



# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: [REDACTED]	Date: 06/07/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Forrester, Dustin R.	ICOTS Offender Number: [REDACTED] Sending state #: 144888 Receiving state #: 8056802	ICOTS Case Number: [REDACTED] 6
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AKA:				
SS #: [REDACTED]	FBI #: (if available)	Sex: M	Race: White	DOB: 04/06/1988

### TYPE OF REPORT

Original Report     Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking     New Violent Crime Conviction  
 New Felony Conviction  
 Absconder (1)

### RETAKE OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

<b>ABSCONDER INFORMATION</b>		
Violation Discovery Date: 06/07/2018	Last Attempted Field Contact at Residence: 06/06/2018	Last Field Contact at Residence: 05/25/2018
Last Contact with Place of Employment: 06/06/2018	Last Contact with Known Family Members or Collateral Contacts: 06/06/2018	

Determination of Absconding Details: Offender Forrester failed to report on 6-5-18 at 3:30PM. Parole Officer (PO) called Forrester at 6[REDACTED] 99-2221, but the phone had been disconnected. PO then attempted to make contact with Forrester at 817 N. Maple Apt B in Hutchinson. PO spoke with Dom a roommate of Forrester. He stated Forrester moved out at the end of May and he has no seen him nor knows where he is living. Dom stated as far as he knows Forrester is still working at Borecky Construction. PO called Borecky Construction and they stated Forrester is not employed there. PO called the McDonalds Forrester was previous working and they stated he is no longer working there. The whereabouts of Offender Forrester at unknown

Attachment List: Parole Contacts - ForresterChrono.pdf

### LOCATION/AVAILABILITY INFORMATION

Available for Retaking:  Yes  No

<input type="checkbox"/> In Custody Contact: Facility Name: Address: City: State: Zip: Phone: Fax:	<input type="checkbox"/> Not in Custody  <input type="checkbox"/> Offender not taken into custody <input type="checkbox"/> Released on Bond Bond Amount: \$0 Name of Court: <input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Released on supervision pending a warrant
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Reason for Unavailability:  
 Offender has been sentenced and incarcerated  
Term: years months days  
 Waiting for disposition of new charges  
 Whereabouts unknown

**ADDITIONAL LOCATION/AVAILABILITY INFORMATION**

Comments:  
Previous address 817 N. Maple Apt B, [REDACTED]. Phone [REDACTED] 1. No employer information

Attachments:  
Office Contacts - ForresterChrono.pdf

**PROBABLE CAUSE INFORMATION**

<input type="checkbox"/> Probable cause found <input type="checkbox"/> No probable cause found <input checked="" type="checkbox"/> No determination at this time	Signed Waiver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Hearing Date:
Attachments:	

**CURRENT RESIDENCE**

Address: 817 N. Maple Apt B  
City: [REDACTED] State: [REDACTED] Zip: [REDACTED]

Offender resides with name, relationship:

**EMPLOYMENT STATUS**

Offender's employment: Mark Borecky Construction  
Employer's street address: 319 W. 5th City: [REDACTED] State: [REDACTED] Zip: [REDACTED] Telephone #: [REDACTED]

**OTHER REPORTED VIOLATIONS**

Type of Violation	Date of Original Report	Addendum Date	Response Date
There are no previously reported violations			

**SEE ICOTS FOR ADDITIONAL PREVIOUS REPORTS**

Supervising Officer/Location: [REDACTED]	Date: 06/07/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/07/2018
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# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: [REDACTED]	Date: 06/11/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Goddard, William Preston	ICOTS Offender Number: [REDACTED] Sending state #: Receiving state #:	ICOTS Case Number: [REDACTED]
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AKA:	SS #: [REDACTED]	FBI #: (if available) [REDACTED] VC8	Sex: M	Race: White	DOB: 11/14/1984
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### TYPE OF REPORT

Original Report     Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking     New Violent Crime Conviction  
 New Felony Conviction  
 Absconder (1)

### RETAKING OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

<b>ABSCONDER INFORMATION</b>		
Violation Discovery Date: 05/08/2018	Last Attempted Field Contact at Residence: 06/07/2018	Last Field Contact at Residence: N/A
Last Contact with Place of Employment: 06/11/2018	Last Contact with Known Family Members or Collateral Contacts: 06/11/2018	

Determination of Absconding Details: The offender had been reporting to [REDACTED] since his transfer up until his late office visit on 1/10/2018. The offender failed to report Feb. 2018, Mar. 2018, Apr. 2018. CSO placed calls to the offender and his references. CSO spoke with offender mother on 5/7/2018 who stated that Mr. William Goddard was still residing at her residence and was aware of his appt however did not report. CSO asked that the offender report immediately however the offender failed to report again on 5/8/2018. A field visit was conducted to offenders last known address however no answer at the door on 6/7/2018. Contact information was left at the front door on said date. CSO placed another call to the offenders father Mr. Scott Goddard who stated that he was in receipt of CSO's contact information however the information was left on a cabinet in his home. Mr. Goddard stated that everything went "down" when the offender lost his job. Mr. Goddard apologized for his son and also stated that CSO should do what was needed. CSO attempted to contact the offender's last job however was not able to speak the manager at the time of the call.

### LOCATION/AVAILABILITY INFORMATION

Available for Retaking:  Yes     No

<input type="checkbox"/> In Custody Contact: Facility Name: Address: City: State: Zip: Phone: Fax:	<input checked="" type="checkbox"/> Not in Custody  <input checked="" type="checkbox"/> Offender not taken into custody <input type="checkbox"/> Released on Bond Bond Amount: \$0 Name of Court: <input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Released on supervision pending a warrant
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Reason for Unavailability:

Offender has been sentenced and incarcerated  
     Term: years months days

Waiting for disposition of new charges

Whereabouts unknown

**ADDITIONAL LOCATION/AVAILABILITY INFORMATION**

Comments:  
 The offender is residing at his parent home however has not reported to the probation department since 1/10/2018.

Attachments:

**PROBABLE CAUSE INFORMATION**

<input type="checkbox"/> Probable cause found <input type="checkbox"/> No probable cause found <input checked="" type="checkbox"/> No determination at this time	Signed Waiver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Attachments:	Hearing Date:
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**CURRENT RESIDENCE**

Address: 25415 Wildwood Lane

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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Offender resides with name, relationship:

Scott Goddard	parent
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**EMPLOYMENT STATUS**

Offender's employment: BIG BS PIZZA

Employer's street address: 24501 FM 2100 , Suite B	City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone #: [REDACTED]
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**OTHER REPORTED VIOLATIONS**

Type of Violation	Date of Original Report	Addendum Date	Response Date
There are no previously reported violations			

**SEE ICOTS FOR ADDITIONAL PREVIOUS REPORTS**

Supervising Officer/Location: [REDACTED]	Date: 06/11/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/11/2018
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# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: [REDACTED]	Date: 06/07/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Williams, Tracy R.	ICOTS Offender Number: [REDACTED] Sending state #: 717-050 Receiving state #:	ICOTS Case Number: 1 [REDACTED]
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AKA:				
SS #: [REDACTED]	FBI #: (if available) 4 [REDACTED] 5	Sex: F	Race: Black	DOB: 04/04/1990

### TYPE OF REPORT

Original Report       Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking       New Violent Crime Conviction  
 New Felony Conviction  
 Absconder (1)

### RETAKING OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

<b>ABSCONDER INFORMATION</b>		
Violation Discovery Date: 06/07/2018	Last Attempted Field Contact at Residence: 06/07/2018	Last Field Contact at Residence: 06/07/2018
Last Contact with Place of Employment: N/A	Last Contact with Known Family Members or Collateral Contacts: 06/07/2018	

Determination of Absconding Details: Ms. Williams last reported to her agent on 3/7/18. On 3/15/18 Ms. Williams' mother, Lashanta Williams, called to advise that her daughter's mental state was not good. She stated that an appointment at Fields & Fields (mental health provider) did not go well and was not completed due to her daughter's irrational behavior. Ms. Williams stated that her daughter seemed to be fighting with an imaginary person for an extended period of time. Once home the situation became worse and Ms. Williams advised that her daughter became physical with her and demanded to leave the residence. The police responded and warned Ms. Williams about the consequences of absconding from her probation. Ms. Williams told the police that she was aware of the consequences but that she had "government business" to take care of. Lashanta Williams advises that her daughter is schizophrenic and has been an inpatient at St. Elizabeths. Ms. Williams failed to check in at a self check kiosk in April and failed to report to her agent on 5/30/18. On 5/31/18 a letter was mailed directing Ms. Williams to report on 6/6/18 which she failed to do. On 6/7/18 Lashanta Williams was spoken with. She advised that her daughter has been gone for about 3 weeks and is likely somewhere in the [REDACTED]. Ms. Williams further stated that her daughter is off of her mental health medication and does not have a telephone. Ms. Tracy Williams has no known employment and there is no record of her being incarcerated. Tracy Williams' whereabouts are unknown and she has made herself unavailable for supervision. Ms. Williams was advised to call the county police and insist that a missing person report be filed as her daughter is a danger to herself and potentially others.

