

TEXAS DEPARTMENT OF CRIMINAL JUSTICE  
Use of Force Report

Witness Statement

Unit (Name and Alpha Code): O.B Ellis Unit E1

Report Number: M-08808-11-18 Incident Number (if applicable): N/A

I. INSTRUCTIONS

- Complete Section II.a, then at Section II.b, in as much detail as possible, describe what you witnessed before, during, and after the use of force occurred, including:
  - Time or approximate time of use of force;
  - Name and rank or title of each employee involved; and
  - Name of each offender involved;
  - Description of employee and offender injuries, if any.

II. STATEMENT

a. Date/time force was used: 11-23-2018 0310 Location where use of force occurred: Commissary Hallway

b. Written Statement:  
On 11-23-2018 at about 0310 I, Zachary Williford CO 5 was in the process of egressing Medium Custody Offenders from the Chew Hall. During that time Officer Brandon Pollock CO 3, exited the Chew Hall to counsel an offender. As soon as Officer Pollock exited the Chew Hall Offender Jason Walker TDCJ # 1530092 was right behind him. Officer Pollock then proceeded to chase the Chew Hall door and accidentally bumped Offender Walker with the door. At that time Offender Walker started hollering and raising his hands in an aggressive manner. It appeared as if the Offender Walker was going to strike Officer Pollock. In an attempt to defend himself Officer Pollock placed his arms around the Offenders upper torso. Officer Brian Rives CO 3 was also in the hallway assisting with egressing the Chew Hall. Officer Rives also placed his arms around Offender Walkers upper torso. I then began to clear the hallway of offenders and secure the area. Officer Pollock and Officer Rives was attempting to place the offender on the floor but ended up at the Commissary window. At that time Sergeant Jeremiah Walker arrived and placed both hands on the back of the offenders collar and applied downward pressure to place and secure Offender Walker on the floor. At that time Officer Nnamdi Mokuwe CO 3, arrived and assisted in placing Offender Walker on the floor by placing his arms around the Offenders upper torso.

*BC*  
 Continuation page(s) attached

III. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted is complete and accurate.

Zachary Williford

Printed Name

*Zachary Williford*

Signature

CO 5

Rank or Title or TDCJ # and Custody

11-23-2018

Date



**TEXAS DEPARTMENT OF CRIMINAL JUSTICE**  
**Use of Force Report**

**Continuation Page**

Unit (Name and Alpha Code): Ellis E1  
 Report Number: M-08808-11-18 Incident Number (if applicable):

**I. INFORMATION PROVIDED BY**

Zachary Williford CO 5  
 Printed Employee or Offender Name Rank or Title or TDCJ No.

**II. ADDITIONAL INFORMATION**

This is a continuation of information which I began to provide on the (Enter form number) UOF- 3

Officer Anthony Granville CO 3 exited the Chew Hall and was getting  
offenders to return to the Chew Hall and he secured the Chew Hall  
door. Officer Granville then secured the offenders firearms as the  
offender was on the floor. Officer Rebecca Church CO 3 then  
arrived and was able to place leg restraints on the offender.  
At no time did I see any officer @ offender Walker only quit  
resisting once he was placed in leg and hand restraints.  
Sergeant Sierra White arrived and began to do the narration.  
Officer Davary White CO 3 was the video camera operator.  
Officer Johnshaudrick Bozeman CO 4 and Officer Joe Pace CO 5  
arrived to relieve the participants. Officer Bozeman and Officer Pace  
escorted the offender to F wing. At no time did I witness  
any officer strike offender Walker. After offender was placed  
in F wing I resumed my normal duties.

Continuation page(s) attached

**III. ACKNOWLEDGMENT**

To the best of my knowledge, the information submitted is complete and accurate.

Zachary Williford  
 Signature

11-23-2018  
 Date

**IV. TRANSLATED BY (if applicable)**

To the best of my knowledge, the foregoing information is an accurate account of information provided by:

Offender: \_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 TDCJ No.

Employee Translator: \_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Rank or Title

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

Unit (Name and Alpha Code): Ellis E1

Report Number: M- 08808-11-18

Incident Number (if applicable):

e. Describe your actions. If more than one offender noted in Section II.d, identify against which offender your action was taken:

- Shoved or pushed offender: Walker Jason 1532092
- Used restraining holds on: \_\_\_\_\_
- Used restraining device(s) on: \_\_\_\_\_  
If so, what type & why? Type: \_\_\_\_\_ Reason: \_\_\_\_\_  
Date/time used: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Date/time of relief: Date: \_\_\_\_\_ Time: \_\_\_\_\_
- Struck offender with fist or open hand: Walker Jason 1532092  
If so, how many times? 5 What part of the body was struck? Face, Stomach
- Kicked offender: \_\_\_\_\_  
If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used riot baton on: \_\_\_\_\_  
If so, how many times was the offender struck? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used chemical agents on: \_\_\_\_\_  
If so, what type? \_\_\_\_\_ How much? \_\_\_\_\_
- Used deadly force against: \_\_\_\_\_  
If so, describe firearm and ammunition used; give manufacturer's serial number; how many rounds fired? \_\_\_\_\_
- Other (Explain): \_\_\_\_\_

