MAURICE PIERRE OLIVIER
CALIPATRIA STATE PRISON - BUILDING D5 CELL 204
POST OFFICE BOX 5002
7018 BLAIR ROAD
CALIPATRIA, CA 92233
F83603

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

MAURICE PIERRE OLIVIER, PLAINTIFF V. LOS ANGELES COUNTY BOARD OF SUPERVISORS GLORIA MOLINA YVONNE B. BURKE ZEV YABOSLAVSKY DON KNABE MICHAEL D. ANTONOVICH LOS ANGELES COUNTY SHERIFF'S DEPARTMENT LEROY BACA LOS ANGELES COUNTY CENTRAL JAIL POLICARPIO ENRIQUEZ M.D., DEFENDANTS	CASE NUMBER CV 08-7169-JFW (AGR) "FIRST AMENDED COMPLAINT" CIVIL RIGHTS COMPLAINT PURSUANT TO ☒ 42 U.S.C. § 1983 ☐ BIVENS V. SIX UNKNOWN AGENTS 403 U.S. 388 (1971)

ORIGINAL

MAURICE PIERRE OLIVIER
FULL NAME

COMMITTED NAME (if different)

CSP-BLDG 05 #204 P.O. BOX 5002
FULL ADDRESS INCLUDING NAME OF INSTITUTION

CALIPATRIA, CA 92233

F83603
PRISON NUMBER (if applicable)

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

MAURICE PIERRE OLIVIER, PLAINTIFF
V.
LOS ANGELES COUNTY BOARD OF SUPERVISORS
GLORIA MOLINA
YVONNE B. BURKE
ZEV YABOSLAVSKY
DON KNABE
MICHAEL D. ANTONOVICH "CONTINUED ON PG. 1A"

CASE NUMBER
CV 08-7169-JFW (AGR)
To be supplied by the Clerk
"FIRST AMENDED COMPLAINT"

CIVIL RIGHTS COMPLAINT PURSUANT TO *(Check one)*
☒ 42 U.S.C. § 1983
☐ Bivens v. Six Unknown Agents 403 U.S. 388 (1971)

A. PREVIOUS LAWSUITS

1. Have you brought any other lawsuits in a federal court while a prisoner: ☒ Yes ☐ No

2. If your answer to "1." is yes, how many? ONE

Describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on an attached piece of paper using the same outline.)

THE COUNTY OF LOS ANGELES OFFICIAL POLICY OF PROSECUTING FEDERAL CITIZENS BY INFORMATION FOR AN INFAMOUS CRIME PURSUANT TO PENAL CODE SECTION 682, WAS ACTION UNDER COLOR OF LAW.

MAURICE PIERRE OLIVIER
FULL NAME

COMMITTED NAME (if different)

CSP-BLDG D5 #204 P.O. BOX 6002
FULL ADDRESS INCLUDING NAME OF INSTITUTION

CALIPATRIA, CA 92233

F83603
PRISON NUMBER (if applicable)

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

MAURICE P. OLIVIER, PLAINTIFF

V.

LOS ANGELES COUNTY SHERIFF'S DEPARTMENT
LEROY BACA
LOS ANGELES COUNTY CENTRAL JAIL
POLICARPIO ENRIQUEZ M.D.,

DEFENDANTS.

CASE NUMBER
CV 08-7169-JFW (AGR)
To be supplied by the Clerk

"FIRST AMENDED COMPLAINT"

CIVIL RIGHTS COMPLAINT
PURSUANT TO *(Check one)*

☒ 42 U.S.C. § 1983
☐ Bivens v. Six Unknown Agents 403 U.S. 388 (1971)

A. PREVIOUS LAWSUITS

1. Have you brought any other lawsuits in a federal court while a prisoner: ☒ Yes ☐ No

2. If your answer to "1." is yes, how many? ONE

Describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on an attached piece of paper using the same outline.)

THE COUNTY OF LOS ANGELES OFFICIAL POLICY OF PROSECUTING FEDERAL CITIZENS BY INFORMATION FOR AN INFAMOUS CRIME PURSUANT TO PENAL CODE SECTION 682, WAS ACTION UNDER COLOR OF LAW.

a. Parties to this previous lawsuit:
Plaintiff MAURICE PIERRE OLIVIER

Defendants COUNTY OF LOS ANGELES

b. Court UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA WESTERN DIVISION.

c. Docket or case number CV-07-2961-JFW (JWJ)

d. Name of judge to whom case was assigned JOHN F. WALTER

e. Disposition (For example: Was the case dismissed? If so, what was the basis for dismissal? Was it appealed? Is it still pending?) YES - 28 U.S.C. § 2253(c)(2) - YES - YES No. 07-56106

f. Issues raised: PENAL CODE SECTION 682 VIOLATES THE PRIVILEGES OF FEDERAL CITIZENS, AND THE EQUAL PROTECTION OF THE LAWS GUARANTEE SECURED BY THE FOURTEENTH AMENDMENT.

g. Approximate date of filing lawsuit: MAY 10, 2007

h. Approximate date of disposition PENDING IN THE NINTH CIRCUIT COURT OF APPEALS

B. EXHAUSTION OF ADMINISTRATIVE REMEDIES

1. Is there a grievance procedure available at the institution where the events relating to your current complaint occurred? ☒ Yes ☐ No

2. Have you filed a grievance concerning the facts relating to your current complaint? ☐ Yes ☐ No

If your answer is no, explain why not JAIL ADMINISTRATORS PURSUANT TO ARTICLE III SECTION [2] CLAUSE [1], AND 28 U.S.C. § 1331. LACK AUTHORITY STATUTORY OR OTHERWISE TO RESOLVE CONSTITUTIONAL ISSUES OF DUE PROCESS.

3. Is the grievance procedure completed? ☐ Yes ☒ No

If your answer is no, explain why not PROTECTIONS SECURED BY U.S. TREATIES PURSUANT TO ART. II SEC. [2] SUPERSEDE RESTRICTIONS IMPOSED VIA 28 U.S.C. 1915A AND 42 U.S.C. § 1997e(a)

4. Please attach copies of papers related to the grievance procedure.

C. JURISDICTION

This complaint alleges that the civil rights of plaintiff MAURICE PIERRE OLIVIER (print plaintiff's name)

who presently resides at 7018 BLAIR ROAD P.O. BOX 5002 CALIPATRIA, CA 92233 (mailing address or place of confinement),

were violated by the actions of the defendant(s) named below, which actions were directed against plaintiff at

LOS ANGELES COUNTY CENTRAL JAIL / LOS ANGELES, CALIFORNIA (institution/city where violation occurred)

on (date or dates) 07/12/06 THRU 07/17/06 (Claim I), 09/01/06 THRU 10/15/06 (Claim II), 09/18/06 THRU 01/23/07 (Claim III).

NOTE: You need not name more than one defendant or allege more than one claim. If you are naming more than five (5) defendants, make a copy of this page to provide the information for additional defendants.

1. Defendant GLORIA MOLINA (full name of first defendant) resides or works at

500 W. TEMPLE ROOM 856 LOS ANGELES, CA 90012 (full address of first defendant)

BOARD OF SUPERVISOR, FIRST DISTRICT (defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

FAILURE TO IMPLEMENT A POLICY STATEMENT, REGULATION, OR DECISION TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE LOS ANGELES COUNTY CENTRAL JAIL.

2. Defendant YVONNE B. BURKE (full name of first defendant) resides or works at

500 W. TEMPLE ROOM 866 LOS ANGELES, CA 90012 (full address of first defendant)

BOARD OF SUPERVISOR, SECOND DISTRICT (defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

FAILURE TO IMPLEMENT A POLICY STATEMENT, REGULATION, OR DECISION TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE LOS ANGELES COUNTY CENTRAL JAIL.

3. Defendant ZEV YAROSLAVSKY (full name of first defendant) resides or works at

500 W. TEMPLE ROOM 821 LOS ANGELES, CA 90012 (full address of first defendant)

BOARD OF SUPERVISOR, THIRD DISTRICT (defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

FAILURE TO IMPLEMENT A POLICY STATEMENT, REGULATION, OR DECISION TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE LOS ANGELES COUNTY CENTRAL JAIL.

4. Defendant DON KNABE (full name of first defendant) resides or works at

500 W. TEMPLE ROOM 822 LOS ANGELES, CA 90012
(full address of first defendant)

BOARD OF SUPERVISOR, FOURTH DISTRICT
(defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

FAILURE TO IMPLEMENT A POLICY STATEMENT, REGULATION, OR DECISION TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE LOS ANGELES COUNTY CENTRAL JAIL

5. Defendant MICHAEL D. ANTONOVICH resides or works at

(full name of first defendant)

500 WEST TEMPLE ROOM 869 LOS ANGELES, CA 90012
(full address of first defendant)

BOARD OF SUPERVISOR, FIFTH DISTRICT
(defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

FAILURE TO IMPLEMENT A POLICY STATEMENT, REGULATION, OR DECISION TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE LOS ANGELES COUNTY CENTRAL JAIL.

on (date or dates) 01/13/06 THRU 07/16/06 (Claim I), 09/01/06 THRU 10/15/06 (Claim II), 09/18/06 THRU 01/23/07 (Claim III).

NOTE: You need not name more than one defendant or allege more than one claim. If you are naming more than five (5) defendants, make a copy of this page to provide the information for additional defendants.