### LOCATION/AVAILABILITY INFORMATION

Available for Retaking:  Yes  No





# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: [REDACTED]	Date: 06/12/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Bridges, Aaron	ICOTS Offender Number: 2 [REDACTED] Sending state #: 449977 Receiving state #:	ICOTS Case Number: [REDACTED] 5
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AKA: Aaron Bridges

SS #: 4 [REDACTED] 6	FBI #: (if available) [REDACTED] C8	Sex: M	Race: White	DOB: 06/23/1985
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### TYPE OF REPORT

Original Report     Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking     New Violent Crime Conviction  
 New Felony Conviction  
 Absconder (1)

### RETAKING OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

#### ABSCONDER INFORMATION

Violation Discovery Date: 06/06/2018	Last Attempted Field Contact at Residence: 06/07/2018	Last Field Contact at Residence: 02/23/2018
Last Contact with Place of Employment: 06/12/2018	Last Contact with Known Family Members or Collateral Contacts: N/A	

Determination of Absconding Details: Offender reported last to the office on 4/10/2018. On this date he was asked to provide a urine sample. He refused to provide a urine sample and admitted to using Methamphetamine a few days prior. He was instructed to obtain a substance abuse evaluation and was instructed to report back with the evaluation on 4/17/18. On 4/17/2018, he failed to report to the office as instructed and failed to provide proof of substance abuse evaluation. On 5/30/2018, a letter to report was mailed to him with instructions for him to report on 6/6/2018 at 10am. He failed to report on 6/6/2018. On 6/7/2018 field visit was attempted at his home but no one answered the door. Offenders phone is cut off and he did not leave secondary contacts. On 6/12/2018, [REDACTED] officer dialed last known employer. Manager, Travis, stated that he had not seen or heard of offender since Mothers Day and he no longer worked at his company. At this time, Aaron has refused to report his whereabouts and has failed to report to his [REDACTED] officer. [REDACTED] does not know his current whereabouts and requests that a warrant be issued for absconding.

### LOCATION/AVAILABILITY INFORMATION

Available for Retaking:  Yes  No





[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]				

**OTHER REPORTED VIOLATIONS**

Type of Violation	Date of Original Report	Addendum Date	Response Date
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There are no previously reported violations

[REDACTED]

**SEE ICOTS FOR ADDITIONAL PREVIOUS REPORTS**

[REDACTED]

Supervising Officer/Location: [REDACTED]	Date: 06/14/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/12/2018
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# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: [REDACTED]	Date: 06/19/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): HIBLER, EDWARD M	ICOTS Offender Number: 6 [REDACTED] Sending state #: 492079 Receiving state #: TEMP SID# 92280444	ICOTS Case Number: [REDACTED]
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AKA: EDWARD HILBERT

SS #: [REDACTED]	FBI #: (if available) 7 [REDACTED]	Sex: M	Race: White	DOB: 01/07/1978
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### TYPE OF REPORT

Original Report     Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking     New Violent Crime Conviction  
 New Felony Conviction  
 Absconder (1)

### RETAKE OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

#### ABSCONDER INFORMATION

Violation Discovery Date: 04/12/2018	Last Attempted Field Contact at Residence: 04/12/2018	Last Field Contact at Residence: N/A
Last Contact with Place of Employment: N/A	Last Contact with Known Family Members or Collateral Contacts: 06/19/2018	

Determination of Absconding Details: Client was released from ISF on 04/12/18 (was in ISF from 01/25/15-04/12/18) and instructed to report to the Beaumont Transitional Center on 04/12/18. The client failure to arrive. Failure to Arrive Notice was sent to the Command Center on 04/12/18. An After-Hour Warrant Notice was issued for the client on 04/12/18. A Failure to Arrive email was sent to the Beaumont District Parole Officer Management on 04/13/18 from the Beaumont Transitional Center regarding the client. A physical absconder check was not conducted in this area due to the fact the client was not from this area. The last known residence for the client is with Carole Miller, the client's aunt, 12 Ann Lane, [REDACTED]. I attempted to contact Ms. Miller at the phone number listed of [REDACTED] regarding the client's whereabouts on 06/19/18, but did not speak to anyone. According to the OIMS Employment Screen, the client has never held any type of employment. Message was left to return phone call. I also attempted to contact the client's Next of Kin, brother, David Hibler at 2 [REDACTED]-5555 on 06/19/18, but the phone number is not a working phone number. On 06/19/18, I made attempts to contact Salvation Army, Greyhound Bus Station, Local Hospitals and Jefferson County Jail in search of the client without success. All attempts to locate the client have been made and the client's whereabouts are unknown at this time.

### LOCATION/AVAILABILITY INFORMATION

Available for Retaking:  Yes  No





# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: Oklahoma	Date: 08/29/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: Texas	Phone #: 512-406-5990	Fax #: 512-454-0469	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Rogue, Apple Pi	ICOTS Offender Number: 754217 Sending state #: Receiving state #:	ICOTS Case Number: 735131
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AKA:	SS #:	FBI #: (if available) 1234567	Sex: M	Race: Unknown	DOB: 07/07/1977
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### TYPE OF REPORT

Original Report       Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking (1)       New Violent Crime Conviction  
 New Felony Conviction  
 Absconder

### RETAKE OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

#### PATTERN OF BEHAVIOR REQUIRING RETAKING

Discovery/Determination Date: 08/14/2017

Detail the act or pattern of behavior that would result in a request for revocation:

On 8-14-17, Offender Doe reported to his agent and was given a urinalysis test. The instant test was positive for Methamphetamine, in violation of his conditions of supervision. Mr. Doe admitted to using methamphetamine on 8-11-17, 8-12-17, and 8-13-17. Further, Mr. Doe indicated that he had not called to schedule a chemical dependency evaluation as directed and that he no longer feels that he needs any further treatment.

This behavior rises to the level of revocation in this state as the offender has had multiple positive urinalysis tests and is also refusing to comply with his treatment directive. Mr. Doe is on probation for several drug charges and despite previous interventions, he has continued the same pattern of behavior.

#### INCENTIVE AND CORRECTIVE ACTIONS

Incentive Actions: Modification of supervision condition, Verbal praise

Corrective Actions: Verbal reprimand/Warning, Report violation to sending state through Progress Report, Increased office reporting, Behavioral Contract, Treatment referral, Brief period of incarceration, Cognitive behavioral intervention

#### RESULT OF ACTIONS

Describe in detail how all the incentive and/or corrective actions selected above addressed or failed to address the offender's behavior:  
 Mr. Doe first tested positive for methamphetamine shortly after his release from prison on 1-7-17. He had completed substance abuse treatment while incarcerated. He was referred to a cognitive behavior program, Thinking for a Change, and successfully completed that program on 4-22-17. However, he tested positive for methamphetamine again on 4-28-17. He was referred for an updated chemical dependency evaluation. He did schedule an appointment for 5-12-17, but failed to show up for the evaluation. The appointment was rescheduled for 6-30-17, but he again failed to show for the appointment. He reported to his agent on 7-7-17 and again tested positive for methamphetamine. He was given a brief period of incarceration (7-7-17 to 7-10-17) as a sanction. He was ordered to follow through with the chemical dependency evaluation. However, he failed to follow through and again tested positive on 8-14-17.

LOCATION/AVAILABILITY INFORMATION			
Available for Retaking: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> In Custody Contact: Facility Name: Address: City: State: Zip: Phone: Fax:		<input checked="" type="checkbox"/> Not in Custody  <input checked="" type="checkbox"/> Offender not taken into custody <input type="checkbox"/> Released on Bond Bond Amount: \$0 Name of Court: <input type="checkbox"/> Released on Own Recognizance <input type="checkbox"/> Released on supervision pending a warrant	
Reason for Unavailability: <input type="checkbox"/> Offender has been sentenced and incarcerated Term: years months days <input type="checkbox"/> Waiting for disposition of new charges <input type="checkbox"/> Whereabouts unknown			
ADDITIONAL LOCATION/AVAILABILITY INFORMATION			
Comments:			
Attachments:			
PROBABLE CAUSE INFORMATION			
<input checked="" type="checkbox"/> Probable cause found <input type="checkbox"/> No probable cause found <input type="checkbox"/> No determination at this time		Signed Waiver: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Hearing Date:	
Attachments: Offender's Signed Waiver - ICOTSPR-OVRProcessFlowchart.docx			
CURRENT RESIDENCE			
Address: 123 Main St			
City: Austin		State: TX	Zip: 73301
Offender resides with name, relationship:			
Self		other	
EMPLOYMENT STATUS			
OTHER REPORTED VIOLATIONS			
Type of Violation	Date of Original Report	Addendum Date	Response Date
There are no previously reported violations			
SEE ICOTS FOR ADDITIONAL PREVIOUS REPORTS			
Supervising Officer/Location:		Date:	Compact Administrator / Designee:
			Texas ISC1
			Date: 08/29/2018



# Interstate Commission for Adult Offender Supervision

## VIOLATION REPORT REQUIRING RETAKING

To: [REDACTED]	Date: 09/10/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Jones, Henry C	ICOTS Offender Number: [REDACTED] Sending state #: 1721167 Receiving state #: 104711	ICOTS Case Number: [REDACTED]
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AKA:	SS #: 433 [REDACTED]	FBI #: (if available) 731578 [REDACTED] 4	Sex: M	Race: Black	DOB: 11/19/1978
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### TYPE OF REPORT

Original Report       Addendum to Original Report

### TYPE OF VIOLATION

Behavior Requiring Retaking (1)       New Violent Crime Conviction  
 New Felony Conviction  
 Absconder