f. Written Statement: On 11-23-18 at approx 250 I, officer Pollock COIII was assigned to maintain security in the large dining hall. There was an offender who was not complying with dining hall rules, and not sitting where instructed. I decided to wait and counsel the offender in the hallway due to the amount of other offenders in the dining hall. I did pull out my hand restraints in case they were needed, and I did open them fully one time to be prepared. When the offender got up to leave, I followed, and pulled the offender to the side once in the hallway I attempted to close the Chow hall door, at no time did I curse at the offender or instigate a confrontation. When closing the Chow hall door I did not realize offender Walker Jason 1532092 was following so closely behind me which resulted in him being struck by the door. The offender then became irate stopping in my face stating "bitch ass white boy I'm going to whup your ass." I ordered said offender to back up. Said offender then raised his hands with clenched fists. I immediately took hold of the offender by his shirt, still being struck in the left cheek I pulled the offender to the wall. Officer Brian Rivas COIII assisted me in holding him. The offender was still resisting and throwing punches. I then struck the offender in the face one time and the stomach four times. Once Sgt Jeremiah Walker arrived we were able to properly secure the offender and place him on the ground. Officer Rivas secured the offenders upper right arm, Sgt Walker secured the cuffs, officer Rebecca Church COIII arrived and secured the offenders left leg while I secured the right leg. Officer Nyambi Makoe COIII secured the offenders torso. Officer Anthony Granville COIII arrived and secured the offenders forearm. Officer Rivas arrived had restraints while officer Church arrived leg restraints. Said offender stopped resisting and was assisted to his feet and escorted to firing

Continuation page(s) attached

III. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted in this participant statement is complete and accurate.

Brandon Pollock

Printed Name

Brandon Pollock

Signature

COIII

Rank or Title and Social Security No.

11/23/2018

Date



Unit (Name and Alpha Code): Ellis E1  
Report Number: M- 08808-11-18

Incident Number (if applicable):

e Describe your actions. If more than one offender noted in Section II.d, identify against which offender your action was taken:

- Shoved or pushed offender: Walker Jason 1532092
- Used restraining holds on: \_\_\_\_\_
- Used restraining device(s) on: \_\_\_\_\_  
If so, what type & why? Type: \_\_\_\_\_ Reason: \_\_\_\_\_  
Date/time used: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Date/time of relief: Date: \_\_\_\_\_ Time: \_\_\_\_\_
- Struck offender with fist or open hand: Walker Jason 1532092  
If so, how many times? 5 What part of the body was struck? Face, Stomach
- Kicked offender; \_\_\_\_\_  
If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used riot baton on: \_\_\_\_\_  
If so, how many times was the offender struck? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used chemical agents on: \_\_\_\_\_  
If so, what type? \_\_\_\_\_ How much? \_\_\_\_\_
- Used deadly force against: \_\_\_\_\_  
If so, describe firearm and ammunition used; give manufacturer's serial number; how many rounds fired? \_\_\_\_\_
- Other (Explain): \_\_\_\_\_

f. Written Statement: On 11-23-18 at approx 250 I, officer Pollock COIII was assigned to maintain security in the large dining hall. There was an offender who was not complying with dining hall rules, and not sitting where instructed, I decided to wait and counsel the offender in the hallway due to the amount of other offenders in the dining hall. I did pull out my hand restraints in case they were needed, and I did open them fully one time to be prepared. When the offender got up to leave, I followed, and pulled the offender to the side once in the hallway I attempted to close the crowd hall door, however at no time did I curse at the offender or instigate a confrontation. When closing the crowd hall door I did not realize offender Walker Jason 1532092 was following so closely behind me which resulted in him being struck by the door. The offender then became irate, stepping in my face stating "bitch this white boy I'm going to whup your ass." I ordered said offender to back up, said offender then raised his hands with clenched fists. I immediately took hold of the offender by his shirt, still being struck in the left cheek I pulled the offender to the wall. Officer Brian Rivas COIII assisted me in holding him. The offender was still resisting and throwing punches. I then struck the offender in the face one time and the stomach four times. Once Sgt Jeremian Walker arrived we were able to properly secure the offender and place him on the ground. Officer Rivas secured the offender's right arm, Sgt Walker secured the offender's left arm, Officer Rebecca Church COIII arrived and secured the offender's left leg while I secured the right leg. Officer Nnamdi Makwe COIII secured the offender's torso. Officer Anthony Granville COIII arrived and secured the offender's legs. Officer Rivas applied hand restraints while officer Church applied leg restraints. Said offender stopped resisting and was assisted to his feet and escorted to firing

Continuation page(s) attached

III. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted in this participant statement is complete and accurate.

Brandon Pollock  
Printed Name  
Signature

COIII  
Rank or Title and Social Security No.  
11/23/2018  
Date





\*\*\*\*\*  
\*\*\* REQUESTOR: BBA5875 - BARNETT, B. J. OFFENDER GRIEVANCE \*\*\*  
\*\*\*\*\*  
\*\*\* SYS M O U T B A S K E T P R I N T \*\*\*

MESSAGE ID: 988419 DATE: 04/12/19 TIME: 04:35pm PRIORITY: 000  
SUBJECT: DISCIPLINARY CASE CORRECTION

TEXAS DEPARTMENT OF CRIMINAL JUSTICE  
REQUEST FOR DISCIPLINARY CASE CORRECTION

TO: B.LOSACK & G. LEE  
FROM: B. BARNETT  
DATE: 04 12 2019

PLEASE DELETE/MODIFY THE FOLLOWING DISCIPLINARY REPORT FROM THE RECORDS OF:

OFFENDER: WALKER, JASON TDCJ NO. 1532092  
DISCIPLINARY REPORT NO. 20190075590 UNIT: E1  
HEARING DATE: 11 30 2018 OFFENSE DATE: 11 23 2018  
HEARING AND PENALTY CATEGORY: MA GRIEVANCE NO: 2019049116  
OFFENSE(S): 3.3-ASSAULT OF AN OFFICER W/O A WEAPON

PUNISHMENT(S): 21 DAYS REC, & COMM REST, L2-L3, 364 DAYS GTL

RECOMMENDATION: (CHOOSE ONE OF THE FOLLOWING)

- X DELETE DISCIPLINARY REPORT AND PUNISHMENTS.
- X CASE MAY BE REHEARD AT UNIT'S OPTION. CASE MAY NOT BE REHEARD.