6. Defendant LEROY BACA (full name of first defendant) resides or works at

4700 RAMONA BLVD, MONTEREY PARK 91754 (full address of first defendant)

LOS ANGELES COUNTY SHERIFF CUSTODY OPERATIONS (defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

LAX OVERSIGHT OF CUSTODY OPERATIONS CAUSED A CUSTOM OF FLOOR SLEEPING AND UNSANITARY CONDITIONS IN VIOLATION OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS.

7. Defendant POLICARPIO F. ENRIQUEZ M.D. (full name of first defendant) resides or works at

441 BAUCHET STREET, LOS ANGELES, CA 90012 (full address of first defendant)

MEDICAL DOCTOR (defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☒ individual ☒ official capacity.

Explain how this defendant was acting under color of law:

FAILURE TO FOLLOW-UP ON MEDICAL RECOMMENDATIONS RESULTED IN A NEGLIGENT BREACH OF DUTY TO USE DUE CARE IN VIOLATION OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS.

8. Defendant _____ (full name of first defendant) resides or works at

_____ (full address of first defendant)

_____ (defendant's position and title, if any)

The defendant is sued in his/her (Check one or both): ☐ individual ☐ official capacity.

Explain how this defendant was acting under color of law:

_____

_____

D. CLAIMS*

CLAIM I

The following civil right has been violated:

THE PLAINTIFF'S CAUSE OF ACTION RESTS UPON DUE, PRIVILEGES, AND EQUAL PROTECTION UNDER THE LAWS SECURED BY THE FIFTH, AND FOURTEENTH AMENDMENTS OF THE FEDERAL CONSTITUTION. WITCH ESTABLESHES PRE-TRIAL DETAINEE RIGHTS, AND THE STANDARD MINIMUM RULES FOR THE TREATMENT OF PRISONERS BY WAY OF A UNITED STATES TREATY. MOROVER, THE DEFENDANTS MUST BE HELD IN CIVIL CONTEMPT OF THE CONSENT DECREE MANDATING A COURT DIRECTED MONITORING PROGRAM COORDINATED BY THE AMERICAN CIVIL LIBERTIES UNION OF SOUTHERN CALIFORNIA.

(SEE: EXHIBIT B)

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

[1.] THE COUNTY BOARD OF SUPERVISORS IS THE GOVERNENG BODY OF THE COUNTY OF LOS ANGELES. AS SUCH, THEY HAVE THE FUNCTION OF SERVING AS THE EXECUTIVE, AND LEGISLATIVE HEAD OF COUNTY GOVERNMENT. ESTABLISHING SPECIFIC REGULATIONS FOR THE ADMINISTRATION OF COUNTY DEPARTMENTS i.e. THE LOS ANGELES COUNTY CENTRAL JAIL. THUS, GLORIA MOLINA ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, CIVIL CONTEMPT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS. WHEN THE BOARD WAS UNDER LEGAL OBLIGATION TO PROMULGATE A POLICY STATEMENT, OR REGULATION TO COUNTY JAIL CIVILIAN, MEDICAL, OR LAW ENFOLCEMENT PERSONEL TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE JAIL.

(SEE: SUMMARY JUDGMENT ORDER BY THE HONORABLE PREGERSON DATED 09/21/07 CASE NO. 04-08448-DDP (SHx))

CONTINUED ON PAGE 5A

If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

[CONTINUED]

FURTHEMORE, SHE AGREED WITH OTHER SUPERVISORS TO SETTLE PRIOR FLOOR SLEEPING CIVIL ACTIONS AGAINST LOS ANGELES COUNTY CENTRAL JAIL. FROM 07/12/06 THROUGH 07/17/06 IN THE MEDICAL INTAKE AREA OF THE JAIL. THE PLAINTIFF WAS FORCED TO LIVE, AND SLEEP ON A CONCRETE FLOOR FOR SIX DAYS. WITHOUT ACCESS TO BASIC HUMAN NEEDS SUCH AS A BED, BLANKET, PILLOW, SHOWER, TOOTHBRUSH, TOOTH-PASTE, SOAP, TOWEL, AND RAZORS. THIS HARSH, AND INJURIOUS TREATMENT RESULTED IN PERMANENT CHRONIC NECK, BACK, AND SHOULDER PAIN INJURIES TO THE PLAINTIFF. (See: Exhibit A)

D. CLAIMS*

CLAIM I

The following civil right has been violated:

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

[2.] THE COUNTY BOARD OF SUPERVISORS IS THE GOVERNING BODY OF THE COUNTY OF LOS ANGELES. AS SUCH, THEY HAVE THE FUNCTION OF SERVING AS THE EXECUTIVE, AND LEGISLATIVE HEAD OF COUNTY GOVERNMENT. ESTABLISHING SPECIFIC REGULATIONS FOR THE ADMINISTRATION OF COUNTY DEPARTMENTS i.e. THE LOS COUNTY CENTRAL JAIL. THUS, YVONNE B. BURKE ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, CIVIL CONTEMPT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS. WHEN THE BOARD WAS UNDER LEGAL OBLIGATION TO PROMULGATE A POLICY STATEMENT, OR REGULATION TO COUNTY JAIL CIVILIAN, MEDICAL, OR LAW ENFORCEMENT PERSONEL TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE JAIL. (SEE: SUMMARY JUDGMENT ORDER BY THE HONORABLE PREGERSON DATED 09/21/07 CASE NO. 04-08448-DDP (SHx))

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If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

[CONTINUED]

FURTHERMORE, SHE AGREED WITH OTHER SUPERVISORS TO SETTLE PRIOR FLOOR SLEEPING CIVIL ACTIONS AGAINST LOS ANGELES COUNTY CENTRAL JAIL. FROM 07/12/06 THROUGH 07/17/06 IN THE MEDICAL INTAKE AREA OF THE JAIL. THE PLAINTIFF WAS FORCED TO LIVE, AND SLEEP ON A CONCRETE FLOOR FOR SIX DAYS. WITHOUT ACCESS TO BASIC HUMAN NEEDS SUCH AS A BED, BLANKET, PILLOW, SHOWER, TOOTHBRUSH, TOOTH-PASTE, SOAP, TOWEL, AND RAZORS. THIS HARSH, AND INJURIOUS TREATMENT RESULTED IN PERMANENT CHRONIC NECK, BACK, AND SHOULDER PAIN INJURIES TO THE PLAINTIFF. (SEE: EXHIBIT A)

D. CLAIMS*

CLAIM I

The following civil right has been violated:

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

[3.] THE COUNTY BOARD OF SUPERVISORS IS THE GOVERNING BODY OF THE COUNTY OF LOS ANGELES. AS SUCH, THEY HAVE THE FUNCTION OF SERVING AS THE EXECUTIVE, AND LEGISLATIVE HEAD OF COUNTY GOVERNMENT. ESTABLISHING SPECIFIC REGULATIONS FOR THE ADMINISTRATION OF COUNTY DEPARTMENTS i.e., THE LOS ANGELES COUNTY CENTRAL JAIL. THUS, ZEV YAROSLAVSKY ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, CIVIL CONTEMPT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS. WHEN THE BOARD WAS UNDER LEGAL OBLIGATION TO PROMULGATE A POLICY STATEMENT, OR REGULATION TO COUNTY JAIL CIVILIAN, MEDICAL, OR LAW ENFORCEMENT PERSONEL TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE JAIL.

(SEE: SUMMARY JUDGMENT ORDER BY THE HONORABLE PREGERSON DATED 09/21/07 CASE NO. 04-08448-AHP (SHx))

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If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

[CONTINUED]

FURTHEMORE, HE AGREED WITH OTHER SUPERVISORS TO SETTLE PRIOR FLOOR SLEEPING CIVIL ACTIONS AGAINST LOS ANGELES COUNTY CENTRAL JAIL. FROM 07/12/06 THROUGH 07/17/06 IN THE MEDICAL INTAKE AREA OF THE JAIL. THE PLAINTIFF WAS FORCED TO LIVE, AND SLEEP ON A CONCRETE FLOOR FOR SIX DAYS. WITHOUT ACCESS TO BASIC HUMAN NEEDS SUCH AS A BED, BLANKET, PILLOW, SHOWER, TOOTHBRUSH, TOOTH-PASTE, SOAP, TOWEL, AND RAZORS. THIS HARSH, AND INJURIOUS TREATMENT RESULTED IN PERMANENT CHRONIC NECK, BACK, AND SHOULDER PAIN INJURIES TO THE PLAINTIFF. (SEE: EXHIBIT A)

D. CLAIMS*

CLAIM I

The following civil right has been violated:

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

[4.] THE COUNTY BOARD OF SUPERVISORS IS THE GOVERNING BODY OF THE COUNT OF LOS ANGELES. AS SUCH, THEY HAVE THE FUNCTION OF SERVING AS THE EXECUTIVE, AND LEGISLATIVE HEAD OF COUNTY GOVERNMENT. ESTABLISHING SPECIFIC REGULATIONS FOR THE ADMINISTRATION OF COUNTY DEPARTMENTS i.e. THE LOS ANGELES COUNTY CENTRAL JAIL. THUS, DON KNABE ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, CIVIL CONTEMPT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS. WHEN THE BOARD WAS UNDER LEGAL OBLIGATION TO PROMULGATE A POLICY STATEMENT, OR REGULATION TO COUNTY JAIL CIVILIAN, MEDICAL, OR LAW ENFORCEMENT PERSONEL TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE JAIL.
(SEE: SUMMARY JUDGMENT ORDER BY THE HONORABLE PREGERSON DATED 09/21/07 CASE NO. 04-08448-DDP (SHx))