### RETAKE OBLIGATION

Sending State Discretion  
 Mandatory

### RECOMMENDATION

Warrant requested  
 Return to sending state

### VIOLATION INFORMATION

#### PATTERN OF BEHAVIOR REQUIRING RETAKING

Discovery/Determination Date: 09/10/2018

Detail the act or pattern of behavior that would result in a request for revocation:  
 Henry has had several positive UA's for Methamphetamine, Cannabinoids and Cocaine since January 2018. His last UA was on 8-31-18. He was referred to relapse prevention class but continued to test positive. He then received a substance abuse evaluation that recommended Intensive outpatient treatment (IOP). Henry had issues with attendance and continued to test positive. He was given as second chance to attend IOP and had better attendance the second time around. However, he continued to test positive for Methamphetamine, Cannabinoids and Cocaine. His treatment provider at the time recommended Short-term residential treatment. In July 2018, he attended Short term residential treatment but was terminated after 8 days for drinking and inappropriate relations with another resident. Henry was sanctioned to 14 days custodial sanctions from 7-26-18 to 8-8-18. Henry was then referred again to Short-term residential treatment and started on 8-13-18. On 8-22-18, Henry decided to leave treatment on his own free will because he said, "he was good now". Henry was placed on Active GPS monitoring and on house arrest. He was served his probable cause hearing paperwork and wanted to have the hearing. While he was awaiting his PC hearing, Henry continued to test positive for Methamphetamine and Cannabinoids. He also violated his house arrest several times. He would leave his approved residence without approval from his assigned parole officer and would be out at all hours of the night. Henry continues to not follow through with the directives of his parole officer to remain at home unless given approval to leave. On 9-11-18 he was served another probable cause hearing for the positive UA and violating his house arrest. He waived his probable cause hearing and plead guilty. On 9-13-18 Henry was in association with another felon that was drinking and using Cocaine. Henry was to report to the office everyday this week at 9am to complete a cognitive thinking workbook. He has failed to comply with those directives. If Henry were a Nebraska parole client he would have been placed in custody, gone before the Board of Parole and his parole been revoked. He would have to complete a long term treatment program as well

#### INCENTIVE AND CORRECTIVE ACTIONS

Incentive Actions: None

Corrective Actions: Report violation to sending state through Progress Report, Increased office reporting, Increased drug screens, Imposed curfew, Treatment referral, GPS/House Arrest/EM, Brief period of incarceration, Cognitive behavioral intervention

**RESULT OF ACTIONS**

Describe in detail how all the incentive and/or corrective actions selected above addressed or failed to address the offender's behavior: Henry was given 14 days custodial sanctions after being terminated from a short term residential treatment program for using alcohol and inappropriate behavior with another resident. He completed the 14 days and was accepted into another short term residential treatment program to address his substance abuse issues. His drug testing was increased as was his contacts with his parole officer. He was placed on GPS with a curfew until he started treatment for a second time. Offender started short term residential treatment on 8-13-18 and after 9 days decided to voluntarily leave the program as he felt "he was good now". Henry has also had his face to face contacts with his parole officer increased to at least biweekly and sometimes on a weekly basis. His drug screens have been increased. prior to being referred to short term residential treatment he was referred to outpatient treatment to address his substance abuse issues. He continued to use. After failing to complete short term residential treatment the second time Henry was placed on house arrest. he was only allowed to leave if given permission by his parole officer. Several progress reports were submitted showing his continued substance abuse issues.

**LOCATION/AVAILABILITY INFORMATION**

Available for Retaking:  Yes  No

In Custody

Contact:  
Facility Name:  
Address:  
City:  
State:  
Zip:  
Phone:  
Fax:

Not in Custody

- Offender not taken into custody
- Released on Bond  
Bond Amount: \$0  
Name of Court:
- Released on Own Recognizance
- Released on supervision pending a warrant

Reason for Unavailability:

- Offender has been sentenced and incarcerated  
Term: years months days
- Waiting for disposition of new charges
- Whereabouts unknown

**ADDITIONAL LOCATION/AVAILABILITY INFORMATION**

Comments:

Attachments:

**PROBABLE CAUSE INFORMATION**

- Probable cause found
- No probable cause found
- No determination at this time

Signed Waiver:  Yes  No

Hearing Date:

Attachments: Offender's Signed Waiver - H.JonesPCHpacket2.pdf, Offender's Signed Waiver - H.JonesPCHpacket9-10-18.pdf

**CURRENT RESIDENCE**

Address: 455 S 25th St, Apt #2

City: [Redacted] State: [Redacted] Zip: [Redacted]

Offender resides with name, relationship:

**EMPLOYMENT STATUS**

**OTHER REPORTED VIOLATIONS**

Type of Violation	Date of Original Report	Addendum Date	Response Date
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There are no previously reported violations

**SEE ICOTS FOR ADDITIONAL PREVIOUS REPORTS**

[Redacted]	Date:	Compact Administrator / Designee:	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/21/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED]	ICOTS Offender Number: [REDACTED]	ICOTS Case Number: [REDACTED]
	Sending state #: 00579746	Receiving state #:

AKA:	SS #: [REDACTED]	FBI #: (if available)	Sex: M	Race: White	DOB: 07/17/1982
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 59 Vinita Trail

City: Flintstone	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Tennessee Standard Conditions: Probation Order and Judgment

Tennessee Standard Conditions: Probation Order and Judgment

### NEW ARREST

Arrest Disc. Date: 06/21/2018	Arrest Date: 03/12/2018	Arresting Agency: [REDACTED] Sheriff's Department	Case #:	City, County, State: , County,
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Incident Description:  
On 3/12/18, subject was arrested in Walker County [REDACTED] for Burglary- 2nd Degree, felony Theft by Taking, felony Criminal Damage to Property- 1st Degree, and felony Interference with Government Property. I apologize for the delay in notification, as the supervising officer did not notify ICOTS officer of this arrest. Incident report will be forwarded as soon as it's received from the supervising officer.

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

### INCENTIVE AND CORRECTIVE ACTIONS

Incentive Actions:

Corrective Actions:

### RECOMMENDATIONS/RESPONSE

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

### Additional Information:

On 9/7/17, field visit was conducted and odor of marijuana was detected. Subject admitted to smoking a joint when officers arrived. Administrative Hearing was held and subject was instructed to obtain substance abuse evaluation within 14 days. On 1/22/18, supervising officer received call from [REDACTED] a Valley school stating that subject's child had reported to school counselor that subject was using drugs in front of her. Supervising officer contacted subject and instructed him to be in the office that day by 4PM. Subject refused to report saying his daughter had an appointment. On 1/23/18, home visit was conducted but subject wasn't home. His son stated he was at work though subject had previously told his officer that he had not been cleared by doctor to return to work yet. Subject's officer spoke to subject's wife by phone and left instructions for subject to report in office 1/24 9AM. Subject then called his



officer and said he wouldn't be able to report at 9AM since he would be too tired. Subject again instructed to report 1/24 9AM. Subject failed to report 1/24. Telephone contact was made with subject's wife who reported that he had gone to Kentucky to help people move but truck broke down. She verified subject knew he was supposed to report in office that day. A probation warrant for subject's [REDACTED] case was issued on 1/25/18. On 3/12/18, subject was arrested on VOP warrant and new charges and has been in custody ever since. He has not yet been to court on probation revocation or new charges. Incident report will be submitted as soon as it's received by this officer. Since violations were being addressed on [REDACTED] case, the ICOTS officer was never informed. I apologize for the delay in this information.

**Other Attachments:**

Supervising Officer/Location: [REDACTED]	Date: 06/21/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/21/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/27/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Cochran, Marcellino Alphonse	ICOTS Offender Number: 8 [REDACTED] Sending state #: [REDACTED] 58A5 Receiving state #: 104788	ICOTS Case Number: [REDACTED]
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AKA: Marcellino [REDACTED]				
SS #: [REDACTED]	FBI #: (if available) 3942 [REDACTED]	Sex: M	Race: Black	DOB: 07/19/1965

Type of Report:  Annual (*Historical Only*)  As requested

Address: 8425 Hanover St

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Cochran continues to live at the home of his daughter. His daughter states that although no concerns, she would like him to start looking to move out on his own. His younger son, 12 yr old Marcellino Jr., also lives in the home.

### EMPLOYMENT:

Marcellino maintains his employment at Marriott. He was determined to secure employment in telephone sales.

Company: Marriott International

Address: 1818 N 90th St,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Jacey Wood	Job Title: Reservation Specialist
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

[REDACTED] Standard Conditions: Supervision Agreement

Other: Restitution Agreement

[REDACTED] Standard Conditions: Custodial Sanctions, \$25.00 monthly programming fee, Required DNA testing at parolee's expense in amount of \$25, Substance Abuse evaluation, [REDACTED] State Standard Conditions attached.