MODIFY DISCIPLINARY REPORT TO REFLECT THE FOLLOWING:  
OFFENSE(S)

PUNISHMENT(S)

CORRECTION REQUEST AUTHORIZED BY: V. BARROW, MANAGER I  
REASON FOR CORRECTION: DENIAL OF WITNESS WAS NOT DOCUMENTED NOR JUSTIFIED ON THE I47MA & PHOTOS WERE NOT LOCATED THAT WERE DOCUMENTED ON THE PRELIMINARY INVESTIGATION.

PLEASE INDICATE IF CORRECTION INVOLVES RESTORATION OF MONETARY DAMAGES.

Sent to: KST0942 STRONG, KELLY (to)  
DHU7540 HURLEY, DEBORAH (to)  
TLO0049 THOMPSON, LESLIE (to)  
HM00080 HILL, MICHAEL (to)  
PT00075 PICKETT, TERRY (to)  
TDA0767 JOHNSON, TOMEKA (to)



Unit (Name and Alpha Code): Ellis E1

Report Number: M- 08808-11-18

Incident Number (if applicable):

e. Describe your actions. If more than one offender noted in Section II.d, identify against which offender your action was taken:

- Shoved or pushed offender: \_\_\_\_\_
- Used restraining holds on: secured offenders forearms to allow hand
- Used restraining device(s) on: restraints to be applied  
 If so, what type & why? Type: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Date/time used: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Date/time of relief: Date: \_\_\_\_\_ Time: \_\_\_\_\_
- Struck offender with fist or open hand: \_\_\_\_\_  
 If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Kicked offender: \_\_\_\_\_  
 If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used riot baton on: \_\_\_\_\_  
 If so, how many times was the offender struck? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used chemical agents on: \_\_\_\_\_  
 If so, what type? \_\_\_\_\_ How much? \_\_\_\_\_
- Used deadly force against: \_\_\_\_\_  
 If so, describe firearm and ammunition used; give manufacturer's serial number; how many rounds fired? \_\_\_\_\_
- Other (Explain): \_\_\_\_\_

f. Written Statement: On the date of November 23, 2018 at approximately 2:30am I, officer Anthony Granville 0011 was crossing chow when officer Brandon Pollock was attempting to talk to another offender which at this time was in the hallway. Pollock 0011 closed the chow hall door and offender Walker, Jason Number 1532092 stuck his head out of the chow door trying to see what was going on. The chow door struck offender Walker. Offender Walker stepped into the hallway yelling at correctional officer Pollock and stated "Bitch ass white boy hit me with the door I'll beat your bitch ass up" and shortly after the offender raised his fists and officer Pollock took a hold of that said offenders shirt. I, correctional officer Anthony Granville 0011 was ordering the 24 offenders to step back in the chow hall and clear the chow door so I could secure the chow door. I, then secured the chow door. The use of force was in progress I assisted by securing the offenders forearms. Correctional officer III Brian Rivas applied the hand restraints. Correctional officer III Rebecca Church applied the leg restraints and the offender stop resisting. Sergeant Dicens White instructed staff to turn offender walker to his side, and assisted him to his

Continuation page(s) attached

III. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted in this participant statement is complete and accurate.

Anthony Granville

Printed Name

Signature

CO3

Rank or Title and Social Security No.

11-23-2018

Date

Unit (Name and Alpha Code): Ellis E1

Report Number: M- 08808-11-18

Incident Number (if applicable):

e. Describe your actions. If more than one offender noted in Section II.d, identify against which offender your action was taken:

- Shoved or pushed offender: \_\_\_\_\_
- Used restraining holds on: secured offenders forearms to allow hand
- Used restraining device(s) on: restraints to be applied  
 If so, what type & why? Type: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Date/time used: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Date/time of relief: Date: \_\_\_\_\_ Time: \_\_\_\_\_
- Struck offender with fist or open hand: \_\_\_\_\_  
 If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Kicked offender: \_\_\_\_\_  
 If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used riot baton on: \_\_\_\_\_  
 If so, how many times was the offender struck? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used chemical agents on: \_\_\_\_\_  
 If so, what type? \_\_\_\_\_ How much? \_\_\_\_\_
- Used deadly force against: \_\_\_\_\_  
 If so, describe firearm and ammunition used; give manufacturer's serial number; how many rounds fired? \_\_\_\_\_
- Other (Explain): \_\_\_\_\_

f. Written Statement: On the date of November 23, 2018 at approximately 03:00am I, officer Anthony Granville 0111, was crossing chow when officer Brandon Pollock was attempting to talk to another offender which at this time was in the hallway. Pollock 0111 closed the chow Hall door and offender Walker, Inmate Number 1532092 stuck his head out of the chow door trying to see what was going on. The chow door struck offender Walker. Offender Walker stepped into the hallway yelling at correctional officer Pollock and stated "Bitch ass white boy you hit me with the door I'll beat your bitch ass up" and shortly after the offender raised his fists and officer Pollock took a hold of that said offenders shirt. I, correctional officer Anthony Granville 0111 was ordering the 34 offenders to step back in the chow hall and clear the chow door so I could secure the chow door. I, then secured the chow door. The use of force was in progress I assisted by securing the offenders forearms. Correctional officer III Brian Rivas applied the hand restraints. Correctional officer III Rebecca Church applied the leg restraints and the offender stop resisting. Sergeant Diana White instructed staff to turn offender walker to his side, and assisted him to his

Continuation page(s) attached

III. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted in this participant statement is complete and accurate.