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If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

[CONTINUED]

FURTHEMORE, HE AGREED WITH OTHER SUPERVISORS TO SETTLE PRIOR FLOOR SLEEPING CIVIL ACTIONS AGAINST LOS ANGELES COUNTY CENTRAL JAIL. FROM 07/12/06 THROUGH 07/17/06 IN THE MEDICAL INTAKE AREA OF THE JAIL. THE PLAINTIFF WAS FORCED TO LIVE, AND SLEEP ON A CONCRETE FLOOR FOR SIX DAYS. WITHOUT ACCESS TO BASIC HUMAN NEEDS SUCH AS A BED, BLANKET, PILLOW, SHOWER, TOOTH BRUSH, TOOTH-PASTE, SOAP, TOWEL, AND RAZORS, THIS HARSH, AND INJURIOUS TREATMENT RESULTED IN PERMANENT CHRONIC NECK, BACK AND SHOULDER PAIN INJURIES TO THE PLAINTIFF.
(SEE: EXHIBIT A)

D. CLAIMS*

CLAIM I

The following civil right has been violated:

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

[5.] THE COUNTY BOARD OF SUPERVISORS IS THE GOVERNING BODY OF THE COUNTY OF LOS ANGELES. AS SUCH, THEY HAVE THE FUNCTION OF SERVING AS THE EXECUTIVE, AND LEGISLATIVE HEAD OF COUNTY GOVERNMENT. ESTABLISHING SPECIFIC REGULATIONS FOR THE ADMINISTRATION OF COUNTY DEPARTMENTS i.e. THE LOS ANGELES COUNTY CENTRAL JAIL. THUS, MICHAEL D. ANTONOVICH ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, CIVIL CONTEMPT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS. WHEN THE BOARD WAS UNDER LEGAL OBLIGATION TO PROMULGATE A POLICY STATEMENT, OR REGULATION TO COUNTY JAIL CIVILIAN, MEDICAL, OR LAW ENFORCEMENT PERSONEL TO CEASE THE CUSTOM OF FLOOR SLEEPING AT THE JAIL.
(SEE: SUMMARY JUDGMENT ORDER BY THE HONORABLE PREGERSON DATED 09/21/07 CASE NO. 04-08448-DDP (SHx)

CONTINUED ON PAGE 5I

If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

[CONTINUED]

FURTHERMORE, HE AGREED WITH OTHER SUPERVISORS TO SETTLE PRIOR FLOOR SLEEPING CIVIL ACTIONS AGAINST LOS ANGELES COUNTY CENTRAL JAIL. FROM 07/12/06 THROUGH 07/17/06 IN THE MEDICAL INTAKE AREA OF THE JAIL, THE PLAINTIFF WAS FORCED TO LIVE, AND SLEEP ON A CONCRETE FLOOR FOR SIX DAYS. WITHOUT ACCESS TO BASIC HUMAN NEEDS SUCH AS A BED, BLANKET, PILLOW, SHOWER, TOOTHBRUSH, TOOTH-PASTE, SOAP, TOWEL, AND RAZORS. THIS HARSH, AND INJURIOUS TREATMENT RESULTED IN PERMANENT CHRONIC NECK, BACK, AND SHOULDER PAIN INJURIES TO THE PLAINTIFF.

(SEE: EXHIBIT A)

D. CLAIMS*

CLAIM I

The following civil right has been violated:

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

[6.] LEROY BACA IS IN CHARGE OF CUSTODY OPERATIONS AT LOS ANGELES COUNTY CENTRAL JAIL. AS SUCH, HE IS IN CHARGE OF IMPLEMENTING ALL INMATE HOUSING, MOVEMENTS, AND CUSTODY CLASSIFICATION CONCERNS AT THE JAIL. SINCE 2004 LEROY BACA HAS BEEN AWARE OF OVERCROWDING AT THE JAIL RESULTING IN THE CUSTOM OF FEDERAL CITIZENS SLEEPING ON THE FLOOR, AND FAILED TO INITIATE ANY WRITTEN ORDERS TO HIS DEPUTIES, OR CIVILIAN CUSTODIAN STAFF TO CEASE THIS UNCONSTITUTIONAL PRACTICE.

(SEE: THOMAS V. BACA 04-08448-DDP (SHX), AND SUMMARY JUDGMENT ORDER BY THE HONORABLE PREGERSON DATED 09/21/07/

THUS, LEROY BACA ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS.

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If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

[CONTINUED]

FROM 07/12/06 THROUGH 07/17/06 IN THE MEDICAL INTAKE AREA OF THE JAIL. WHEN THE PLAINTIFF WAS FORCED BY THE CUSTODY STAFF TO LIVE, AND SLEEP ON A CONCRETE FLOOR FOR SIX DAYS. WITHOUT ACCESS TO BASIC HUMAN NEEDS SUCH AS A BED, BLANKET, PILLOW, SHOWER, TOOTH BRUSH, TOOTH PASTE, SOAP, TOWEL, AND RAZORS. THIS HARSH, AND INJURIOUS TREATMENT RESULTED IN PERMANENT CHRONIC NECK, BACK, AND SHOULDER PAIN INJURIES TO THE PLAINTIFF. (SEE: EXHIBIT A)

CLAIM II

D. CLAIMS

THE FOLLOWING CIVIL RIGHT HAS BEEN VIOLATED:

THE PLAINTIFF'S CAUSE OF ACTION RESTS UPON DUE PROCESS, PRIVILEGES, AND EQUAL PROTECTION UNDER THE LAWS SECURED BY THE FIFTH, AND FOURTEENTH AMENDMENTS OF THE FEDERAL CONSTITUTION. ESTABLISHING PRE-TRIAL DETAINEE RIGHTS, AND THE STANDARD MINIMUM RULES FOR THE TREATMENT OF PRISONERS. MOREOVER, THE DEFENDANT MUST BE HELD IN CIVIL CONTEMPT OF THE CONSENT DECREE MANDATING A COURT DIRECTED MONITORING PROGRAM COORDINATED BY THE AMERICAN CIVIL LIBERTIES UNION OF SOUTHERN CALIFORNIA. (SEE: EXHIBIT B)

SUPPORTING FACTS:

LEROY BACA IS IN CHARGE OF CUSTODY OPERATIONS AT LOS ANGELES COUNTY CENTRAL JAIL. AS SUCH, HE IS IN CHARGE OF OVERSEEING, AND IMPLEMENTING ALL INMATE HOUSING AT THE JAIL. THUS, LEROY BACA'S GROSS NEGLIGENCE, MALICE INTENT, AND DELIBERATE INDIFFERENCE OF HOUSING CONDITIONS AT THE JAIL RESULTED IN PLAINTIFF'S MALICIOUS INJURIES. ON 09/01/06 COUNTY SHERIFF EMPLOYEES ASSIGNED THE PLAINTIFF TO LIVE IN MODULE 2500 CELL A-20. INSIDE THIS JAIL CELL THE PLAINTIFF WAS LIVING AMONG CONSTANT COMINGS, AND GOINGS OF RATS, MICE, ROACHES, AND RED ANT INFESTATION. FURTHERMORE, INSIDE THE CELL KNATS WERE LIVING, AND BREEDING AROUND THE TOILET AREA. IN ADDITION, THE PLAINTIFF CONTACTED LICE FROM THE

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MATTRESS HE WAS SLEEPING ON. THAT CAUSED PERMANENT SKIN DISCOLORATION AROUND THE PLAINTIFF'S INNER THIGH GROIN AREAS. THE PLAINTIFF WAS FORCED TO LIVE IN THESE HORRID CONDITIONS FOR 45 DAYS. UNTIL THE PLAINTIFF CALLED THE ACLU WHO FORCED THE COUNTY JAIL ADMINISTRATORS TO CLEAN, SANITIZE, AND EXTERMINATE THE PEST, AND RODENTS INSIDE THE CELLS, AND MODULE.

(SEE: EXHIBIT A)

CLAIM III

D. CLAIMS

THE FOLLOWING CIVIL RIGHT HAS BEEN VIOLATED:

THE PLAINTIFF'S CAUSE OF ACTION RESTS UPON DUE PROCESS, PRIVILEGES, AND EQUAL PROTECTION UNDER THE LAWS SECURED BY THE FIFTH, AND FOURTEENTH AMENDMENTS OF THE FEDERAL CONSTITUTION. ESTABLISHING PRE-TRIAL DETAINEE RIGHTS, AND THE STANDARD MINIMUM RULES FOR THE TREATMENT OF PRISONERS. MOREOVER, THE DEFENDANT MUST BE HELD IN CIVIL CONTEMPT OF THE CONSENT DECREE MANDATING A COURT DIRECTED MONITORING PROGRAM COORDINATED BY THE AMERICAN CIVIL LIBERTIES UNION OF SOUTHERN CALIFORNIA.
(SEE: EXHIBIT B)

SUPPORTING FACTS:

POLICARDIO F. ENRIQUEZ'S GROSS NEGLIGENCE, MALICE INTENT, AND DELIBERATE INDIFFERENCE RESULTED IN MISFEASANCE CONDUCT. IN FAILING TO VERIFY THAT THE APPROPRIATE HEALTH CARE DEPARTMENTS TIMELY FOLLOW-UP ON HIS ORDERS RESULTED IN MALICIOUS INJURIES. ON 09/18/06 THE PLAINTIFF WAS MEDICALLY EVALUATED BY DOCTOR ENRIQUEZ IN WHICH HE PRESCRIBED A MONTHLY DISTRIBUTED MEDICATION PROGRAM. FOR THE PLAINTIFF TO HAVE DAILY MEDICATION FOR ALIMENTS OF HIGH BLOOD PRESSURE, DIABETIES, AND ACID REFLUX DISEASE.