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

#### COMPLIANCE WITH CONDITIONS OF SUPERVISION

#### CONDITIONS IMPOSED BY NEBRASKA:

Conditions Violated:

Conditions Updated:

No Change:  
State Standard Conditions, Other

Description/update on conditions imposed by [REDACTED]:

<b>CONDITIONS IMPOSED BY</b> [REDACTED]			
Conditions Violated: State Standard Conditions			
Conditions Updated:			
No Change:			
Description/update on conditions required by [REDACTED]: On 5/30/18, I contacted [REDACTED] Police Department regarding an NCIC notification on Cochran. I was informed that on 5/20/18, a vehicle was pulled over by police, Cochran was the driver. A female in the vehicle was arrested for narcotics. Cochran did not have a travel permit to be in [REDACTED] on 5/20/18 nor did he call to inform me of his law contact. I requested the police report and received it on 6/5/18. Cochran was issued a traffic citation for Driving without valid License or Permit, and Expired License Plates. On 6/7/18, Cochran came to the [REDACTED] Parole Office as directed. He provided his [REDACTED] driver's license. He said he didn't have his license with him at the time of police contact. Due to his passenger getting arrested for narcotics, he submitted a urine sample for drug testing; which later tested negative. Cochran received a travel permit to attend court on 6/14/18 in [REDACTED] to show that he does have his license and he said to show that he does have valid plates for his car. He reported the case was dismissed and said he was not given any paperwork to verify this.			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED]:			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: None			
Corrective Actions: Travel Restriction Other, describe: Comply with the citation received on 5/20/18. No travel for 30 days from 6/7/18.			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input checked="" type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
Marcellino's focus is with earning as much money as he can so he can pay the rent and fix up the house he said he owns in [REDACTED]. In doing so, he has neglected his physical health and in the recent situation, he neglected to get the proper paperwork to be able to leave [REDACTED]. Marcellino realizes he needs to slow down and take a look at his priorities.			
<b>Other Attachments:</b>			
Violation paperwork - Cochran6-21-18.pdf			
Supervising Officer/Location: [REDACTED]	Date: 06/27/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/27/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 03/21/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Bartlett, Francis Richard	ICOTS Offender Number: [REDACTED] 4 Sending state #: 1090435 Receiving state #: 104786	ICOTS Case Number: [REDACTED] 8
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AKA:				
SS #: [REDACTED]	FBI #: (if available) 2 [REDACTED]	Sex: M	Race: White	DOB: 12/23/1960

Type of Report: <input type="checkbox"/> Annual ( <i>Historical Only</i> ) <input type="checkbox"/> As requested
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Address: 5103 N. 87th Ave
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City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Currently resides with wife on the top floor, while the landlord lives in the bottom half of the split level.

### EMPLOYMENT:

Groundscrew is during the warmer months.

Company: Groundscapes
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Address: 12234 Roberts Rd,
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City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Andy	Job Title: Groundscrew
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Company: J & J Painting and Remodeling
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Address: 6029 Pratt St,
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City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Dennis	Job Title: Painter
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**ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE**

Alcohol/Drug Treatment

Standard Conditions: Attached please find a generic parole agreement. Once Mr. Bartlett has been granted parole the agreement will be forwarded to your state.

Standard Conditions: Attached please find a generic parole agreement. Once Mr. Bartlett has been granted parole the agreement will be forwarded to your state.

Supervision Fees: Pay on-going monthly \$25 programming fee for entire duration of parole.

Supervision Fees: Pay on-going monthly \$25 programming fee for entire duration of parole.

Other: Obtain a Substance Abuse/Mental Health Evaluation & follow all recommendations.

Other: Obtain a Substance Abuse/Mental Health Evaluation & follow all recommendations.

Other: Successful completion of Financial Wellness class

Other: Successful completion of Financial Wellness class

Other: Subject to custodial sanctions

Other: Subject to custodial sanctions

Alcohol/Drug Treatment

Standard Conditions: Standard Interstate Parole conditions

Standard Conditions: Standard Interstate Parole conditions

**PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:**

Substance Abuse recommendation for most recent relapse

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY :**

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions

Description/update on conditions imposed by :

**CONDITIONS IMPOSED BY :**

Conditions Violated:

Other, State Standard Conditions

Conditions Updated:

No Change:

Supervision Fees, Other, Other

Description/update on conditions required by :

Frank has had three relapses while on parole (all with meth) 11/02/17, 11/16/17, and 03/05/18. The first violation he was signed up for relapse class at the Parole Office, the second relapse resulted in him starting relapse class over, and the most recent relapse Frank is recommended to start relapse class over for the third time but to stay in a transitional living facility for a minimum of 90 days while doing so.

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY :**

Conditions Violated:

Alcohol/Drug Treatment, Other, State Standard Conditions, Alcohol/Drug Treatment

Conditions Updated:

Other

No Change:

State Standard Conditions, Supervision Fees, Other

Description/update on additionally imposed conditions:

Frank has had three relapses while on parole (all with meth) 11/02/17, 11/16/17, and 03/05/18. The first violation he was signed up for relapse class at the Omaha Parole Office, the second relapse resulted in him starting relapse class over, and the most recent relapse Frank is recommended to start relapse class over for the third time but to stay in a transitional living facility for a minimum of 90 days while doing so.

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions: None

Corrective Actions: Report violation to sending state through Progress Report, Increased drug screens, Imposed curfew, Treatment referral, GPS/House Arrest/EM, Increased field/home visits

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

PO will continue to supervise. Frank will have increased meetings, stay a minimum of 90 days in transitional living, start his relapse class over for the second time, and submit to more frequent drug tests.

**Other Attachments:**

violation report/substance abuse recommendation - Bartlett1047863.6.18.pdf

Supervising Officer/Location:

[REDACTED]

Date:

03/21/2018

Compact Administrator / Designee:

[REDACTED]

Date:

03/21/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 03/07/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): ADKINS, BOBBIE J	ICOTS Offender Number: [REDACTED] Sending state #: 6340292 Receiving state #: 3068365/3262896	ICOTS Case Number: [REDACTED] 3
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AKA:				
SS #: 5 [REDACTED] 4	FBI #: (if available) 44 [REDACTED] DO	Sex: F	Race: White	DOB: 09/25/1987

Type of Report: <input type="checkbox"/> Annual ( <i>Historical Only</i> ) <input type="checkbox"/> As requested
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Address: 2828 N 23rd St East
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City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Continues to reside at the Lydia House and is doing well.
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### EMPLOYMENT:

Began working at Village Inn on 11/27/2017 and her supervisor says that she is doing well.
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Company: Village Inn
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Address: 2935 West Broadway,
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City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Jerry	Job Title: Cook
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

[REDACTED] Standard Conditions: BOP release plan
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[REDACTED] Standard Conditions: Parole order
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Other: Subject to custodial sanctions.
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Other: Interstate Parole Certificate
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Other: Submit DNA sample and pay \$25.00 for cost of sample.
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Other: \$25.00 per month programming fee.
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### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:  
State Standard Conditions, State Standard Conditions

Description/update on conditions imposed by [REDACTED]:

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:  
Other, Other, Other, Other

Description/update on conditions required by [REDACTED]:

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Corrective Actions:

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Bobbi has been on parole in [REDACTED] since 9/25/2017, she paroled to the Lydia House at 2809 N 20th street East, [REDACTED] and remains there at the time of this report. Bobbi is working full time at Village Inn at 2935 West Broadway, [REDACTED] where she works 40 hours a week and her supervisor said that Bobbi is doing a very good job and she sometimes splits her time between Village Inn in [REDACTED] and [REDACTED]. Bobbi has not missed any work since starting at Village Inn on 11/24/2017 and continues to work there at the time of this report. Bobbi is compliant with all her conditions of parole; she displays a positive attitude and reports no problems or concerns. She has spent time with her children and the visits have gone well. When I go and see Bobbi at the Lydia House I ask her case manager how she is doing and she says that Bobbi is doing well and reports no issues or concerns. Bobbi turns in her monthly report at times requested and she reports no problems or concerns at this time.

**Other Attachments:**

Supervising Officer/Location: [REDACTED]	Date: 03/07/2018	Compact Administrator / Designee: [REDACTED]	Date: 03/07/2018
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# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/15/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): allen, bryan Christopher	ICOTS Offender Number: 8 [REDACTED] Sending state #: 679-293 Receiving state #:	ICOTS Case Number: 1 [REDACTED] 1
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AKA: Brayn Allen

SS #: [REDACTED]	FBI #: (if available)	Sex: M	Race: Black	DOB: 12/31/1990
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 12408 Crystal Pond Ct

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

#### EMPLOYMENT:

Company: Contemporary Services Corporatio

Address: 619 Commerce Drive,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: TBD Job Title: Security Guard

Company: Contemporary Services Corporatio

Address: 619 Commerce Drive,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: TBD Job Title: Security Guard

**ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE**

Alcohol/Drug Treatment

Other: Traffic Alcohol Program (DUI Treatment), Traffic Safety Program (Driver's Improvement), Victim Impact Panel, Do Not Drive in [redacted] without a Valid Permit, Dont Operate Motor Vehicle After Consuming Alcohol or Drugs, Drug/ Alcohol Testing & treatment as deemed appropriate by probation

Other: May convert to unsupervised probation upon completion of special conditions

Alcohol/Drug Treatment

Other: Traffic Alcohol Program (DUI Treatment), Traffic Safety Program (Driver's Improvement), Victim Impact Panel, Do Not Drive in [redacted] without a Valid Permit, Dont Operate Motor Vehicle After Consuming Alcohol or Drugs, Drug/ Alcohol Testing & treatment as deemed appropriate by probation

Maryland Standard Conditions: Supervision Fees, drug and alcohol testing

Other: May convert to unsupervised probation upon completion of special conditions

**PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:**

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY [redacted]:**

Conditions Violated:

Conditions Updated:

Alcohol/Drug Treatment, Other, Alcohol/Drug Treatment, Other

No Change:

Other, Other

Description/update on conditions imposed by [redacted]:

Subject has completed the court order special conditions of an alcohol program at the [redacted] County Health Department, attendance of the Victim Impact Panel and completion of traffic safety. Per court order supervised probation may convert to unsupervised probation upon completion of special conditions. [redacted] is requesting permission to close interest in case as unsupervised per court order. Verification of special condions attached under Redommendation section.