Anthony Granville

Printed Name

Signature

CO3

Rank or Title and Social Security No.

11-23-2018

Date



**TEXAS DEPARTMENT OF CRIMINAL JUSTICE**  
**Use of Force Report**  
**Employee and Offender Use of Force Injury Report**

*This is not part of the offender's or employee's medical record. This report is confidential and shall be used for administrative purposes only.*

Unit (Name and Alpha Code): M-08808-11-18 K  
 Report Number: M-08808-11-18 Incident Number (if applicable): \_\_\_\_\_

**I. EMPLOYEE OR OFFENDER PATIENT**

Employee (Printed Name): \_\_\_\_\_ Rank or Title: \_\_\_\_\_  
 Offender (Printed Name): Walker, Jason TDCJ No.: 1532097

**II. PHYSICAL SCREENING**

a. Did the employee or offender complain of injury?  YES  NO  
 If 'YES,' describe: Right pinky finger injury

b. Was the employee or offender screened at the unit?  YES  NO  
 If 'YES,' provide date/time: 11/23/18 0930  
 If 'NO,' explain: \_\_\_\_\_

c. Was an injury to the employee or offender present at the time of the screening?  YES  NO  
 If 'YES,' place a ✓ by each area of the body that was injured

<input type="checkbox"/> Abdomen/Stomach	<input type="checkbox"/> Buttocks	<input checked="" type="checkbox"/> Face	<input checked="" type="checkbox"/> Hand(s)	<input type="checkbox"/> Leg(s)	<input type="checkbox"/> Shoulder
<input type="checkbox"/> Ankle(s)	<input type="checkbox"/> Chest	<input type="checkbox"/> Foot/Feet	<input type="checkbox"/> Head	<input type="checkbox"/> Neck	<input type="checkbox"/> Wrist(s)
<input type="checkbox"/> Arm(s)	<input type="checkbox"/> Ear(s)	<input type="checkbox"/> Genital Area	<input type="checkbox"/> Hip(s)	<input type="checkbox"/> Pelvis	
<input type="checkbox"/> Back	<input type="checkbox"/> Eye(s)	<input type="checkbox"/> Groin	<input type="checkbox"/> Knee(s)		

d. Was the offender classified as 'medically or mentally impaired' prior to the use of force?  YES  NO

e. Licensed medical staff who performed screening (Printed Name/Title): Christy Ayala, LVN

f. I administered the screening (Signature/Date): Christy Ayala, LVN

**III. MEDICAL ACTIVITY FOR OFFENDERS WHO REFUSE PHYSICAL SCREENING OR ARE A THREAT TO STAFF**

a. Licensed medical staff unable to complete physical screening because:  
 Offender refused screening  
 Unable to screen because offender was a threat to staff

b. Was the offender ambulatory?  YES  NO

c. Was the offender complaining of pain or injury?  YES  NO  
 If 'YES,' give location on the body where offender indicates pain or injury is present \_\_\_\_\_

d. Was an injury to the offender visible at the time of the screening?  YES  NO  
 If 'YES,' place a ✓ by each area of the body that was injured

<input type="checkbox"/> Abdomen/Stomach	<input type="checkbox"/> Buttocks	<input type="checkbox"/> Face	<input type="checkbox"/> Hand(s)	<input type="checkbox"/> Leg(s)	<input type="checkbox"/> Shoulder
<input type="checkbox"/> Ankle(s)	<input type="checkbox"/> Chest	<input type="checkbox"/> Foot/Feet	<input type="checkbox"/> Head	<input type="checkbox"/> Neck	<input type="checkbox"/> Wrist(s)
<input type="checkbox"/> Arm(s)	<input type="checkbox"/> Ear(s)	<input type="checkbox"/> Genital Area	<input type="checkbox"/> Hip(s)	<input type="checkbox"/> Pelvis	
<input type="checkbox"/> Back	<input type="checkbox"/> Eye(s)	<input type="checkbox"/> Groin	<input type="checkbox"/> Knee(s)		

e. Was the offender classified as 'medically or mentally impaired' prior to the UOF?  YES  NO

f. Licensed medical staff who observed offender (Printed Name/Title): \_\_\_\_\_

g. I observed the offender and was unable to complete a full screening (Signature/Date): \_\_\_\_\_

Unit (Name and Alpha Code): BUJS 15  
 Report Number: M-08808-11-18 Incident Number (if applicable):  
 Patient's Name: Walker, Jason # 1532092

