Inmate Administrative Remedy Form Connecticut Department of Correction

CN 9602 REV 1/31/09

acility/Unit: CORREGEN C.I.	CAT TO A VIEW		Date: 6 27 2012	
Inmate name:		Inmate	Inmate number:	
SECTION 1 SEL	LECT ADMINISTRAT	IVE REMEDY A, B	or C BELOW.	
Follow the instructions (for property claims, complete Remedies' box).				
A.	in Section 4 the reaso covery of the cause of eview: Diagnos	on why the form is no f the grievance.	> Refer to Section 2 below > Complete Section 4	
C. I am filing an Appeal of a (select one	e below):	***************************************		
Appeals must be filed within 15 days o Disciplinary Action	r notification of a decis	ion.	S	
Special Management Decision	Classific	ation Decision	> Complete Section 3 below	
Media Review Committee Decision Security Risk Group Designation Determination of Grievance Process	n ☐ Furlough ☐ ADA De	Decision	Complete Section 4 >>>>	
*			FRATIVE REMEDY PROCEDURE	
 This request for an administrative remedy mu This request for an administrative remedy mu and shall not be filed by an inmate on behalf of A repetitive request for administrative remedy and there has been no change in any circums administrative remedy is still in process. 	est be filed by the inma of another. I may not be filed by t	ate who is personall he same inmate wh	ly affected by the subject of the request en a final response has been provided	
	ECTION Complete	this Castion for a	Disciplinary Appeal ONLY	
You may file a Disciplinary Appeal ONLY if you have complete this section; then complete Section 4 (Sta	ve pleaded not guilty a	and have been found		
Offense:		o tovolog glag.	Report date:	
Facility where hearing was conducted:			Date of hearing:	
Did you have an advocate? yes no	If yes, name of adv	vocate:	solo h	
Did you identify witness(es) to the investigator?	yes no	Did your witness(es) testify?	
Name(s) of any witness(es):		4		
Abo appeared at	an votation of	ambar V		

CONFIDENTIAL

(FOR OFFICIAL USE ONLY)

Inmate name:

Inmate number:

Housing:

SECTION 4

STATE THE PROBLEM AND REQUESTED RESOLUTION

Provide any factual information that is applicable, including any responses from staff. State the action that you think should be taken to resolve the problem. PLEASE PRINT. I Am Filing THIS Appeal Because on 6/26/2012 AN issue of under lock 3 key , THE may - June 2012 issue was rejected because of SO CALLED SAFETY 7 SECURITY iSSUES. I HAVE MANY PUBLICATIONS BY UNDER LOCK & Key Already THAT All Passed security measures and deemed appropriate. All MATERIAL is pretty much identical mits nature and consent, so than could 5 026 be Acceptable and I not Be. I understand THE wortents are political By my political views Me my own. I Bellette it was rejected so key Because It's contents son tinnary speak about THE pluse and oppressive TACTICS OF THE Administration of THE D.O.C Not only in . Connecticut But Also All over The U.S. ITAlso provides in formation on our legal rights as inmates and streds light on wags To combat up pression Through The courts, As is our rights AS U.S. CITIZENS - under lock & Key were solverates violence only peaceful revolution THROught THE legal System. Furthermne it is my Belief THAT THIS CENSORSHIP VIOLATES my first amendement rigits and immy cases are a keeply in court in Reyseds to THIS matter in many states. Some stready wow . I ASK THAT THIS BE Remedied by Allowing me THIS publication and my FURTHER ISSUES OR MATERIAL I MAY RECEIVE. THAT YOU IN advance for su your time Befront.

	Jacob Company	ner evilenteleimte us 101 anniper eur
Inmate signature:		Date: (ne 3. 20) ?
For all reme	dies except health services, dep or a health services issue, depo	osit this form in the <u>Administrative Remedies box</u> . sit this form in the <u>Health Services box</u> .
SECTION 5	DECISION / OFFICIAL US	E ONLY - DO NOT WRITE IN THE SPACE BELOW
Date Received: 7/9/12	IGP#: 140-	13-003 (A) T#. 140-569
Disposition:	sen il	Date of Disposition:
Reason:	See after	relied means with
You have exhausted DO	C's Administrative Remedies.	This matter may be appealed to:
Signature:	Dir V	Date: 7/26/18