**CONDITIONS IMPOSED BY [redacted]:**

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions

Description/update on conditions required by [redacted]:

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY [redacted]:**

Conditions Violated:

Conditions Updated:

No Change:

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Other, describe:

Convert supervised probation to unsupervised probation per court order.

Subject has completed the court order special conditions of an alcohol program at the [redacted] County Health Department, attendance of the Victim Impact Panel and completion of traffic safety. Per court order supervised probation may convert to unsupervised probation upon completion of special conditions. [redacted] is requesting permission to close interest in case as unsupervised per court order. Verification of special condions attached under Redommendation section.

Corrective Actions: None

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Convert supervised probation to unsupervised probation per court order.

Subject has completed the court order special conditions of an alcohol program at the [redacted]'s County Health Department, attendance of the Victim Impact Panel and completion of traffic safety. Per court order supervised probation may convert to unsupervised probation upon completion of special conditions. [redacted] is requesting permission to close interest in case as unsupervised per court order. Verification of special condions attached under Redommendation section.

**Other Attachments:**

Treatment - ALLENBRYAN-Treatment0001.pdf, Traffic Safety - ALLENBRYAN-TrafficSafety0001.pdf, Victim Impact Panel - ALLENBRYAN-VIP0001.pdf

Supervising Officer/Location:

[REDACTED]

Date:

06/15/2018

Compact Administrator / Designee:

[REDACTED]

Date:

06/15/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 05/21/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input checked="" type="checkbox"/> Registered Sex Offender <input checked="" type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Fifer, Tommy Lee	ICOTS Offender Number: [REDACTED] Sending state #: 1027244 Receiving state #: 00481449	ICOTS Case Number: [REDACTED]
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AKA: Tommie L. Fifer, Tommy Fifer, Tommy L. Fifer

SS #: [REDACTED]	FBI #: (if available) [REDACTED]	Sex: M	Race: Black	DOB: 08/01/1969
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 1441 E. Brooks Rd. RM #421

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

On 05/07/2018, Mr. Fifer moved to the Airport Inn located at 1441 E. Brooks Rd. Rm# 421 [REDACTED]. The last home visit was conducted on 05/16/2018. There were no issues cited with his living condition.

### EMPLOYMENT:

Offender has gained employment with Boatman's Tree Service. This officer spoke with the owner on 05/07/2018. Mr. Boatman informed this officer that the offender performs landscaping work.

Company: Boatman's Tree Service

Address: 4208 Arrowood Ave. ,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Mr. Boatman	Job Title: Landscaper
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Missouri Standard Conditions: Copy of Parole Orders

Electronic Monitoring

### NEW ARREST

Arrest Disc. Date: 05/19/2018	Arrest Date: 05/19/2018	Arresting Agency: [REDACTED] Police Department	Case #: 18011905	City, County, State: [REDACTED]
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**Incident Description:**  
 Mr. Fifer is allegedly in violation of [REDACTED] Rule #1 and [REDACTED] Rule #2 in that on 05/19/2018 he was arrested for felony aggravated assault. According to the affidavit, on May 18, 2018 at around 11:30 pm, Tracey Miller called the police to the Airport Inn located at 1441 E. Brooks because her boyfriend Tommie Fifer, had attacked her. Once officers arrived on the scene, she stated her boyfriend of over a year had punched her several times, strangled her, and put a knife to her throat while she was inside room 412 with him. She stated he did this because he accused her of sleeping with his boss and for refusing to pay for his room fees.

Mr. Fifer has allegedly violated [REDACTED] Rule # 1 and [REDACTED] Rule #2 in that on 02/11/2016 he was arrested for felony aggravated assault. According to the affidavit on January 16, 2016, Annie Turner reported to [REDACTED] Police Department (MPD) that she was involved in an altercation with her boyfriend, Tommie Fifer, while at their residence of 1552 Ragan #101. Turner stated that Fifer asked her for money and she told him that she had none. Turner stated that Fifer assaulted her. Turner sustained laceration to the back of her head and a burst blood vessel to her right eye. Officer Wood photographed Turner's

injuries and took a report. Turner was transported to Saint Frances hospital by ambulance.

**PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:**

Aggravated Assault Affidavit of Complaint 05/19/2018

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Aggravated Assault Affidavit of Complaint January 2016

Aggravated Assault Affidavit of Complaint 05/19/2018

Tommy Fifer Arrest Ticket

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions: None

Corrective Actions: Report violation to sending state through Progress Report, GPS/House Arrest/EM

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Mr. Fifer has demonstrated poor progress towards his supervision. On 01/29/2016, the offender was arrested for Driving While Under the Influence under docket no: 15-5882 out of [REDACTED]. On 06/28/2016, he was sentenced to probation for a period of 10 months and 29 days. On 12/15/2016, a probation violation warrant was issued for absconding from supervision from [REDACTED] City Court. On 02/11/2016, he was arrested for felony aggravated assault. On 03/30/2016, the case was dismissed due to lack of prosecution. The victim did not testify in case. On 05/19/2018, he was arrested for felony aggravated assault. At the writing of this report, Mr. Fifer is in custody of [REDACTED] County Criminal Justice Complex. He has a bond set for \$50,000 with a preliminary hearing set for 05/31/2018 in [REDACTED] County General Sessions Division 10. Mr. fifer has failed to verify efforts toward obtaining his G.E.D. On 05/14/2018, Mr. Fifer reported that he is not compliant with mental health treatment at this time. He has reported financial barriers to obtaining treatment. He was referred for mental health treatment however; due to his pending arrest, he will be disqualified for grant funded treatment services. Due to his multiple arrest and noncompliant behavior, It is recommended that a warrant be issued once offender is available for retaking.

**Other Attachments:**

<b>Supervising Officer/Location:</b> [REDACTED]	<b>Date:</b> 05/21/2018	<b>Compact Administrator / Designee:</b> [REDACTED]	<b>Date:</b> 05/21/2018
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# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/12/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Garcia, Alexeis	ICOTS Offender Number: [REDACTED]	ICOTS Case Number: [REDACTED]
	Sending state #: Receiving state #: 37162095	

AKA:

SS #: [REDACTED]	FBI #: (if available)	Sex: M	Race: Unknown	DOB: 12/06/1978
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 5757 South Staples St. Apt 3206

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Defendant states his wife and their 2 year old child reside with him.

### EMPLOYMENT:

Defendant commenced full-time employment as a Laborer with South Texas Custom Homes on 5/5/18. He reported he is earning \$15 an hour and is paid weekly. It is unclear if defendant is still employed with Bezy Bees LLC as he explained company is the same, but he is working for the person higher than his previous supervisor.

Company: Bezy Bees LLC

Address: P.O. Box 454,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Barbara Wierman	Job Title: Laborer
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**ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE**

Standard Conditions: Offender has paid court costs, and fine in full. State standard conditions apply.  
Standard Conditions: Offender has paid court costs, and fine in full. State standard conditions apply.  
Standard Conditions: Offender has paid court costs, and fine in full. State standard conditions apply.  
Standard Conditions: Offender has paid court costs, and fine in full. State standard conditions apply.  
Standard Conditions: Offender has paid court costs, and fine in full. State standard conditions apply.

Standard Conditions: Completely abstain from the use/consumption of illegal drugs and alcohol. Submit to random drug and alcohol testing as directed. If an admission or positive test results, defendant will comply with all treatment recommendations to include Twelve Step Support Group attendance.

Travel Restrictions

Travel Restrictions

Other: Avoid persons or places of disreputable or harmful character.

Other: Avoid persons or places of disreputable or harmful character.

Curfew

Supervision Fees: \$62 each month (includes \$2 transaction fee)

Curfew

Supervision Fees: \$62 each month (includes \$2 transaction fee)

Standard Conditions: Completely abstain from the use/consumption of illegal drugs and alcohol. Submit to random drug and alcohol testing as directed. If an admission or positive test results, defendant will comply with all treatment recommendations to include Twelve Step Support Group attendance.

**PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:**

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions, State Standard Conditions, State Standard Conditions

Description/update on conditions imposed by [REDACTED]

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:

Travel Restrictions, Other, Curfew, Supervision Fees, State Standard Conditions

Description/update on conditions required by [REDACTED]

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY [REDACTED]**

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions, State Standard Conditions, State Standard Conditions, Travel Restrictions, Other, Curfew, Supervision Fees, State Standard Conditions

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions: Verbal praise

Corrective Actions: None

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below



**Additional Information:**

Since December 2017, defendant has continued to report once a month (in person) on a Low Risk supervision strategy. He last reported on 6/8/18 and his next report is on 7/6/18. Defendant started working with Bezzy Bees LLC as a laborer in August 2017. In March 2018, defendant requested permission to work in Hookstown, [REDACTED] with a company called Brand to do installation. He stated he would be earning \$47 an hour. This Supervising Officer issued defendant a 30-day travel permit with the understanding he is to abide by all conditions of probation and return to [REDACTED] on his scheduled date. Defendant understood. He returned as scheduled in April 2018 and reported Brand job will not start until May 2018. Defendant commenced employment as a painter with Apache; however left the company because he did not like how they talked to him. Subsequently, he returned to Bezzy Bees LLC. In April, defendant requested permission to travel to [REDACTED] to work with Brace Industrial Service. Per defendant, he was unable to report for work due to a lack of childcare. Presently, defendant is working with South [REDACTED] Custom Homes as a laborer. Defendant denies use of alcohol and illegal drugs. Defendant submitted to a drug test on 2/15/18 with negative results. Defendant states he abides by curfew of 10PM to 6AM every night. A [REDACTED] DPS Criminal History check was conducted this date, which yielded no new arrests. Defendant is current with [REDACTED] Monthly Supervision Fees. It appears defendant is diligently seeking higher paying jobs to support his family. During reports, defendant has a pleasant demeanor, positive attitude about supervision, and demonstrates a desire to comply with terms of probation. Defendant has requested permission to travel to Mexico to introduce his child to his wife's family; however this travel would be at the discretion of [REDACTED]. As I understand [REDACTED] does not permit out of county travel while on supervision.

**Other Attachments:**

Drug Testing Results - collected 2/15/18 - A.HernandezUA0215.pdf, Previous Employment - Bezzy Bees LLC and Brace Industrial Service - A.HernandezPreviousEmployment.pdf, Employment Verification - South [REDACTED] Custom Homes - A.HernandezSTCEmployment.pdf

Supervising Officer/Location: [REDACTED]	Date: 06/12/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/12/2018
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# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/18/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Shepherd, Coleman Toms	ICOTS Offender Number: [REDACTED] Sending state #: 586077 Receiving state #:	ICOTS Case Number: [REDACTED]
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AKA:	SS #: [REDACTED] 146	FBI #: (if available)	Sex: M	Race: White	DOB: 01/28/1997
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Type of Report:  Annual (*Historical Only*)  As requested

Address: Building 21206 Ordinance Rd Rm 223

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Mr. Shepherd lives on the Military base with his unit.

### EMPLOYMENT:

Mr. Shepherd is employed by the US Army

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Other: Military Orders
[REDACTED] Standard Conditions: Probation Rules
Other: Letter from Commanding Officer
Other: Letter from Commanding Officer
[REDACTED] Standard Conditions: Probation rules
Other: Letter from Commanding Officer
[REDACTED] Standard Conditions: Probation rules
Curfew
Alcohol/Drug Treatment
Other: Letter from Commanding Officer
[REDACTED] Standard Conditions: Probation rules
Other: Orders requiring offender to live in [REDACTED]

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

#### COMPLIANCE WITH CONDITIONS OF SUPERVISION

CONDITIONS IMPOSED BY [REDACTED]:
Conditions Violated:
Conditions Updated:
No Change:
Other, State Standard Conditions, Other, Other, State Standard Conditions, Other, State Standard Conditions, Other, State Standard Conditions, Other
Description/update on conditions imposed by [REDACTED]

<b>CONDITIONS IMPOSED BY</b> [REDACTED] :			
Conditions Violated: Alcohol/Drug Treatment			
Conditions Updated:			
No Change: Curfew			
Description/update on conditions required by [REDACTED] The client failed to call or show for his scheduled assessment on: 4/18/18 at 3 pm. Mr. Shepherd has been re-scheduled for 7/16/18 @ 11:00 am.			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY TENNESSEE:</b>			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: None			
Corrective Actions: None			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input checked="" type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
Mr. Shepherd reports to this Officer as requested and has made his payments on time.			
<b>Other Attachments:</b>			
Supervising Officer/Location: [REDACTED]	Date: 06/18/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/18/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/13/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Hall, Qiona Nicole	ICOTS Offender Number: [REDACTED] Sending state #: 1517377 Receiving state #:	ICOTS Case Number: [REDACTED]
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AKA:	SS #: [REDACTED]	FBI #: (if available)	Sex: F	Race: Black	DOB: 08/30/1978
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 9410 Woodberry St

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Other: Probation conditions

Other: Post Release conditions

Other: Probation conditions

Other: Probation conditions

Other: Post Release conditions

Other: Probation conditions

[REDACTED] Standard Conditions: Supervision Fees, drug and alcohol testing

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

### COMPLIANCE WITH CONDITIONS OF SUPERVISION

#### CONDITIONS IMPOSED BY [REDACTED]

Conditions Violated:

Conditions Updated:

Other

No Change:

Other, Other, Other, Other, Other

Description/update on conditions imposed by [REDACTED]:  
Ms. Hall is on a moderate level of supervision and reports as directed. She works seasonal part time jobs at several sports venues. She moved about 4 months ago and was transferred to a new agent. Ms. Hall has a good attitude toward her supervision and has incurred no known or reported new charges.

#### CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions

Description/update on conditions required by [REDACTED]:

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY** [REDACTED]

Conditions Violated:

Conditions Updated:

No Change:

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Corrective Actions:

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

**Other Attachments:**

[REDACTED]			
Supervising Officer/Location: [REDACTED]	Date: 06/13/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/13/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 05/24/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Sinquefield, Anthony	ICOTS Offender Number: [REDACTED] 3 Sending state #: 331597 Receiving state #:	ICOTS Case Number: 1 [REDACTED] 2
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AKA:	SS #: 41 [REDACTED]	FBI #: (if available) [REDACTED]	Sex: M	Race: White	DOB: 06/08/1964
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 2145 [REDACTED] Hwy 9 North

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Offender is requesting a third party transfer to a [REDACTED].

### EMPLOYMENT:

Offender is no longer employed in [REDACTED], as offender is attempting to relocate to [REDACTED]

Company: George Mitchell Home Repair

Address: 2145 [REDACTED] Hwy 9 North,

City: M [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED] 4
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Supervisor: George Mitchell	Job Title: Home repair
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Tennessee Standard Conditions: State of [REDACTED] Standard Parole Certificate

Other: 1. Pre-parole: Complete Therapeutic Community  
2. Reside in [REDACTED]

Supervision Fees

DNA Registration

[REDACTED] Standard Conditions: [REDACTED] SPECIAL CONDITIONS

\$35 Monthly Supervision Fee. Total abstinence from use of alcohol. Substance abuse assessment/treatment (as deemed necessary). Payment of \$250 DNA testing fee and submission to DNA testing. By [REDACTED] Statute, Offender must submit his person, place of residence and motor vehicles to search and seizure at any time, day or night, with or without a search warrant, whenever requested to do so by any ACC Probation/Parole Officer or any Certified Law Enforcement Officer. In keeping with [REDACTED] Act 570 additional sanctions may apply, up to and including jail time.

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY** [REDACTED]

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions, Other

Description/update on conditions imposed by [REDACTED]:

**CONDITIONS IMPOSED BY** [REDACTED]

Conditions Violated:

Conditions Updated:

No Change:

Supervision Fees, DNA Registration, State Standard Conditions

Description/update on conditions required by [REDACTED]

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY** [REDACTED]

Conditions Violated:

Conditions Updated:

No Change:

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Corrective Actions:

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Offender is attempting to relocate to the state of [REDACTED] will assist with a subsequent transfer then close our interest in this case. Thank you.

**Other Attachments:**

Supervising Officer/Location:

[REDACTED]

Date:

05/24/2018

Compact Administrator / Designee:

[REDACTED]

Date:

05/24/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/21/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input checked="" type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Bullock, Tyshaun	ICOTS Offender Number: [REDACTED] Sending state #: Receiving state #:	ICOTS Case: [REDACTED]
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AKA:				
SS #: 216 [REDACTED]	FBI #: (if available) 2 [REDACTED] 2	Sex: M	Race: Black	DOB: 09/02/1977

Type of Report:  Annual (*Historical Only*)  As requested

Address: 10411 Campus Way South

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

Company: Dabetterdeal

Address: 4708 14th Street NW,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Self	Job Title: CEO
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Company: Dabetterdeal

Address: 4708 14th Street NW,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Self	Job Title: CEO
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Other: Stay at least 100 yards away from and have no contact with Jessica Rhones; No HATS behavior towards Jessica Rhones or anyone else; Mental Health Assessment and Treatment as deemed necessary by [REDACTED]; Drug and Alcohol testing and treatment as deemed necessary by [REDACTED]; Seek and maintain legal and/or gainful employment or enroll in some type of educational program; enroll in and successfully complete the Domestic Violence Intervention Program (DVIP); \$50 to the Victims of Violent Crime Compensation (VVCC) due by 9/1/18

[REDACTED] Standard Conditions: BULLOCK, TYSHAUN Probation Order 2017-DVM-001562

[REDACTED] Standard Conditions: BULLOCK, TYSHAUN Probation Order 2017-DVM-001562



<b>PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:</b>			
<b>COMPLIANCE WITH CONDITIONS OF SUPERVISION</b>			
<b>CONDITIONS IMPOSED BY</b> [REDACTED] :			
Conditions Violated: Other			
Conditions Updated:			
No Change: State Standard Conditions, State Standard Conditions			
Description/update on conditions imposed by [REDACTED] Mr. Bullock reported into the office today (6/21/18) and informed he allowed Ms. Rhones back into his house and that he has been to her house.			
<b>CONDITIONS IMPOSED BY</b> [REDACTED] :			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on conditions required by [REDACTED] :			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED] :			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions:			
Corrective Actions:			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input type="checkbox"/> Notification purposes only - Continue to supervise <input checked="" type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
This writer has explained to Mr. Bullock in detail that he is to have no contact with the victim. This writer also wanted to notify DC and ask that they call Mr. Bullock and explain in detail how he is to have no contact with the victim. This writer wants DC to be notified and to continue supervising the case. Mr. Bullock has reported as directed, and has brought in verification from a mental health counselor (Mikea Smith, MBI Health Services [REDACTED]).			
<b>Other Attachments:</b>			
Supervising Officer/Location: [REDACTED]	Date: 06/21/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/21/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 04/16/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED] 9	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED] Dustin R.	ICOTS Offender Number: [REDACTED] Sending state #: 144888 Receiving state #: 8056802	ICOTS Case Number: [REDACTED]
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AKA:	SS #: [REDACTED]	FBI #: (if available)	Sex: M	Race: White	DOB: 04/06/1988
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 817 N. Maple Apt B

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Offender broke up with fiancé and moved in with a friend.

