE EXHIBIT DOCUMENT THAT IN MY MEDICAL FILE - ONE 6-27



Page 2

CONTINUATION OF STEP 2 APPEAL AMIC-17-08-1437-12E4 ON HEALTHCARE STAFF

PLEASE KEEP ALL 4 PAGES ATTACHED TO THIS STEP 2 APPEAL

THE UNIT EXAM ROOM THE PHYSICIAN ASSISTANT MS. NYQUIST STATED YOU THE SAME SPOTTED UP FUCKER WHO WROTE THAT GRIEVANCE ON ME SEE: AMIC-17-01-00048-1203 OR SKIZANCE WROTE WROTE ON HER (DAVID RINGAN) AND RN NICOLE SUN BUCKS ON 12-31-17 FOR DELIBERATE INDIFFERENCE TO A SERIOUS MEDICAL NEED AFTER AN ALLERGIC REACTION TO ANGIOTENSINS "THESE MEDICAL NURSES REFUSE TO SEND ME TO THE HOSPITAL WHEN (THEY SAID I HAD) A SEVERE ALLERGIC LIKE THREATENING ALLERGIC REACTION) TO MEDICATION ALSO SECOND SKIZANCE FILED ON THIS P.A. KRISTIN NYQUIST DUE TO RETALIATION ON 6-5-17 MS. NYQUIST STATED I WAS THE SAME SPOTTED UP FUCKER WHO WROTE THAT SKIZANCE ON HER SHE STATED I TOLD YOU IF YOU DIDNT SIGN OFF YOU WONT RECEIVE ANY MEDICAL TREATMENT FROM ME SHE STATED NURSE RINGAN TOLD YOU TOO AND NOW YOU BRING YOUR UGLY SPOTTED UP ASS IN HERE THINKING I'M GOING TO TREAT YOU SHE STATED I CAN SPEAK FOR THE WHOLE STAFF WE ARE NOT GOING TO TREAT YOU SHE STATED YOU DONT HAVE ANY INJURIES SHE TOLD THE C/O'S WHO BEAT ME DOWN" GET HIM OUT OF HERE, I WAS FORCED TO GO BACK TO MY CELL IN PAIN WITH MY JAW STILL SWOLLEN AND MY HEAD WAS STILL HUNTING FROM HEADACHES AND STILL IS TO THIS DAY PLUS I WAS STILL SPITTING UP SPECKS OF BLOOD SEE: EXHIBITS OF HEALTH CARE KITES SENT SEEKING MEDICAL TREATMENT FROM ALL THE NURSES WITH NURSE SUPERVISOR SABINA SYNDER IS THE HEAD HUNCHO ALONG WITH RN ELIZABETH M. COCKRISAN I'VE BEEN CONTINUOUSLY DENIED MEDICAL TREATMENT BY ALL THE NURSES AND CONTINUOUSLY THREATENED AND TOLD THAT I WOULD NEVER SEE A DOCTOR THEN TOLD ON 6-2-17 BY NURSE SUPERVISOR SABINA SYNDER THAT AS FAR AS SHE IS CONCERNED I DIDNT RECEIVE ANY INJURIES AND THAT THEY WERE GOING TO PUT IT IN MY MEDICAL FILE THAT I NO INJURIES TO TREAT EVEN AFTER REPEATEDLY TOLD ALL THE NURSES THAT MY HEAD AND JAW HURT REALLY BAD AND THAT I WAS SPITTING UP BLOOD SEE: MEDICAL EXHIBITS SENT FROM 5-25-17 THROUGH 6-08-17, PRISON OFFICIAL THREATS TO DO MORE HARM TO ME FOR TAKING LEGAL ACTION VIOLATES MY RIGHTS TO MEANINGFUL ACCESS TO THE COURTS WHICH IS GUARANTEED BY THE DUE PROCESS CLAUSE OF THE FOURTEENTH AMENDMENT



~~XXXXXXXXXX~~

Michigan Department of Corrections

AMF-1706-1437-12E4

EXHIBIT # 21

Grievance Step II Response

MAYS 218101

Grievant claims that Health Care denied him evaluation and treatment after he was assaulted by custody staff on 5/25/17.