CONTINUED ON PAGE 5O

[CONTINUED]

HOWEVER, THE PLAINTIFF DID NOT RECEIVE ANY MEDICATION FOR THESE MEDICAL CONDITIONS FOR 43 DAYS. FURTHERMORE, DURING THIS EVALUATION THE PLAINTIFF INFORMED THE DOCTOR ABOUT GLASSES BEING NEEDED, AND A LEFT-END TOOTH FILLING FALLING OUT. IN JANUARY OF 2007 BY COURT ORDER TO THE DENTAL DEPARTMENT THE PLAINTIFF WAS GIVEN ORAL SURGERY REMOVING THE TOOTH DUE TO ABSCESS, AND DECAY DUE TO LACK OF PROMPT TREATMENT. IN ADDITION, THIS COURT ORDER ALSO ALLOWED THE PLAINTIFF ACCESS TO THE OPTOMETRY DEPARTMENT, WHICH RESULTED IN THE PLAINTIFF RECEIVING GLASSES IN MARCH OF 2007. (SEE: EXHIBIT A)

E. REQUEST FOR RELIEF

I believe that I am entitled to the following specific relief:

THE DEFENDANTS ACTED WITH GROSS NEGLIGENCE, MALICE INTENT, AND DELIBERATE INDIFFERENCE OF PLAINTIFF'S PRE-TRIAL DETAINEE RIGHTS. THE PLAINTIFF PRAYS THAT THIS COURT GRANT COMPENSATORY, AND CONTINUING DAMAGES OF THIRTY-THREE (33,000) THOUSAND DOLLARS, IN ADDITION, THE PLAINTIFF REQUEST PUNITIVE DAMAGES OF THREE-HUNDRED AND THIRTY-THREE (333,000) THOUSAND DOLLARS.

August 10, 2009
(Date)

(Signature of Plaintiff)

EXHIBIT COVER PAGE

A

EXHIBIT

Description of this Exhibit:

COURT MEDICAL ORDER, DENIAL LETTER, AND CLAIMS FOR DAMAGES TO PERSON OR PROPERTY. RESPONSIBILITIES OF BOARD CV 08-7169-JFW (AGR)

Number of pages to this Exhibit: 14 pages.

JURISDICTION: (Check only one)

- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme Court
- ■ United States District Court
- ☐ State Circuit Court
- ☐ United States Supreme Court
- ☐ Grand Jury

RESPONSIBILITIES OF THE BOARD OF SUPERVISORS

The governmental powers of the County of Los Angeles are exercised through a Board of Supervisors, through agents and officers acting under authority of the Board or by authority conferred by law.

Provisions of the Los Angeles County Charter call for a five-member Board of Supervisors, each of whom must be an elector of the district represented, must reside therein during incumbency, must have been such an elector for at least one year immediately preceding election and be elected by the district.

The Board of Supervisors fulfills three major powers in County government: executive, legislative and quasijudicial.

In an executive capacity, the responsibilities of a county supervisor to constituents who reside in unincorporated areas are similar to those of a mayor of an incorporated city. The supervisor is required to administer all local governmental services.

In its legislative role, the Board may adopt ordinances and rules, both to control the administration of County government and to regulate public conduct within the unincorporated areas of the County.

Acting in a quasijudicial capacity, the Board acts as an appeals board on zone exception cases of the Regional Planning Commission. It sits for hearings on county improvement districts and on appeals in licensing matters.

The Board of Supervisors is responsible for the adoption of an annual budget outlining the expenditures of all branches of the County on a fiscal-year basis. It also serves as the governing body of many special districts, including Flood Control and Fire Protection Districts. The Board supervises the activities of the chief administrative officer and all County departments, determines County and special district policies and sets salaries of County personnel.

Each supervisor has the responsibility of selecting citizens to serve on the various County commissions and committees.

In addition to the duties specifically assigned to the Board of Supervisors by law, each Board office acts as a liaison between the public and the many branches of government.

BOARD OF SUPERVISORS

Rm. 383, Kenneth Hahn Hall of Administration
500 W. Temple St., Los Angeles 90012
Internet home page: http://bos.co.la.ca.us

The Board of Supervisors is the governing body of the County of Los Angeles. As such, it has the function of serving as the executive and legislative head of County government, enacting ordinances, setting salaries and establishing specific regulations for the administration of County departments and special districts.

The five Board members are elected by voters from their district for four-year terms.

The regular meetings of the Board are held on the first, second, third and fifth Tuesdays of each month at 9:30 a.m. in the Board's Hearing Room (381B Kenneth Hahn Hall of Administration, 500 W. Temple St., Los Angeles). Each regular meeting of the Board held on the fourth Tuesday of each month shall be primarily for the purpose of conducting legally required public hearings on zoning matters, fee increases, special district proceedings, property transactions, etc. On Tuesdays following a Monday holiday, meetings begin at 1 p.m.

The executive officer of the Board is the administrative head of the department and is responsible for preparing the Board's agendas, communicating the actions taken by the Board, preparing the minutes of the meetings, and maintaining the Board's records.

Internet users may access the Board of Supervisors' agendas and accompanying Board letters for the current week's Board meeting beginning each Thursday morning preceding the meeting at the following: http://bos.co.la.ca.us/Categories/Agenda/AgendaHome.asp. The statements of proceedings, which indicate the final actions taken by the Board, are available five business days after the meeting at http://bos.co.la.ca.us/Categories/Sop/SOPHome.htm. The Board meeting transcripts are available for access each Wednesday evening at http://lacounty.info/BOS/SOP/TRANSCRIPTS/. Each Board meeting may be viewed live on the Internet at http://bos.co.la.ca.us/Categories/MtgsBoard/LiveBroadcast.htm.

Helpful Phone Numbers

General Information	(213) 974-1411
Listen to Board Meeting Live	(213) 974-4700
Recorded message of actions of the Board	(213) 974-7207
For copies of Board-related information:	
Agenda	(213) 974-1442
Statement of Proceedings	(213) 974-1424

MEDICAL ORDER 07-119[redacted]

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

PEOPLE OF THE STATE OF CALIFORNIA, PLAINTIFF

Vs

MAURICE OLIVIER, DEFENDANT

CASE NO. SA060812

BKG# 9121486

[redacted] DISTRICT

DEPARTMENT B

TO THE SHERIFF OF THE COUNTY OF LOS ANGELES, AND MEDICAL SERVICES, LOS ANGELES COUNTY JAIL:

WHEREAS, the above-named defendant has moved this court for an order requiring a medical examination or specific medical treatment.

NOW, THEREFORE, the above-named defendant appears to need the following:

☒ Medical Examination ☒ Dental Examination 1.19

Specify treatment: EXAMINATION FOR GLASSES AND CAVITY

☐ HIV Testing (pursuant to 1202.1, 1202.6 P.C., 199.96, 199.97, 199.99 H&S).

☐ AIDS Education Class to be completed on or before _____(date).

☒ The Court does wish to be advised of the results on or before _____(date).

☐ The Court does not wish to be advised of the results.

DEFENDANT ORDERED TO RETURN TO COURT: _____(date).

GOOD CAUSE APPEARING THEREFORE, IT IS ORDERED.

DATED: 1-12-07 JUDICIAL OFFICER: Robert P. O'Neill

Signature/Stamp

ROBERT P. O'NEILL

Court Address:

Department LX- B
Airport Branch Court
11701 S. LaCienega Blvd.
Los Angeles, CA 90045

FAX TRANSMITTAL DATE:_____ By: _____

FAX to Sheriff's Department, Medical Records: FAX# (213) 620-1308 or [illegible] *Place form in Court file after FAX transmittal.*

(Rev 11/02 S.C.)

COUNTY OF LOS ANGELES
OFFICE OF THE COUNTY COUNSEL
648 KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET
LOS ANGELES, CALIFORNIA 90012-2713

TELEPHONE
(213) 974-1913
FACSIMILE
(213) 687-8822
TDD
(213) 633-0901

RAYMOND G. FORTNER, JR.
County Counsel

May 14, 2008

Maurice Olivier #F83603
C.S.P. Bldg. B-5 Cell 107
P.O. Box 5002
Calpatria, California 92233

Re: Claim Filed: January 16, 2007
File Number: 07-1050420*001

Dear Claimant:

This letter is to inform you that the above-referenced claim which you filed with the Los Angeles County Board of Supervisors was rejected on **May 13, 2008.**

An investigation of this matter fails to indicate any liability on the part of the County of Los Angeles. Accordingly, your claim was rejected on that basis and no further action will be taken on this matter.

STATE LAW REQUIRES THAT YOU BE GIVEN THE FOLLOWING "WARNING":

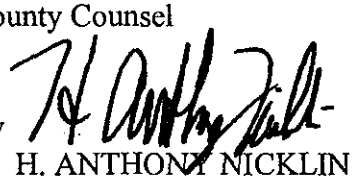
Subject to certain exceptions, you have only six (6) months from the date this notice was personally delivered or deposited in the mail to file a court action on this claim. SEE GOVERNMENT CODE SECTION 945.6.