### EMPLOYMENT:

Company: McDonald's

Address: 603 E. 30th,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Kishua	Job Title: Custodian
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Other: must not use alcoholic beverages

[REDACTED] Standard Conditions: blank parole certificate

Other: GPS monitoring 8 months

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

#### COMPLIANCE WITH CONDITIONS OF SUPERVISION

CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:

Conditions Updated:  
Other

No Change:  
Other, State Standard Conditions

Description/update on conditions imposed by [REDACTED]:  
On 8-16-2017 Offender Forrester was placed on GPS. As of 4-16-2018 Offender Forrester has completed his 8 month GPS condition. During this time he has had no travel violations. Parole Officer recommends GPS be removed.

<b>CONDITIONS IMPOSED BY</b> [REDACTED] :			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on conditions required by [REDACTED]			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED]			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions:			
Corrective Actions:			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input checked="" type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
Offender Forrester was placed on GPS 8-16-2017 with a condition from [REDACTED] for 8 months. Offender Forrester has completed his 8 months on GPS with no travel violations. It is recommended the GPS be removed.			
<b>Other Attachments:</b>			
Supervising Officer/Location: [REDACTED]	Date: 04/16/2018	Compact Administrator / Designee: [REDACTED]	Date: 04/16/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/12/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Queen, Shawn	ICOTS Offender Number: [REDACTED] Sending state #: 1621193 Receiving state #:	ICOTS Case Number: [REDACTED]
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AKA:

SS #: [REDACTED]95	FBI #: (if available)	Sex: M	Race: White	DOB: 12/06/1976
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Type of Report:  Annual (*Historical Only*)  As requested

Address: HC74 Box 3278

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

[REDACTED] Standard Conditions: Conditions of Probation

[REDACTED] Standard Conditions: Conditions of Probation

Curfew

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

### COMPLIANCE WITH CONDITIONS OF SUPERVISION

#### CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:

Conditions Updated:

No Change:  
State Standard Conditions, State Standard Conditions

Description/update on conditions imposed by [REDACTED]:

#### CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:

Conditions Updated:

No Change:  
Curfew

Description/update on conditions required by [REDACTED]:

#### ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY [REDACTED]:

Conditions Violated:

Conditions Updated:

No Change:

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Corrective Actions:

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Subject still has an outstanding balance and can't be released until paid. The Subject is somewhat cooperative if stayed on him. The Subject has had no known arrest.

**Other Attachments:**

Supervising Officer/Location:

██████████

Date:

06/12/2018

Compact Administrator / Designee:

██████████

Date:

06/12/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 06/14/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED] 69	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Cathey, David Ryan	ICOTS Offender Number: 8 [REDACTED] Sending state #: 1880002 Receiving state #: 1823290	ICOTS Case Number: [REDACTED] 7
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AKA:				
SS #: 3 [REDACTED] 5	FBI #: (if available) [REDACTED] C4	Sex: M	Race: White	DOB: 08/13/1982

Type of Report:  Annual (*Historical Only*)  As requested

Address: 1436 Dove Landing

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Alcohol/Drug Treatment
Alcohol/Drug Treatment
South Carolina Standard Conditions: Standard Conditions
Alcohol/Drug Treatment
Alcohol/Drug Treatment
South Carolina Standard Conditions: Standard Conditions
Supervision Fees: \$50/month
Supervision Fees: \$50/month

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

### COMPLIANCE WITH CONDITIONS OF SUPERVISION

#### CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:

Conditions Updated:

No Change:  
Alcohol/Drug Treatment, Alcohol/Drug Treatment

Description/update on conditions imposed by [REDACTED]:

#### CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:  
State Standard Conditions, Supervision Fees

Conditions Updated:

No Change:

Description/update on conditions required by [REDACTED]:

Subject a total of \$50 while on probation. He owed 550.00 for Supervision fees, \$25 for Public Service sign up and a \$20 drug test fee. He did not report to the Public Service worksite that he was assigned to or to the reassignment appointment after he failed to comply. 120 hours of Public Service was ordered. Subject was not ordered Substance Abuse counseling therefore was not referred to treatment. Subject reported to the agent as instructed to the office, however he was on low level and only was instructed to report to see the agent 3 times.

<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED] :			
Conditions Violated:			
Conditions Updated:			
No Change:			
Alcohol/Drug Treatment, Alcohol/Drug Treatment, State Standard Conditions, Supervision Fees			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions:			
Corrective Actions:			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input checked="" type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
<b>Other Attachments:</b>			
Supervising Officer/Location: [REDACTED]	Date: 06/14/2018	Compact Administrator / Designee: [REDACTED]	Date: 06/14/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 05/10/2018	Type of supervision: <input type="checkbox"/> Parole <input checked="" type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): Comesflying, Brandon Rey	ICOTS Offender Number: [REDACTED]	ICOTS Case Number: [REDACTED]
	Sending state #:	Receiving state #:

AKA:			
SS #: [REDACTED]	FBI #: (if available) [REDACTED] C5	Sex: M	Race: American Indian or Alaskan Native
			DOB: 03/11/1986

Type of Report:  Annual (*Historical Only*)  As requested

Address: 2113 E. Irwin, Lot 3

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

The offender is still seeking employment and was stressed to him that he needs to get gainfully employed.

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Other: Corrective Thinking

Alcohol/Drug Treatment

Alcohol/Drug Treatment

Other: The offender will also be required to complete MRT (Moral Recognition Therapy, a corrective thinking class, while in [REDACTED])

Alcohol/Drug Treatment

Other: restitution

Other: The offender will be subject to random testing of blood, breath, or other bodily fluids, and be responsible for the costs of those testing, if any.

[REDACTED] Standard Conditions: The offender will be required to sign [REDACTED] Standard Conditions of Probation upon his arrival in [REDACTED] a sample of which has been attached

Other: The offender will be subject to [REDACTED] incentives or sanctions for any issues while on probation, this may also include short periods of incarceration if deemed applicable and appropriate for any violations of his terms of supervision.

Other: No contact with anyone on probation, parole, DOC, or known drug users/dealers/abusers, or anyone else deemed detrimental by Court Services

Other: The offender will be required to complete CBISA, and CBISA aftercare in lieu of IOP 2.1. The CBISA (Cognitive Behavioral Interventions for Substance Abuse) program is a cognitive behavioral treatment approach that will assist you in learning skills and strategies for avoiding substance abuse.

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

### COMPLIANCE WITH CONDITIONS OF SUPERVISION

### CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:  
Alcohol/Drug Treatment, Alcohol/Drug Treatment, Alcohol/Drug Treatment

Conditions Updated:

No Change:  
Other, Other

Description/update on conditions imposed by [REDACTED]

The offender admitted to using methamphetamine and marijuana when meeting with Court Services on 03/30/2018. The defendant admitted to using both substances on March 03-29-2018. The defendant was detained for 48 hours at the jail as a sanction. The offenders last appointment with Court Services on 04/27/2018 still showed positive for marijuana on an instant drug test given on that date. The offender is currently on a waiting list for MRT (corrective



thinking). The offender was placed in PRE-CBISA treatment, which he attended one time before being enrolled in CBISA treatment. Since being enrolled in CBISA treatment the offender has attended 1 of 3 sessions to date. The offender has missed his appointment with Court Services on April 23, 2018, which was later rescheduled and attended on April 27, 2018. The offender missed his last appointment with Court Services on May 7, 2018, after calling on May 4th to reschedule. Last face-to-face contact with the offender was on April 27, 2018. Court Services will attempt to locate the offender and apply sanction which may include up to 2 days in jail. If unable to locate the offender, Court Services will follow up with a violation due to absconding.