**IV. TREATMENT**

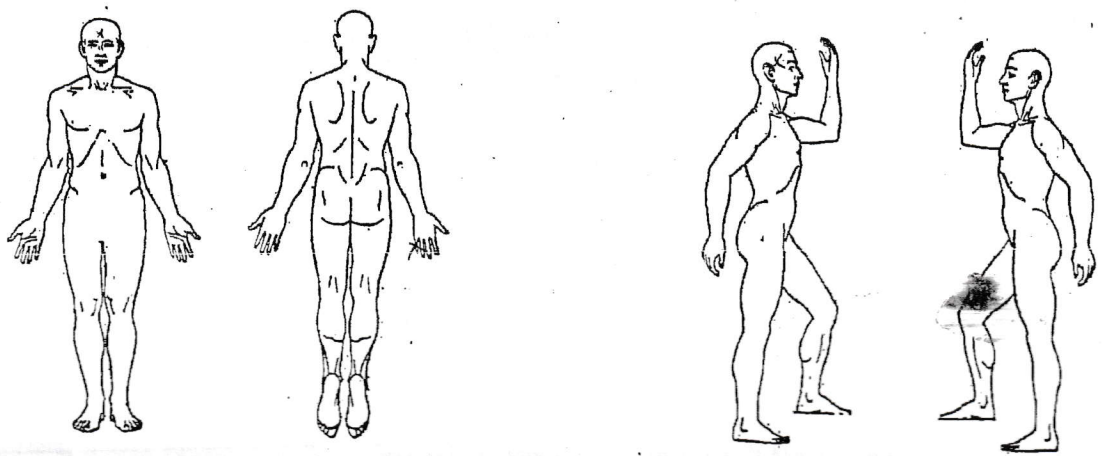
Complete this section ONLY if employee or offender was observed with injury:

- a. Was the employee or offender treated for injuries?  YES  NO  
 If 'NO,' explain why:  Refused  Other (explain):  
 If 'YES,' provide description of treatment: Non-aspirin given while in clinic due to  
complaint of pinky finger pain
- Offender's assigned living area  Hospital (Name): \_\_\_\_\_, which occurred at:  
 Unit Infirmary  Other (Specify): \_\_\_\_\_
- b. Licensed medical staff who administered, or attempted to administer, treatment (Printed Name/Title): Christy Avila, Lvn  
 c. I administered, or attempted to administer, the treatment (Signature/Date): [Signature] 11/23/18

**V. DIAGRAM(S) AND DESCRIPTION OF INJURY**

Instructions to Licensed Medical Staff:

- Indicate injuries present at the time of the screening by marking body diagrams and provide brief description below:
- Each injury should be noted only once on the appropriate figure.



Brief Description:  
Small < 1cm superficial abrasion to  
middle of forehead. Pinky finger on right  
hand had controlled bleeding, nail intact.  
Christy Avila, Lvn  
 (Printed Name/Title)

Brief Description:  
Small laceration noted on right  
temporal side of face  
[Signature] Lvn 11/23/18  
 (Signature/Date)

**VI. ACKNOWLEDGEMENTS**

- a. I was physically screened or treated by licensed medical staff (Employee Signature/Date):  
 Licensed medical staff conducting screening or providing treatment (Printed Name): Christy Avila, Lvn
- b. The answer to II.c on page 1 is 'YES,' and I have provided a photocopy of this UOF-5 to the unit risk management coordinator, as evidenced by our signatures:
- Unit Risk Management Coordinator (Printed Name/Signature/Date): [Signature] 11/23/18  
 Supervisor (Printed Name/Signature/Date): [Signature] 11/23/18



Unit (Name and Alpha Code): Ellis E1  
Report Number: M-088058-11-18 Incident Number (if applicable):

- e. Describe your actions. If more than one offender noted in Section II.d, identify against which offender your action was taken:
- Shoved or pushed offender.
  - Used restraining holds on: \_\_\_\_\_
  - Used restraining device(s) on: WALKER, JASON IDCS# 15320912  
If so, what type & why? Type: Leg restraints Reason: TO GAIN COMPLIANCE  
Date/time used: Date: 1/23/18 Time: 3:10AM Date/time of relief: Date: \_\_\_\_\_ Time: \_\_\_\_\_
  - Struck offender with fist or open hand: \_\_\_\_\_  
If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
  - Kicked offender: \_\_\_\_\_  
If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
  - Used riot baton on: \_\_\_\_\_  
If so, how many times was the offender struck? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
  - Used chemical agents on: \_\_\_\_\_  
If so, what type? \_\_\_\_\_ How much? \_\_\_\_\_
  - Used deadly force against: \_\_\_\_\_  
If so, describe firearm and ammunition used; give manufacturer's serial number; how many rounds fired? \_\_\_\_\_
  - Other (Explain): \_\_\_\_\_

f. Write a Statement

ON 1/23/18, ON APPROXIMATELY 03:10AM, I, REBECCA CHURCH CO III, RESPONDED TO A USE OF FORCE ALREADY IN PROGRESS IN FRONT OF THE COMMISSARY WINDOW BETWEEN OFFENDER WALKER, JASON IDCS# 15320912 AND OFFICER POLLOCK, BRANDAN CO III. SERGEANT WALKER, JEREMIAH AND OFFICER POLLOCK ASSISTED THE OFFENDER TO THE FLOOR, WHERE THE OFFENDER CONTINUED TO RESIST TO GAIN COMPLIANCE. OFFICER RIVAS, BELAN CO III, OFFICER INCLIDE, NIAWADI CO III AND OFFICER GRANVILLE, ANTHONY CO III ARRIVED ON SCENE. OFFICER RIVAS APPLIED HAND RESTRAINTS AND I APPLIED LEG RESTRAINTS. ONLY AFTER THE RESTRAINTS WERE BOTH APPLIED DID SAID OFFENDER CALM DOWN AND NO LONGER RESISTED ORDERS OR RESTRAINTS. AT NO TIME DID I STRIKE THE OFFENDER OR PUT MY KNEE ON HIS NECK, NOR DID I SEE ANY OFFICERS STRIKE OR PUT THEIR KNEE ON THE OFFENDER'S NECK. THEN THE OFFENDER WAS ASSISTED TO HIS FEET BY OFFICER RIVAS AND SGT WALKER AND THEN ESCORTED TO FILING BY OFFICER PAGE, JOE CO I AND OFFICER BOZEMAN, JOHNSAUNDRIK CO III. I THEN RESUMED MY NORMAL DUTIES. I RECEIVED A MEDICAL SCREENING ONCE MEDICAL ARRIVED ON THE UNIT. SERGEANT SIRENA WHITE DID NARRATE THE USE OF FORCE WHILE OFFICER DEVERLY MARTINEZ CO III DID OPERATE THE VIDEO CAMERA.