This time limitation applies only to causes of action for which Government Code sections 900 - 915.4 required you to present a claim. Other causes of action, including those arising under federal law, may have different time limitations.

You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult an attorney, you should do so immediately.

Very truly yours,

RAYMOND G. FORTNER, JR.
County Counsel

By 
H. ANTHONY NICKLIN
Principal Deputy County Counsel
General Litigation Division

HAN:jm

DECLARATION FOR SERVICE BY MAIL

STATE OF CALIFORNIA
County of Los Angeles

I am and at all times herein mentioned been a citizen of the United States and resident of the County of Los Angeles, over the age of eighteen years and not a party to nor interested in the within action; that my business address is 648 Kenneth Hahn Hall of Administration, 500 West Temple Street, City of Los Angeles, County of Los Angeles, State of California.

That on the 14TH day of May 2008, I served the attached "Notice of Denial" of claim upon claimant by depositing a copy thereof, enclosed in a sealed envelope with postage thereon fully prepaid, in a United States mailbox in Los Angeles, California addressed as follows:

Maurice Olivier #F83603
C.S.P. Bldg. B-5 Cell 107
P.O. Box 5002
Calpatria, California 92233

and that the person on whom said service was made resides or has his/her office at a place where there is regular communication by mail between the place of mailing and the place so addressed.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on this 14TH day of May 2008 at Los Angeles, California.

Jennifer Inoon
Signature

COUNTY OF LOS ANGELES
OFFICE OF THE COUNTY COUNSEL
648 KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET
LOS ANGELES, CALIFORNIA 90012-2713

TELEPHONE
(213) 974-1841
FACSIMILE
(213) 617-7182
TDD
(213) 633-0901

RAYMOND G. FORTNER, JR.
County Counsel

June 12, 2008

Maurice P. Oliver F83603
CSP-BLDG B5 #107
P.O. Box 5002
Calipatria CA 92233

Re: Your Request for Documents Received May 23, 2008

Dear Mr. Oliver:

In reply to your undated request for documents which was received on May 23, 2008, enclosed please find the following:

1. A copy of your claim filed January 14, 2008, and multiple amendments thereto.

2. A copy of our letter to you dated May 14, 2008.

The other items requested by you are exempt from disclosure under Government Code section 6254, subd. (k), as they are protected by the attorney-client privilege and attorney work product doctrine.

Very truly yours,

RAYMOND G. FORTNER, JR.
County Counsel

By H. Anthony Nicklin by RBR
H. ANTHONY NICKLIN
Principal Deputy County Counsel
General Litigation Division

APPROVED AND RELEASED:

RAYMOND G. FORTNER, JR.
County Counsel

HAN/sb

Enclosures

HOA.529868.1

DECLARATION FOR SERVICE BY MAIL

STATE OF CALIFORNIA
County of Los Angeles

I am and at all times herein mentioned been a citizen of the United States and resident of the County of Los Angeles, over the age of eighteen years and not a party to nor interested in the within action; that my business address is 648 Kenneth Hahn Hall of Administration, 500 West Temple Street, City of Los Angeles, County of Los Angeles, State of California.

That on the 14TH day of May 2008, I served the attached "Notice of Denial" of claim upon claimant by depositing a copy thereof, enclosed in a sealed envelope with postage thereon fully prepaid, in a United States mailbox in Los Angeles, California addressed as follows:

Maurice Olivier #F83603
C.S.P. Bldg. B-5 Cell 107
P.O. Box 5002
Calpatria, California 92233

and that the person on whom said service was made resides or has his/her office at a place where there is regular communication by mail between the place of mailing and the place so addressed.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on this 14TH day of May 2008 at Los Angeles, California.

Jennifer Moon
Signature

CLAIM FOR DAMAGES TO PERSON OR PROPERTY

COUNTY OF LOS ANGELES

INSTRUCTIONS:
1. Read claim thoroughly.
2. Fill out claim as indicated; attach additional information if necessary.
3. Please return this original signed claim and any attachments supporting your claim. This form must be signed.

DELIVER OR U.S MAIL TO:
EXECUTIVE OFFICER, BOARD OF SUPERVISORS, ATTENTION: CLAIMS
500 WEST TEMPLE STREET, ROOM 383, KENNETH HAHN HALL OF ADMINISTRATION, LOS ANGELES, CA 90012

6 ... 11:36

07-1177

TIME STAMP OFFICE USE ONLY

1. ☒ Mr. ☐ Ms. ☐ Mrs. LAST NAME: OLIVER FIRST NAME: MAURICE
2. ADDRESS OF CLAIMANT/ ATTORNEY: 1649 SAN ORANGE ST. LOS ANGELES, CA 90012 (Street / City, State / Zip Code)
HOME TELEPHONE: ( ) BUSINESS TELEPHONE: ( ) (213) 974-1440
3. CLAIMANT'S BIRTHDATE: 02-21-60
4. CLAIMANT'S SOCIAL SECURITY NUMBER: 399-74-6316
5. DATE AND TIME OF INCIDENT: 07-12-06 16:45 THRU 07-17-06
6. WHERE DID DAMAGE OR INJURY OCCUR? L.A. MEN'S CENTRAL JAIL MEDICAL AREA (Street / City, State / Zip Code) 441 BAUCHET ST. LOS ANGELES, CA 90012
7. DESCRIBE IN DETAIL HOW DAMAGE OR INJURY OCCURRED:
ON 07-12-06 THRU 07-17-06 I WAS FORCED TO LIVE ON THE FLOOR IN THE JAIL MEDICAL AREA FOR SIX DAYS. THIS WILLFUL AND WANTON MISCONDUCT BY THE JAIL STAFF, RESULTED IN ME HAVING TO SLEEP ON THE FLOOR, WITH NO ACCESS TO SHOWERS (CONTINUED)
8. WERE POLICE OR PARAMEDICS CALLED? YES ☐ NO ☒
9. IF PHYSICIAN WAS VISITED DUE TO INJURY, INCLUDE DATE OF FIRST VISIT AND PHYSICIAN'S NAME, ADDRESS AND PHONE NUMBER:
DATE OF FIRST VISIT: 07-12-06 THRU 07-17-06 PHYSICIAN'S NAME: N/A
PHYSICIAN'S ADDRESS: L.A. MEN'S CENTRAL JAIL PHONE: ( )
10. WHY DO YOU CLAIM COUNTY IS RESPONSIBLE? I WAS HOUSED AND PLACED IN THE COUNTY WHICH IS OBLIGATED TO TREAT HUMANS, HUMANE, AND PROVIDE A BED.
11. NAMES OF ANY COUNTY EMPLOYEES (AND THEIR DEPARTMENTS) INVOLVED IN INJURY OR DAMAGE (IF APPLICABLE):
NAME: DEPT.: MEDICAL DEPT.
NAME: DEPT.:
12. WITNESSES TO DAMAGE OR INJURY: LIST ALL PERSONS AND ADDRESSES OF PERSONS KNOWN TO HAVE INFORMATION:
NAME: PHONE: ADDRESS:
NAME: PHONE: ADDRESS:
NAME: PHONE:
13. LIST DAMAGES INCURRED TO DATE (and attach copies of receipts or repair estimate):
TOTAL DAMAGES TO DATE: $
TOTAL ESTIMATED PROSPECTIVE DAMAGES: $

THIS CLAIM MUST BE *SIGNED*

NOTE: PRESENTATION OF A FALSE CLAIM IS A FELONY (PENAL CODE SECTION 72)

WARNING

- CLAIMS FOR DEATH, INJURY TO PERSON OR TO PERSONAL PROPERTY MUST BE FILED NOT LATER THAN 6 MONTHS AFTER THE OCCURENCE. (GOVERNMENT CODE SECTION 911.2)
- ALL OTHER CLAIMS FOR DAMAGES MUST BE FILED NOT LATER THAN ONE YEAR AFTER THE OCCURRENCE. (GOVERNMENT CODE SECTION 911.2)
- SUBJECT TO CERTAIN EXCEPTIONS, YOU HAVE ONLY SIX (6) MONTHS FROM THE DATE OF THE WRITTEN NOTICE OF REJECTION OF YOUR CLAIM TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)
- IF WRITTEN NOTICE OF REJECTION OF YOUR CLAIM IS NOT GIVEN, YOU HAVE TWO (2) YEARS FROM ACCRUAL OF THE CAUSE OF ACTION TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)

14. PRINT OR TYPE NAME: MAURICE FREEMAN OLIVER DATE: 01/11/07
15. SIGNATURE OF CLAIMANT OR PERSON FILING ON HIS/HER BEHALF GIVING RELATIONSHIP TO CLAIMANT:

REVISED 4/06

(CONTINUED)

DAILY HYGONE ITEMS, OR HOT MEALS. THIS NEGLECT 07-117
ACTION BY THE MEN'S CENTRAL JAIL STAFF RESULTED
IN PHYSICAL, AND MENTAL ILLNESS FOR SIX DAYS
UNTIL I WAS FINALLY TREATED. THIS ACTION IS A
RESULT OF GROSS NEGLIGENCE, AND MALICE INTENT,
WHEN THEY WERE AWARE THAT THESE HARMFUL CONDITIONS
EXISTED.

MAURICE P. OLIVICK
BK. NO. 912 1486
DORM 2500-A / BED. 20
L.A. CO. MEN'S CENTRAL JAIL
441 BAUCHET STREET
LOS ANGELES, CA 90012

07-119

COUNTY OF LOS ANGELES

CLAIM FOR DAMAGES TO PERSON OR PROPERTY

INSTRUCTIONS:
1. Read claim thoroughly.
2. Fill out claim as indicated; attach additional information if necessary.
3. Please return this original signed claim and any attachments supporting your claim. This form must be signed.