Investigation determined that grievant's issue was appropriately addressed by the Step I Respondent and is affirmed at the Step II Appeal. Per that response, grievant's allegation of staff assault was investigated and found to be without merit. Review of the electronic medical record confirms that Health Care repeatedly offered grievant the opportunity for evaluation in response to his requests for same. Grievant repeatedly declined and/or behaved in a manner that made termination of the encounters necessary. Grievant was subsequently evaluated by the medical provider on 6/5/17; no acute findings were noted.

Grievance denied.

Grievant is encouraged to promptly notify Health Care should any adverse symptoms persist or worsen in future.

Patricia Lamb, RN, BSN  
Respondent Name

Patricia Lamb, RN, BSN  
Respondent Signature

July 14, 2017  
Date



MICHIGAN DEPARTMENT OF CORRECTIONS

4835-3318

DISBURSEMENT AUTHORIZATION (EXPEDITED LEGAL MAIL - PRISONER)

CSJ-318 05/02

Please PRINT clearly illegible and/or incomplete forms will not be processed.

Lock

Institution

3-214

(AMF)

STEP 3 APPEAL 5-25-17 INCIDENT

on health care AMF-17-06-1437-1254

218101  
Prisoner Number

MARCUUS D. MAYS  
Prisoner Name (Print Clearly)

STEP 1-3 EXHAUSTED MAIL ADDRESS ON STEP 3 RESPONSE TO SEND TO COURT

Legal Postage

Filing Fee \$

Certified Mail (Must Be a Court Ordered Requirement)

New Case

Case Number

STEP 3 APPEAL will provide this

Pay To: INDEBT L&S1 POSTAGE, PBR LOAN

Mailing Address: (STEP 3 APPEALS) DIRECTOR'S OFFICE, PO BOX, 30003, LANSING MICHIGAN, 48909 (GARVANCE APPEAL SECTION)

I CERTIFY UNDER PENALTY OF PERJURY 28 USC THAT I MAILED STEP 1-3 GARVANCE AMF-17-06-01437-1254 TO STEP 3 GARVANCE AND APPEALS SECTION

The following section must be completed in Authorizing Staff Member's presence. DIRECTOR'S OFFICE ON

Prisoner Signature: Marcus D. Mays

Date & Time Submitted: 7/19/2017

Received By (Print Name & Title): [Signature]

Staff Signature: [Signature]

Date & Time Received by Authorizing Staff: \_\_\_\_\_

Authorization Denied:

with FULLY PREPAID POSTAGE VIA EXPEDITED

LEGAL MAIL ROOM 652-318

Does not meet definition of legal mail or court filing fee as identified in CFA OP 05.03.118.

Not hand delivered to authorizing staff member.

New case or case number not on form.

Does not include court order for handling as certified mail.

Other

Prisoner refused to sign & date in staff member's presence.

JUL 21 2017

Section below to be completed by Mail Room Staff

Placed in Mail by (Print Name & Title): Dorota 601

Signature: BARAGA CORRECTIONAL PRISONER ACCOUNTING

Postage Amount: \$ 67

Date & Time placed in outgoing Mail: 7/20/17 0830

Only Business Office Staff are to Write in the Section Below

Obligation Amount	Actual Expense
.67	

Court filing Fee Denied due to NSF.

THIS IS TO SHOW THE STEP 1-3 GARVANCE WAS SENT OUT 7-19-17 TO LANSING GARVANCE APPEALS

Date Posted: 7/20/17  
Date & Time Copy Sent to Prisoner: 7/20/17 15:00

Processed By (Print Name & Title): T. Minton Acct Tech

Signature: T. Minton

DISTRIBUTION: White - Prisoner Accounting Canary - Prisoner Pink - Counselor's File Goldenrod - Prisoner

I HAVE EXHAUSTED STEP 1-3 AMF 17-06-1437-1254