Continuation page(s) attached

the best of my knowledge, the information submitted in this participant statement is complete and accurate.

REBECCA CHURCH

Printed Name

Rebecca Church

Signature

CO III

Rank or Title and Social Security No.

1/23/18

Date

TEXAS DEPARTMENT OF CRIMINAL JUSTICE  
Use of Force Report

Employee Participant Statement

Unit (Name and Alpha Code): Ellis E1  
Report Number: M-08603-11-18 Incident Number (if applicable):

I. INSTRUCTIONS

- Complete Section II.a, through II.e, checking and completing all that apply in each section;
- At Section II.f, in as much detail as possible, describe what happened before, during, and after the use of force occurred, including:
  - Time or approximate time of use of force;
  - Name and rank or title of each employee involved; and
  - Name of each offender involved;
  - Description of employee and offender injuries, if any.

II. STATEMENT

a. Printed Name: REBECCA CHURCH Date/time force was used: 11/23/18 3:10 AM

b. Location where use of force occurred: Commissary hallway

c. PRIOR TO implementing force, did you do any of the following:

YES	NO		If 'NO,' explain why:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	* Listen to the offender?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	* Attempt to calm or reason with the offender?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	* Explain the consequences?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Notify the supervisor?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Request a video camera and operator?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Secure the area?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Request additional staff to make a visible show of force?	Time did not permit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Use restraining devices?	Time did not permit

\* If answer is 'YES' to any of these, describe in detail, at Section f, how this was accomplished.

d. In describing offender behavior, specify which offender(s) and whether it occurred before or during the use of force.

Before	During		Offender Name(s) / TDCJ Number(s):
<input type="checkbox"/>	<input type="checkbox"/>	Assaulted another offender with weapon	
<input type="checkbox"/>	<input type="checkbox"/>	Assaulted another offender without weapon, such as by kicking, shoving, pushing, slapping, hitting, or grabbing	
<input type="checkbox"/>	<input type="checkbox"/>	Assaulted staff or another person, not an offender, with weapon	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Assaulted staff or another person, not an offender, without weapon	WALKER, JASON 15320912
<input type="checkbox"/>	<input type="checkbox"/>	Attempted escape	
<input type="checkbox"/>	<input type="checkbox"/>	Attempted suicide or self-mutilation	
<input type="checkbox"/>	<input type="checkbox"/>	Attempted to assault staff or another person, not an offender, with weapon	
<input type="checkbox"/>	<input type="checkbox"/>	Attempted to assault staff or another person, not an offender, without weapon	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Created a disturbance or riot	WALKER, JASON 15320912
<input type="checkbox"/>	<input type="checkbox"/>	Damaged or destroyed state property	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Displayed abnormal behavior	WALKER, JASON 15320912
<input type="checkbox"/>	<input type="checkbox"/>	Obstructed tray slot or cell door	
<input type="checkbox"/>	<input type="checkbox"/>	Pulled away from staff	
<input type="checkbox"/>	<input type="checkbox"/>	Refused to accept a housing assignment	
<input type="checkbox"/>	<input type="checkbox"/>	Refused medically ordered treatment	
<input type="checkbox"/>	<input type="checkbox"/>	Refused photo I.D. or fingerprinting; during intake or update	
<input type="checkbox"/>	<input type="checkbox"/>	Refused strip search or restraint procedures	
<input type="checkbox"/>	<input type="checkbox"/>	Refused to leave or enter a housing area	
<input type="checkbox"/>	<input type="checkbox"/>	Refused to submit to forensic or DNA collection	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Swore at or verbally threatened staff	WALKER, JASON 15320912



Unit (Name and Alpha Code):

Ellis

E1

Report Number:

11-03808-11-18

Incident Number (if applicable):

e. Describe your actions. If more than one offender noted in Section II.d, identify against which offender your action was taken:

- Shoved or pushed offender: \_\_\_\_\_
- Used restraining holds on: \_\_\_\_\_
- Used restraining device(s) on: Walker, Jason #1532092  
 If so, what type & why? Type: hard Reason: To gain compliance  
 Date/time used: Date: 11-23-18 Time: 0310 Date/time of relief: Date: \_\_\_\_\_ Time: \_\_\_\_\_
- Struck offender with fist or open hand: \_\_\_\_\_  
 If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Kicked offender: \_\_\_\_\_  
 If so, how many times? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used riot baton on: \_\_\_\_\_  
 If so, how many times was the offender struck? \_\_\_\_\_ What part of the body was struck? \_\_\_\_\_
- Used chemical agents on: \_\_\_\_\_  
 If so, what type? \_\_\_\_\_ How much? \_\_\_\_\_
- Used deadly force against: \_\_\_\_\_  
 If so, describe firearm and ammunition used; give manufacturer's serial number; how many rounds fired? \_\_\_\_\_