DELIVER OR U.S MAIL TO:
EXECUTIVE OFFICER, BOARD OF SUPERVISORS, ATTENTION: CLAIMS
500 WEST TEMPLE STREET, ROOM 383, KENNETH HAHN HALL OF ADMINISTRATION, LOS ANGELES, CA 90012

07-119 TIMESTAMP OFFICE USE ONLY

(213) 974-1440

1. ☒ Mr. ☐ Ms. ☐ Mrs. LAST NAME: Olivier FIRST NAME: MAURICE

2. ADDRESS OF CLAIMANT/ATTORNEY: L.A. County Men's Central Jail
Street: 441 Bauchet Str. City, State: LA, CA Zip Code: 90012

HOME TELEPHONE: ( ) N/A BUSINESS TELEPHONE: ( ) N/A

3. CLAIMANT'S BIRTHDATE: [redacted] 4. CLAIMANT'S SOCIAL SECURITY NUMBER: 549-44-2316

5. DATE AND TIME OF INCIDENT
09-18-06 8:00 A.M.
07-12-06 4:00 P.M.

6. WHERE DID DAMAGE OR INJURY OCCUR?
L.A. Co. Men's Central Jail
Street: 441 Bauchet Str. City, State: LA, CA Zip Code: 90012

7. DESCRIBE IN DETAIL HOW DAMAGE OR INJURY OCCURRED:
ON 09-18-06 I INFORMED DR. ENRIQUEZ THAT MY LEFT END TOOTH FILLING HAD FELL OUT, AND THAT MY GLASSES WERE DESTROYED. IN DECEMBER 2006, AND JANUARY 2007, I REPORTED THESE MEDICAL PROBLEMS TO THE 2000 FLOOR CLINIC TO A NURSE (CONT)

8. WERE POLICE OR PARAMEDICS CALLED? YES ☐ NO ☒

9. IF PHYSICIAN WAS VISITED DUE TO INJURY, INCLUDE DATE OF FIRST VISIT AND PHYSICIAN'S NAME, ADDRESS AND PHONE NUMBER:
DATE OF FIRST VISIT: 09-19-06 PHYSICIAN'S NAME: DR. ENRIQUEZ M.D.
PHYSICIAN'S ADDRESS: L.A. Men's Central Jail PHONE: ( ) NA

10. WHY DO YOU CLAIM COUNTY IS RESPONSIBLE?
AS A PRE-TRIAL DETAINEE I HAVE A RIGHT TO ADEQUATE EFFICIENT MEDICAL CARE.

11. NAMES OF ANY COUNTY EMPLOYEES (AND THEIR DEPARTMENTS) INVOLVED IN INJURY OR DAMAGE (IF APPLICABLE):
NAME: N/A DEPT.
NAME: DEPT.

12. WITNESSES TO DAMAGE OR INJURY: LIST ALL PERSONS AND ADDRESSES OF PERSONS KNOWN TO HAVE INFORMATION:
NAME: N/A PHONE
ADDRESS
NAME: PHONE
ADDRESS
NAME: PHONE

13. LIST DAMAGES INCURRED TO DATE (and attach copies of receipts or repair estimates):
DENTAL WORK $ 700.00
GLASSES $ 120.00

TOTAL DAMAGES TO DATE: $ 820.00
TOTAL ESTIMATED PROSPECTIVE DAMAGES: $ N/A

THIS CLAIM MUST BE *SIGNED*

NOTE: PRESENTATION OF A FALSE CLAIM IS A FELONY (PENAL CODE SECTION 72)

WARNING

- CLAIMS FOR DEATH, INJURY TO PERSON OR TO PERSONAL PROPERTY MUST BE FILED NOT LATER THAN 6 MONTHS AFTER THE OCCURRENCE. (GOVERNMENT CODE SECTION 911.2)
- ALL OTHER CLAIMS FOR DAMAGES MUST BE FILED NOT LATER THAN ONE YEAR AFTER THE OCCURRENCE. (GOVERNMENT CODE SECTION 911.2)
- SUBJECT TO CERTAIN EXCEPTIONS, YOU HAVE ONLY SIX (6) MONTHS FROM THE DATE OF THE WRITTEN NOTICE OF REJECTION OF YOUR CLAIM TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)
- IF WRITTEN NOTICE OF REJECTION OF YOUR CLAIM IS NOT GIVEN, YOU HAVE TWO (2) YEARS FROM ACCRUAL OF THE CAUSE OF ACTION TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)

14. PRINT OR TYPE NAME: Maurice P. Olivier DATE: 01-25-07

15. SIGNATURE OF CLAIMANT OR PERSON FILING ON HIS/HER BEHALF GIVING RELATIONSHIP TO CLAIMANT:

REVISED 4/06

07-119

CONT'D

BY THE LAST NAME OF LINPONE ON 01-12-07 I WAS FORCED TO INFORM THE JUDGE THAT MY PAIN, AND TOOTH WERE AT A BREAKING POINT, AS WELL AS THE HEADACHES FROM NOT HAVING GLASSES. BECAUSE A DEPUTY STEPED ON THEM ON 07-12-06, AND THEY WERE DESTROYED.

THE COURT ISSUED A MEDICAL ORDER ON 01-12-07 TO OBTAIN EMERGENCY SERVICES. ON 01-19-07 AT 04:30 P.M. I RECEIVED ORAL SURGERY TO REMOVE THE TOOTH DUE TO THE FACT IT DECAED RAPIDLY. THEN ON 01-23-07 I WAS EXAMINED BY A EYE DOCTOR, TO POSSIBLY RECEIVE SOME CHEAP GLASSES.

THE COST OF THE DENTAL TO CAP THE TOOTH THAT WAS REMOVED COST ME OVER $700.00 IN DENTAL WORK, AND MY GLASSES COST OVER $120.00. IN WHICH I EXPECT TO BE COMPENSATED FOR LOST, AS WELL AS THE PAIN, AND SUFFERING WAITING 4 MONTHS FOR EMERGENCY SERVICES.

CLAIM FOR DAMAGES TO PERSON OR PROPERTY

07-118

COUNTY OF LOS ANGELES

INSTRUCTIONS:
1. Read claim thoroughly.
2. Fill out claim as indicated; attach additional information if necessary.
3. Please return this original signed claim and any attachments supporting your claim. This form must be signed.

DELIVER OR U.S MAIL TO:
EXECUTIVE OFFICER, BOARD OF SUPERVISORS, ATTENTION: CLAIMS
500 WEST TEMPLE STREET, ROOM 383, KENNETH HAHN HALL OF ADMINISTRATION, LOS ANGELES, CA 90012

2007 JAN 16 AM 11:36

TIME STAMP OFFICE USE ONLY

07-118

(213) 974-1440

1. [X] Mr. [ ] Ms. [ ] Mrs. LAST NAME: Olivera FIRST NAME: Maurice

2. ADDRESS OF CLAIMANT/ ATTORNEY: 1649 So. Orange Drive
Street: Los Angeles City, State: CA Zip Code: 90019

HOME TELEPHONE: ( ) [redacted] BUSINESS TELEPHONE: ( ) [redacted]

3. CLAIMANT'S BIRTHDATE: February 24, 1960

4. CLAIMANT'S SOCIAL SECURITY NUMBER: 564-44-6816

5. DATE AND TIME OF INCIDENT: September 1, 2006 3:00 PM
Thru October 1, 2006

6. WHERE DID DAMAGE OR INJURY OCCUR? L.A. Co. Men's Central Jail 2500-A/B-20
Street: 441 Bauchet St City, State: LA, CA Zip Code: 90012

7. DESCRIBE IN DETAIL HOW DAMAGE OR INJURY OCCURRED:
I was placed in the Disciplinary Module C.A.K.A. The Hole after being given Pro-per status by the Court on 09-01-06. Inside the Disciplinary Module Dorm 2500-A Bed-20. There were numerous Torturous, Degrading, [illegible] Abuse.

8. WERE POLICE OR PARAMEDICS CALLED? YES [ ] NO [X]

9. IF PHYSICIAN WAS VISITED DUE TO INJURY, INCLUDE DATE OF FIRST VISIT AND PHYSICIAN'S NAME, ADDRESS AND PHONE NUMBER:
DATE OF FIRST VISIT: 09-11-06 PHYSICIAN'S NAME: Patient Doe #-Unknown
PHYSICIAN'S ADDRESS: L.A. Men's Central Jail PHONE: ( )

10. WHY DO YOU CLAIM COUNTY IS RESPONSIBLE?
As a Pre-Trial Detainee I have a Right under Due Process to a Clean, and Sanitary Living Space.

