

**INMATE/PAROLEE
APPEAL FORM**

CDC 602 (12/87)

Location: Institution/Parole Region

App No

Category

1. _____

1. _____

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 |
|------------|------------|------------|------------|
| [REDACTED] | [REDACTED] | N/A | [REDACTED] |

A. Describe Problem: I'm an inmate housed in the "security housing unit", (S.H.U.) and was received by this institution 9-16-2009 and I've subscribed to "MIM" a periodical newsletter but I've received no issues or any rerouted ones during the period mentioned by that company in the attached document and never received notice of any denial. After patiently attempted to resolve this matter with housing unit officers, requests to appropriate staff, and seeing if the newsletter due to me was "backlogged" in the mailroom somehow, I have no resort but to grieve this matter as a violation of my 1st Amendment "freedom of speech" rights under the U.S. Constitution

If you need more space, attach one additional sheet.

B. Action Requested: I request to be informed if "MIM Notes" is on the banned list of publications. If not, why am I not receiving my subscription even though the company provided proof, they sent me numerous issues?

Inmate/Parolee Signature: [REDACTED] Date Submitted: 5/3/2009

C. INFORMAL LEVEL (Date Received: 5-6-09)
Staff Response: Denied, see attached Memo.

Staff Signature: [Signature] Date Returned to Inmate: 5-6-09

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 _____
CDC Appeal Number: _____

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