Other (Explain): Utilized hard measure to place offender on wall then floor

f. Written Statement:

On 11-23-18 at approximately 0310 I officer Brian Byrns, COIT responded to a use of force in progress I heard Brandon Pellack COIT yell "Get back" I went to assist when I saw offender Walker, Jason #1532092 struck officer Pellack in the torso area. I took hold of offender Walker's back and guided the offender to the wall near the commissary window. Offender Walker continued to resist and pull away from staff. Sergeant Jeremiah Walker responded taking hold of the offenders jacket collar. Officer Pellack, Sgt Walker and myself placed offender Walker on the floor. I Officer Byrns took a hold of offender Walker's waist with my arm. Officer Anthony Gramville COIT took a hold of the offenders rear arm. I placed hand restraints on offender Walker. Officer Gramville assisted me by holding secure the offenders arms I doubled locked the hand restraints. Officer Pellack took a hold of offender Walker's legs and Officer Debraan Church COIT applied leg restraints. Sergeant Sierra White arrived and

ck  Continuation page(s) attached

III. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted in this participant statement is complete and accurate.

Brian Byrns  
 Printed Name  
Brian Byrns  
 Signature

COIT  
 Rank or Title and Social Security No.  
11-23-2018  
 Date

**TEXAS DEPARTMENT OF CRIMINAL JUSTICE  
Use of Force Report**

**Employee Participant Statement**

Unit (Name and Alpha Code): Ellis E1

Report Number: M- 08808-11-18 Incident Number (if applicable): \_\_\_\_\_

**I. INSTRUCTIONS**

- Complete Section II.a, through II.e, checking and completing all that apply in each section;
- At Section II.f, in as much detail as possible, describe what happened before, during, and after the use of force occurred, including:
  - Time or approximate time of use of force;
  - Name and rank or title of each employee involved; and
  - Name of each offender involved;
  - Description of employee and offender injuries, if any.

**II. STATEMENT**

a. Printed Name: Brian Rivas Date/time force was used: 11/23/2018 0310

b. Location where use of force occurred: Commissary Hallway

c. PRIOR TO implementing force, did you do any of the following:

YES	NO		If 'NO,' explain why:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	* Listen to the offender?	<u>Time did not allow</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	* Attempt to calm or reason with the offender?	<u>Time did not allow</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	* Explain the consequences?	<u>Time did not allow</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Notify the supervisor?	<u>Done by other staff</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Request a video camera and operator?	<u>Done by other staff</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Secure the area?	<u>Done by other staff</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Request additional staff to make a visible show of force?	<u>Done by other staff</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Use restraining devices?	<u>Time did not allow</u>

\* If answer is 'YES' to any of these, describe in detail, at Section f, how this was accomplished.

d. In describing offender behavior, specify which offender(s) and whether it occurred before or during the use of force.

Before	During		Offender Name(s) / TDCJ Number(s):
<input type="checkbox"/>	<input type="checkbox"/>	Assaulted another offender with weapon	_____
<input type="checkbox"/>	<input type="checkbox"/>	Assaulted another offender without weapon, such as by kicking, shoving, pushing, slapping, hitting, or grabbing	_____
<input type="checkbox"/>	<input type="checkbox"/>	Assaulted staff or another person, not an offender, with weapon	_____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Assaulted staff or another person, not an offender, without weapon	<u>Walker, Jason #1532092</u>
<input type="checkbox"/>	<input type="checkbox"/>	Attempted escape	_____
<input type="checkbox"/>	<input type="checkbox"/>	Attempted suicide or self-mutilation	_____
<input type="checkbox"/>	<input type="checkbox"/>	Attempted to assault staff or another person, not an offender, with weapon	_____
<input type="checkbox"/>	<input type="checkbox"/>	Attempted to assault staff or another person, not an offender, without weapon	_____
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Created a disturbance or riot	<u>Walker, Jason #1532092</u>
<input type="checkbox"/>	<input type="checkbox"/>	Damaged or destroyed state property	_____
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Displayed abnormal behavior	<u>Walker, Jason #1532092</u>
<input type="checkbox"/>	<input type="checkbox"/>	Obstructed tray slot or cell door	_____
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Pulled away from staff	<u>Walker, Jason #1532092</u>
<input type="checkbox"/>	<input type="checkbox"/>	Refused to accept a housing assignment	_____
<input type="checkbox"/>	<input type="checkbox"/>	Refused medically ordered treatment	_____
<input type="checkbox"/>	<input type="checkbox"/>	Refused photo I.D. or fingerprinting, during intake or update	_____
<input type="checkbox"/>	<input type="checkbox"/>	Refused strip search or restraint procedures	_____
<input type="checkbox"/>	<input type="checkbox"/>	Refused to leave or enter a housing area	_____
<input type="checkbox"/>	<input type="checkbox"/>	Refused to submit to forensic or DNA collection	_____
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Swore at or verbally threatened staff	<u>Walker, Jason #1532092</u>



Unit (Name and Alpha Code): Ellis

E1

Report Number: M-08808-11-18

Incident Number (if applicable):

#### IV. SUMMARY

**Instructions:** After reading all statements and reviewing videotape footage, explain what happened before, during, and after the use of force; describe efforts made to defuse situation; if there are no offender witnesses, explain why.