11. NAMES OF ANY COUNTY EMPLOYEES (AND THEIR DEPARTMENTS) INVOLVED IN INJURY OR DAMAGE (IF APPLICABLE):
NAME: N/A DEPT:
NAME: DEPT:

12. WITNESSES TO DAMAGE OR INJURY: LIST ALL PERSONS AND ADDRESSES OF PERSONS KNOWN TO HAVE INFORMATION:
NAME: N/A PHONE:
ADDRESS:
NAME: PHONE:
ADDRESS:
NAME: PHONE:

13. LIST DAMAGES INCURRED TO DATE (and attach copies of receipts or repair estimate):
N/A

TOTAL DAMAGES TO DATE: $

TOTAL ESTIMATED PROSPECTIVE DAMAGES: $

THIS CLAIM MUST BE *SIGNED*

NOTE: PRESENTATION OF A FALSE CLAIM IS A FELONY (PENAL CODE SECTION 72)

WARNING

- CLAIMS FOR DEATH, INJURY TO PERSON OR TO PERSONAL PROPERTY MUST BE FILED NOT LATER THAN 6 MONTHS AFTER THE OCCURENCE. (GOVERNMENT CODE SECTION 911.2)
- ALL OTHER CLAIMS FOR DAMAGES MUST BE FILED NOT LATER THAN ONE YEAR AFTER THE OCCURRENCE. (GOVERNMENT CODE SECTION 911.2)
- SUBJECT TO CERTAIN EXCEPTIONS, YOU HAVE ONLY SIX (6) MONTHS FROM THE DATE OF THE WRITTEN NOTICE OF REJECTION OF YOUR CLAIM TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)
- IF WRITTEN NOTICE OF REJECTION OF YOUR CLAIM IS NOT GIVEN, YOU HAVE TWO (2) YEARS FROM ACCRUAL OF THE CAUSE OF ACTION TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)

14. PRINT OR TYPE NAME: Maurice P. Olivera DATE: 1-11-07

15. SIGNATURE OF CLAIMANT OR PERSON FILING ON HIS/HER BEHALF GIVING RELATIONSHIP TO CLAIMANT: [signature]

REVISED 4/06

#3

[NXT. PG.]

07-118

AND INHUMAN CONDITIONS, SUCH AS ROACH, AND RED ANT INFESTATION, TOILET KNAT, AND LICE INFESTATION, TOILET INFECTIOUS BACTERIA BUILD-UP INSIDE THE RIM OF THE TOILET. RATS, AND MICE ROAMING INSIDE THE CELLS, AND HALLS, ASBESTOS, AND LEAD PAINT PEELING AROUND THE VENTS, AND FLOOR. THE RED ANTS WERE CRAWLING ALL OVER MY BED, AND CELL BARS, THEY WERE GETTING INSIDE MY EAR, HAIR, AND UNDERWEAR. ON 09-09-06 THE MEDICAL STAFF GAVE ME NYSTATEN AND TRIAMCINOLONE ACETONIDE CREAM, FOR THE ANT BITES, AND RASHES ON THE INSIDE OF MY THIGHS, AND SELENIUM SULFIDE LOTION FOR THE LICE INFESTATION INSIDE MY HAIR. THE M.D. A MR. ENRIQUEZ GAVE THE NURSE A FORM FOR HER TO INSPECT MY CELL, BUT THE DEPUTY WOULD NOT LET HER.

CLAIM FOR DAMAGES TO PERSON OR PROPERTY

COUNTY OF LOS ANGELES

INSTRUCTIONS:
1. Read claim thoroughly.
2. Fill out claim as indicated; attach additional information if necessary.
3. Please return this original signed claim and any attachments supporting your claim. This form must be signed.

DELIVER OR U.S MAIL TO:
EXECUTIVE OFFICER, BOARD OF SUPERVISORS, ATTENTION: CLAIMS
500 WEST TEMPLE STREET, ROOM 383, KENNETH HAHN HALL OF ADMINISTRATION, LOS ANGELES, CA 90012

(213) 974-1440

07-119

TIME STAMP OFFICE USE ONLY

1. ☒ Mr. ☐ Ms. ☐ Mrs. LAST NAME: Olivier FIRST NAME: Maurice

2. ADDRESS OF CLAIMANT/ ATTORNEY
L.A. County Men's Central Jail
Street: 441 Bauchet St. City/State: LA, CA Zip Code: 90012

HOME TELEPHONE: ( ) BUSINESS TELEPHONE: ( )

3. CLAIMANT'S BIRTHDATE: February 24, 1960

4. CLAIMANT'S SOCIAL SECURITY NUMBER: 399-74-6317

5. DATE AND TIME OF INCIDENT
09-18-06 08:00 A.M.

6. WHERE DID DAMAGE OR INJURY OCCUR?
L.A. Co. Men's Central Jail - Medical
Street: 441 Bauchet St City, State: LA, CA Zip Code: 90013

7. DESCRIBE IN DETAIL HOW DAMAGE OR INJURY OCCURRED:
I have health problems of high blood pressure, diabetes, and acid reflux. I was seen by a doctor Polizarpio F. Enriquez on 09-18-06. The doctor prescribed me metformin HCl, Aspirin Prevacid, and Nifedipine. (see note)

8. WERE POLICE OR PARAMEDICS CALLED?
YES ☐ NO ☒

9. IF PHYSICIAN WAS VISITED DUE TO INJURY, INCLUDE DATE OF FIRST VISIT AND PHYSICIAN'S NAME, ADDRESS AND PHONE NUMBER
DATE OF FIRST VISIT: 09-18-06 PHYSICIAN'S NAME: Polizarpio F. Enriquez M.D.
PHYSICIAN'S ADDRESS: L.A. Men's Central Jail PHONE: ( )

10. WHY DO YOU CLAIM COUNTY IS RESPONSIBLE?
As a pre-trial detainee I have a right under the due process clause of adequate medical care services while confined.

11. NAMES OF ANY COUNTY EMPLOYEES (AND THEIR DEPARTMENTS) INVOLVED IN INJURY OR DAMAGE IF APPLICABLE):
NAME: N/A DEPT:
NAME: DEPT:

12. WITNESSES TO DAMAGE OR INJURY: LIST ALL PERSONS AND ADDRESSES OF PERSONS KNOWN TO HAVE INFORMATION:
NAME: N/A PHONE:
ADDRESS:
NAME: PHONE:
ADDRESS:
NAME: PHONE:

13. LIST DAMAGES INCURRED TO DATE (and attach copies of receipts or repair estimate)
N/A

TOTAL DAMAGES TO DATE: $
TOTAL ESTIMATED PROSPECTIVE DAMAGES: $

THIS CLAIM MUST BE SIGNED

NOTE: PRESENTATION OF A FALSE CLAIM IS A FELONY (PENAL CODE SECTION 72)

WARNING

- CLAIMS FOR DEATH, INJURY TO PERSON OR TO PERSONAL PROPERTY MUST BE FILED NOT LATER THAN 6 MONTHS AFTER THE OCCURENCE. (GOVERNMENT CODE SECTION 911.2)
- ALL OTHER CLAIMS FOR DAMAGES MUST BE FILED NOT LATER THAN ONE YEAR AFTER THE OCCURRENCE. (GOVERNMENT CODE SECTION 911.2)
- SUBJECT TO CERTAIN EXCEPTIONS, YOU HAVE ONLY SIX (6) MONTHS FROM THE DATE OF THE WRITTEN NOTICE OF REJECTION OF YOUR CLAIM TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)
- IF WRITTEN NOTICE OF REJECTION OF YOUR CLAIM IS NOT GIVEN, YOU HAVE TWO (2) YEARS FROM ACCRUAL OF THE CAUSE OF ACTION TO FILE A COURT ACTION. (GOVERNMENT CODE SECTION 945.6)

14. PRINT OR TYPE NAME: Maurice P. Olivier DATE: 01/11/09

15. SIGNATURE OF CLAIMANT OR PERSON FILING ON HIS/HER BEHALF GIVING RELATIONSHIP TO CLAIMANT:

REVISED 4/06

07-119

(NXT. PAGE)

HE PLACED ME ON THE LOS ANGELES COUNTY SHERIFF'S DEPARTMENT SELF-MEDICATION PROGRAM ON THAT DATE. HOWEVER, I DID NOT RECEIVE ANY MEDICATION FOR MY HEALTH PROBLEMS VIA SELF MEDS UNTIL 10-30-06. THIS ACTION CONSTITUTES GROSS NEGLIGENCE ON THE PART OF THE ADMINISTRATION OF THIS PROGRAM. FURTHERMORE, THIS LAPSE IN TIME OF OVER A MONTH, CAUSED ME SEVERE PAIN, AND SUFFERING.

EXHIBIT COVER PAGE

B

EXHIBIT

Description of this Exhibit:

ACLU/SC ORIENTATION GUIDE FOR INMATES IN THE LOS ANGELES COUNTY JAILS:

Number of pages to this Exhibit: 4 pages.

JURISDICTION: (Check only one)

- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme Court
- ■ United States District Court
- ☐ State Circuit Court
- ☐ United States Supreme Court
- ☐ Grand Jury

KNOW YOUR RIGHTS

ACLU/SC ORIENTATION GUIDE FOR INMATES IN THE LOS ANGELES COUNTY JAILS:

→ RIGHTS AND RESOURCES

Inmates in any Los Angeles County Jail Facility have certain rights under state regulations and sheriff's dept policy concerning the following matters:

1. MEDICAL SERVICES

■ **SICK CALL:** Inmates have the right to have sick call available 5 days a week, and pill call available 7 days a week.

■ **EMERGENCIES:** Emergency medical and dental services are available 24 hours a day. Inmates who request emergency attention must have a face to face meeting with medical personnel as soon as possible.

Inmates who request a dental exam should receive treatment within 3 weeks. Inmates may be prescribed dentures if necessary.

■ **PREGNANCY AND CHILD CARE SERVICES:** Female inmates are entitled to abortions. Inmates have the right to have childbirths take place outside of the jail. Expecting mothers have the right to have access to adoption and foster care services, but will not be forced to use the services. Nursing mothers may be admitted to the nursery program.