Employee Participants: Brandan Pollock CO3, Brian Rivas CO3, Sergeant Jeremiah Walker, Rebecca Church CO3, Nnamdi Mokwe CO3, Anthony Granville CO3, Joe Pace CO5, Johnshaundrick Bozeman CO4, Christopher Bradford CO4

Offender Participant: Walker, Jason Renard TDCJ#1532092

Employee Witnesses: Sergeant Sirena White, Lieutenant Sonya Nesby, Devery Martinez CO3, Zachary Williford CO5, Sylvester Glaze CO5,

Offender Witnesses: Lindsey, Curtis TDCJ#1754070, Simms, Alvin TDCJ#1533904, Lowery, Jeremy TDCJ#2185906

On November 23, 2018 at 3:10am a Use of Force occurred on the Ellis Unit. Witness statements and video documentation record this incident. Reason for force Assaulting Staff without a Weapon.

During the breakfast meal Brandan Pollock CO3 was assigned to the Large Offender Dining Hall. The first offenders to enter the dining hall were Medium Custody (G4). Ingress and egress of no more than 20 offender in the hallway at a time. While the Medium Custody offenders are being fed the breakfast meal no other offenders are in the hallway. Procedures for all offenders the dining hall include but are not limited to; security staff will have offenders fill in all seating, security staff will instruct offenders when to stand and discard their trays, security staff will instruct offenders when to exit the chow hall. Pollock CO3 instructed Lowery, Jeremy TDCJ#2185906 to fill in the seating and sit down. Offender Lowery hesitated then took his seat. Pollock CO3 decided to speak with the offender in the hallway. As a row of offenders were egressed from the dining hall, Pollock CO3 got Offender Lowery's attention. He exited the dining hall with Offender Lowery to counsel with him. Before Pollock CO3 spoke to Offender Lowery he attempted to secure the dining hall door. Pollock CO3 was unaware of Walker, Jason Renard TDCJ#1532092 in the doorway. Offender Walker stuck his head out of the door as Pollock CO3 attempted to secure the door. Offender Walker was struck by the dining hall door. Offender Walker came out of the dining hall yelling obscenities toward Pollock CO3 with clinched fist. Anthony Granville CO3 was also assigned to the dining hall for security. Granville heard the yelling, exited the chow hall to assist in securing the hallway. Granville CO3 made sure all offender were secured in the dining hall. Pollock CO3 ordered Offender Walker to "Get Back!" Offender Walker struck Pollock CO3 on the left side facial area with a closed fist. Pollock CO3 took hold of Offender Walker to keep him from striking him again. Incident Command System was not initiated due to spontaneous nature of the Use of Force. Due to the time frame there was little to no offender traffic in the hallway. Staff was in the hallway to control offender ingress and egress from the dining hall. Brian Rivas CO3 was in the hallway by the searchers desk assisting with the egress of offenders from the dining hall. He responded to assist Pollock CO3. Rivas CO3 took hold of Offender Walker from the back, upper torso. Pollock CO3 continued to hold the offender in the front, still fighting. Sergeant Jeremiah Walker was also in the hallway, and responded to the Use of Force in progress. Sgt. Walker took hold of Offender Walker's collar. Pollock CO3, Rivas CO3, and Sgt. Walker guided Offender Walker to the wall near the commissary window. Offender Walker continued to fight staff. Pollock CO3, Rivas CO3 and Sgt. Walker used downward pressure to guide Offender Walker to the floor. Granville CO3 responded while Offender Walker continued to fight staff on the floor. Granville CO3 secured the offenders forearms. Rivas CO3 was able to apply hand restraints as Granville CO3 assisted with securing the arms. Nnamdi Mokwe CO3 responded and helped secure the offenders upper torso. Rebecca Church CO3 responded with leg restraints. Pollock CO3 assisted in securing Offender Walker's legs. Church CO3 applied the leg restraints. Sergeant Sirena White and Devery Martinez CO3 responded to the Use of Force in progress. Sgt. White instructed Martinez to start video documentation. Sgt. White gives a brief narrative, introduces Devery Martinez CO3 as the video camera operator. Sgt. White walks to Offender Walker while he is still combative and asked, "Are you going to resist if we roll you to your side and assist you to your feet?" Offender Walker replied, "Yes Ma'am." Offender Walker was rolled to his side and assisted to his feet by Sgt. Walker, Rivas CO3 Mokwe CO3, Church CO3, Granville CO3, and Pollock CO3. Offender Walker did not resist. All officers stepped away except for Rivas CO3 on the right, and Sgt. Walker on the left. Johnshaundrick Bozeman CO4 relieved Rivas CO3, Joe Pace CO5 relieved Sgt. Walker. Offender Walker did not resist. Due to Offender Walker's combative behavior he was escorted to F wing 25 cell.

Continuation page(s) attached

#### V. ACKNOWLEDGEMENT

To the best of my knowledge, the information submitted is complete and accurate.

Sonya Nesby Lieutenant  
Supervisor (Printed Name/Rank or Title)

 11/23/2018  
Signature/Date



Unit: (Name and Alpha Code): Ellis

E1

Report Number: M-08808-11-18

Incident Number (if applicable):

IV. SUMMARY

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Offender Participant: Walker, Jason Renard TDCJ#1532092

Employee Witnesses: Sergeant Sirena White, Lieutenant Sonya Nesby, Devery Martinez CO3, Zachary Williford CO5,

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V. ACKNOWLEDGEMENT

Continuation page(s) attached

To the best of my knowledge, the information submitted is complete and accurate.

Sonya Nesby Lieutenant  
Supervisor (Printed Name/Rank or Title)

Signature/Date: [Signature] 11/23/2018