■ **MENTAL HEALTH:** Mental health services should include but are not limited to (1) screening for mental illness, (2) crisis intervention and management of acute psychiatric episodes, (3) stabilization and treatment of mental disorders, and (4) medication support services.

■ **INDIGENT KITS:** Inmates who cannot afford hygiene kits can get one for free. These free kits, which are called "Indigent Kits," include a toothbrush, toothpaste, soap, a comb and shaving implement. If at some point an indigent inmate receives money in his/her account the inmate will be charged later for any indigent kit he/she received earlier.

2. MEALS

Inmates have the right to receive three meals in any 24 hour period. At least one of these meals must include hot food. Inmates have the right to a minimum of 15 minutes for the actual consumption of each meal.

3. TELEPHONES

Inmates have the right to reasonable access to telephones.

4. VISITING

All inmates may get visits from family and friends, which total at least one hour each week per inmate. There is no limit to the number of attorney visits, but they must happen during the jail's attorney room hours. Attorney visits should be held in a designated attorney room.

5. MAIL

There is no limit on the amount of mail that an inmate may send or receive.

Inmate mail may be read only when there is a valid security reason and the facility manager approves.

Inmates may retain ten letters and five photos at any given time.

Inmates may correspond, confidentially, with state and federal courts, any member of the State Bar or holder of public office, and the State Board of Corrections. Jail authorities may open and inspect such mail only to search for contraband, cash, checks, or money orders and in the presence of the inmate.

Inmates may correspond, confidentially, with the facility manager or the facility administrator.

■ **LEGAL MAIL:** Outgoing legal mail should be given to the module prowler and inspected in the presence of the inmate to ensure that it does not contain contraband. Incoming legal mail should be delivered unopened and then opened in the presence of the inmate.

■ **INDIGENT MAIL:** Those inmates who are without funds have the right to at least two postage paid letters each week for correspondence with family members and friends and an unlimited number of postage letters to his or her attorney and to the courts.

■ **CONTRABAND:** Inmates may not send or receive any contraband material, such as sharp objects, money, or illegal substances.

6. SHOWERS

Inmates have the right to shower/bathe upon assignment to a housing unit and at least every other day or more often if possible. *Enhanced Schedule due to staph infections: Inmates should be allowed to shower every day.*

7. CLOTHING EXCHANGE

Inmates have the right to have outer garments (except footwear) exchanged once each week and to have undergarments and socks exchanged twice each week. Inmates have the right to have blankets exchanged once each month. *Enhanced Schedule due to staph infections: Inmates have the right to receive a clothing exchange twice each week. Each exchange should include two sets of undergarments and one set of outergarments.*

8. BOOKS, NEWSPAPERS AND PERIODICALS

Inmates may subscribe to, and receive through the mail magazines, books, newspapers, and periodicals acceptable for distribution by the U.S. Postal Office and deemed appropriate by the Unit Commander. The publication must be mailed from the publisher or originate from an approved vendor or distributor.

- ➜ Inmates may have a maximum of three books In their possession at any time.
- ➜ Inmates may have a maximum of one newspaper In their possession at any time.
- ➜ Inmates may have a maximum of two periodicals In their possession at any time.

9. RECREATION

Inmates have the right to a minimum of three hours of exercise a week outside of their cell.

10. SEARCHES

A sergeant should be present during housing area searches. Any complaints regarding a search should be directed to the supervising sergeant.

11. INMATE COMPLAINTS

Inmates should have unrestricted access to complaint forms. Inmates have the right to be advised of their complaint disposition by the staff assigned to conduct the inquiry, or by higher authority. Complaints should be resolved within 10 days of receipt unless justifiable reasons exist to delay the final disposition. Such reasons should be documented on the complaint. Inmates must be given a written reason for any denial of a complaint.

12. DISCIPLINE

- ➜ A Discipline Review Board ("Sergeant's Court") hearing shall be conducted within 72 hours of the incident. If more than 72 hours have elapsed, no discipline can be imposed and a hearing is not necessary.
- ➜ Inmates held in discipline longer than 30 days must receive a consultation by health care staff after 30 days, and every 15 days thereafter.
- ➜ The disciplinary diet should not be maintained, in any case, for more than 72 consecutive hours without written approval of the Unit Commander.
- ➜ Minor disciplinary action may include, but is not limited to: extra work detail, removal from work assignment, temporary loss of privileges (telephones, television, visiting commissary), and lockdown for up to 24 hours.
- ➜ Inmates should never be denied food, showers, correspondence privileges (unless discipline resulted from a violation of policy related to correspondence privileges), or access to their attorney, for disciplinary action or otherwise.

13. VOTING

An inmate who is registered to vote may vote by mail with an absentee ballot. To vote, inmates should submit a request form to Inmate Services for a voter registration card and an absentee ballot form. Inmates are still eligible to vote if:

- ➜ They have been convicted of a misdemeanor.
- ➜ They are awaiting trial for any crime and not yet convicted.
- ➜ They have previously been convicted of a felony and have completed their sentence and parole.

RESOURCES

Provides help with contacting family/community organizations. Fill out an inmate request form and check the box for Friends Outside or contact them directly at:

464 E. Walnut Street
Pasadena, CA 91101
(626) 795-7607

If you have a complaint about physical conditions, medical services, or mental health services, please contact the ACLU Jails Project at:

1616 Beverly Blvd.
Los Angeles, CA 90026
(213) 977-9543

Every Inmate has the right to request religious services. Chaplain services are made available by filling out an inmate request form. Chaplains may assist inmates in obtaining writing materials and assist in arranging for inmates' religious leaders to visit them in the visiting area. These services are available to all and any religion.

Provides assistance with housing/shelter, alcohol/drug rehabilitation or employment/job development contact C.T.U. fill out a request form or call (800) CTU-9909 upon release.

May be contacted for legal assistance at:

261 S. Figueroa St.,
Suite 300
Los Angeles, CA 90012
(213) 243-1525

For assistance with mental health questions or complaints, please contact:

Patients' Rights Office/Department of Mental Health
550 S. Vermont Ave
Los Angeles, CA 90020
(800) 700-9966

YOUR MAILING ADDRESS AT ANY L.A. COUNTY CUSTODY FACILITY:

Name
Booking Number (7 Digits)
P.O. Box 86164
Terminal Annex
Los Angeles, CA 90086-0164

JAILS PROJECT

ACLU/SC
1616 BEVERLY BLVD.
LOS ANGELES, CA 90026
PHONE (213) 977-9543

ACLU LIBERTY AND JUSTICE FOR ALL
ACLU FOUNDATION OF SOUTHERN CALIFORNIA

ORIGINAL

VERIFICATION

STATE OF CALIFORNIA
COUNTY OF IMPERIAL

(C.C.P. SEC. 446 & 2015.5: 28 U.S.C. 1746)

I, Maurice P. Oliver DECLARE UNDER PENALY OF PERJURY THAT: I AM THE Person IN THE ABOVE ENTITLED ACTION. I HAVE READ THE FOREGOING DOCUMENTS AND KNOW THE CONTENTS THEREOF AND THE SAME IS TRUE OF MY OWN KNOWLEDGE EXCEPT AS TO MATTERS STATED THEREIN UPON INFORMATION, AND BELIEF, AND AS TO THOSE MATTERS, I BELIEVE THEM TO BE TRUE.

EXECUTED THIS AUG 10 2009 DAY OF _____ 2009 AT CALIPATRIA STATE PRISON, CALIPATRIA CALIFORNIA 92233-5002

(SIGNATURE) _____
DECLARANT/PRISONER

PROOF OF SERVICE BY MAIL

(C.C.P. SEC. 1013 (a) & 2015.5 28 U.S.C. 1746)

I, Alan R. Downer AM A RESIDENT OF CALIPATRIA STATE PRISON, IN THE COUNTY OF IMPERIAL, STATE OF CALIFORNIA, I AM OVER THE AGE OF EIGHTEEN (18) YEARS OF AGE AND AM / AM NOT A PARTY OF THE ABOVE ENTITLED ACTION. MY STATE PRISON ADDRESS IS P.O. BOX 5002, CALIPATRIA STATE PRISON, CALIPATRIA, CALIFORNIA 92233-5002.

ON AUG [illegible] 2009 IS SERVED THE FOREGOING: First Amended Complaint
Exhibit Cover Pages
A & B

SET FORTH EXACT TITLE OF DOCUMENTS SERVED

ON THE PARTY(S) HEREIN BY PLACING A TRUE COPY(S) THEREOF, ENCLOSED IN A SEALED ENVELOPE(S) WITH POSTAGE THEREON FULLY PAID, IN THE UNITED STATES MAIL, IN A DEPOSIT BOX SO PROVIDED AT CALIPATRIA STATE PRISON, CALIPATRIA, CALIFORNIA 92233-5002.

United States District Court
Central District of California
Clerk for the Honorable Rosenberg
United States Court House
312 North Spring Street
Los Angeles, CA 90012

THERE IS DELIVERY SERVICE BY UNITED STATES MAIL AT THE PLACE SO ADDRESSED, AND THERE IS REGULAR COMMUNICATION BY MAIL BETWEEN THE PLACE OF MAILING AND THE PLACE SO ADDRESSED. I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

DATE AUG [illegible], 2009

_____
(DECLARANT / PRISONER)

A. R. D.