<b>CONDITIONS IMPOSED BY</b> [REDACTED]			
Conditions Violated: Other, Other			
Conditions Updated: Other, Other			
No Change: State Standard Conditions, Other			
Description/update on conditions required by [REDACTED] The offender admitted to using methamphetamine and marijuana when meeting with Court Services on 03/30/2018. The defendant admitted to using both substances on March 03-29-2018. The defendant was detained for 48 hours at the jail as a sanction. The offenders last appointment with Court Services on 04/27/2018 still showed positive for marijuana on an instant drug test given on that date. The offender is currently on a waiting list for MRT (corrective thinking). The offender was placed in PRE-CBISA treatment, which he attended one time before being enrolled in CBISA treatment. Since being enrolled in CBISA treatment the offender has attended 1 of 3 sessions to date. The offender has missed his appointment with Court Services on April 23, 2018, which was later rescheduled and attended on April 27, 2018. The offender missed his last appointment with Court Services on May 7, 2018, after calling on May 4th to reschedule. Last face-to-face contact with the offender was on April 27, 2018. Court Services will attempt to locate the offender and apply sanction which may include up to 2 days in jail. If unable to locate the offender, Court Services will follow up with a violation due to absconding.			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED]			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: None			
Corrective Actions: Increased drug screens, Treatment referral, Brief period of incarceration			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input checked="" type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
The offender tested positive for meth/marijuana on an instant drug test collected on 03-30-2018. He has signed an admission of use indicating that he had used on 03-29-2018. His just recently began CBISA treatment and his provider will be updated on his recent use. He was sanctioned to sit 48 hours in jail due to the new use. There are no local charges as a result of this use. Court Services will attempt to continue to work with the offender as sanctions have been handed down. Will update your state if any further issues with the offender.			
<b>Other Attachments:</b>			
Supervising Officer/Location: [REDACTED]	Date: 05/10/2018	Compact Administrator / Designee: [REDACTED]	Date: 05/10/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 05/30/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED]	ICOTS Offender Number: [REDACTED]	ICOTS Case Number: 1 [REDACTED]
	Sending state #: 6932355	
	Receiving state #: 104869	

AKA:				
SS #: [REDACTED]	FBI #: (if available) 89 [REDACTED]	Sex: F	Race: White	DOB: 09/01/1993

Type of Report:  Annual (*Historical Only*)  As requested

Address: 3614 Ames Ave

City: Omaha	State: NE	Zip: 68111
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### HOME/LIVING SITUATION:

Jamie continues to live with her sister and brother-in-law. No issues/concerns at the home. Her sister Sandra states that Jamie goes to work, sees her daughter regularly, and goes to class.

### EMPLOYMENT:

No issues or concerns.

Company: Express Emplymt-Majors Plastics

Address: Express-6157 Center St,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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Supervisor: Lanae or Tanya	Job Title: General labor
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

[REDACTED] Standard Conditions: Parole order

[REDACTED] Standard Conditions: BOP release plan

[REDACTED] Standard Conditions: [REDACTED] Standard Conditions: Adult Parole Conditions - Interstate Compact, \$25 monthly programming fee, subject to custodial sanctions, required DNA testing at parolee's expense in amount of \$25

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

#### COMPLIANCE WITH CONDITIONS OF SUPERVISION

CONDITIONS IMPOSED BY [REDACTED]:

Conditions Violated:  
State Standard Conditions

Conditions Updated:

No Change:  
State Standard Conditions

Description/update on conditions imposed by [REDACTED]:  
On 4/20/18, Jamie Harless received a Uniform Citation and Complaint from [REDACTED] State Patrol, committing the offense of Speeding 36+ MPH Interstate, Careless Driving, and Drive Under Susp/Before Reinstated-State. Harless failed to report the law enforcement contact immediately. On

4/25/18, I, Senior Parole Officer Fabian, informed Harless that I was notified of her violation. She was directed to report to the [REDACTED] parole office for drug testing. On 4/25/18, Harless submitted a urine specimen which later tested positive for the use of Amphetamines and THC (Marijuana).

<b>CONDITIONS IMPOSED BY</b> [REDACTED]			
Conditions Violated: State Standard Conditions			
Conditions Updated:			
No Change:			
Description/update on conditions required by [REDACTED]: On 4/20/18, Jamie Harless received a Uniform Citation and Complaint from [REDACTED] State Patrol, committing the offense of Speeding 36+ MPH Interstate, Careless Driving, and Drive Under Susp/Before Reinstated-State. Harless failed to report the law enforcement contact immediately. On 4/25/18, I, Senior Parole Officer Fabian, informed Harless that I was notified of her violation. She was directed to report to the [REDACTED] office for drug testing. On 4/25/18, Harless submitted a urine specimen which later tested positive for the use of Amphetamines and THC (Marijuana).			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY IOWA:</b>			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: None			
Corrective Actions: Verbal reprimand/Warning, Report violation to sending state through Progress Report, Increased drug screens, Treatment referral			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input checked="" type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
Jamie has been attending outpatient treatment since 5/2/18.			
<b>Other Attachments:</b>			
Violation paperwork - Harless104869.pdf			
Supervising Officer/Location: [REDACTED]	Date: 05/30/2018	Compact Administrator / Designee: [REDACTED]	Date: 05/30/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 12/21/2017	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED] 9-5804	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED]	ICOTS Offender Number: [REDACTED]	ICOTS Case Number: [REDACTED]
	Sending state #: 1269832	
	Receiving state #: 104654	

AKA: [REDACTED] h

SS #: [REDACTED] 2	FBI #: (if available) [REDACTED] A8	Sex: M	Race: White	DOB: 08/15/1973
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 533 Latham Street

City: Lodgepole	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Randy lives with his son, Gavin. His father and uncle in Lodgepole.

### EMPLOYMENT:

Randy maintains the same full-time employment.

Company: Jeppson Services

Address: 1039 1st St.,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Gary Jeppson	Job Title: Laborer
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Special Condition: Parole Orders

Special Condition: Substance Abuse Programming as recommended-Outpatient Programming

Supervision Fees: Note: In Financial Obligations- offenders are required to pay a monthly programming fee in the amount of \$25 via money order only, starting the second month of supervision.

Special Condition: DNA registration. Offenders are required to submit to DNA registration. This sample will be collected at the time of orientation and requires a \$25 money order for processing.

Other: Incentives and Custodial Sanctions Agreement

[REDACTED] Standard Conditions: Interstate Parole Conditions

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

<b>COMPLIANCE WITH CONDITIONS OF SUPERVISION</b>			
<b>CONDITIONS IMPOSED BY [REDACTED]:</b>			
Conditions Violated:			
Conditions Updated:			
No Change: Special Condition			
Description/update on conditions imposed by [REDACTED]:			
<b>CONDITIONS IMPOSED BY MISSOURI:</b>			
Conditions Violated:			
Conditions Updated:			
No Change: Special Condition, Supervision Fees, Special Condition, State Standard Conditions			
Description/update on conditions required by [REDACTED]:			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY [REDACTED]:</b>			
Conditions Violated:			
Conditions Updated:			
No Change: Other			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: Modification of supervision condition, Decreased reporting requirements			
Corrective Actions: None			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input checked="" type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
Randy has successfully completed a year of supervision without any violations. Randy has completed all programming required by special conditions. Randy remains gainfully employed and his employer holds him in high regard. Randy's programming and supervision are unremarkable. He has been a breath of fresh air to supervise and was recently granted an override of Nebraska supervision requirements for bi-monthly reporting. All resources and services are long exhausted for Randy, he is self-sufficient and requires minimal supervision. Please consider Randy for early release if applicable. Thank you!			
<b>Other Attachments:</b>			
Supervising Officer/Location: [REDACTED]	Date: 12/21/2017	Compact Administrator / Designee: [REDACTED]	Date: 12/21/2017



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 12/11/2017	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED] Justin	ICOTS Offender Number: 7 [REDACTED] Sending state #: Receiving state #: 104582	ICOTS Case Number: 9 [REDACTED] 5
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AKA:				
SS #: 368-1 [REDACTED]	FBI #: (if available) 7 [REDACTED] 8	Sex: M	Race: White	DOB: 07/09/1992

Type of Report:  Annual (*Historical Only*)  As requested

Address: 312 West Bazile St.

City: Bloomfield	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

His employer speaks very highly of him. They trust him to run the shop when they aren't there.

Company:  
Blomfield Tire & Oil

Address:  
112 W Main St,

City: Bloomfield	State: [REDACTED]	Zip: [REDACTED] 8	Telephone: [REDACTED] 141
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Supervisor: Jeremy Gill	Job Title: Assist. Mgr
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Special Condition: Restitution agreement

[REDACTED] Standard Conditions: Supervision agreement

[REDACTED] Standard Conditions: NE Interstate Standard Conditions.

Special Condition: Restitution agreement

[REDACTED] Standard Conditions: Supervision agreement

[REDACTED] Standard Conditions: NE Interstate Standard Conditions.

Special Condition: \$25.00 DNA Testing Fee;\$25.00 per month Programming Fee; Submit to a substance abuse programming evaluation: Follow Care and aftercare recommendations; Successfully completed recommended programming.

Special Condition: \$25.00 DNA Testing Fee;\$25.00 per month Programming Fee; Submit to a substance abuse programming evaluation: Follow Care and aftercare recommendations; Successfully completed recommended programming.

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:



**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY** [REDACTED] :

Conditions Violated:

Conditions Updated:

No Change:

Special Condition, State Standard Conditions

Description/update on conditions imposed by [REDACTED] :

**CONDITIONS IMPOSED BY** [REDACTED] :

Conditions Violated:

Conditions Updated:

No Change:

State Standard Conditions, Special Condition

Description/update on conditions required by [REDACTED] :

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY** [REDACTED] :

Conditions Violated:

Conditions Updated:

No Change:

Special Condition, State Standard Conditions, State Standard Conditions, Special Condition

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Corrective Actions:

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Justin has been doing well on parole. If he is able to be granted an early discharge I do support this. He has paid off his restitution in full with the State of [REDACTED]. He is working fulltime. He employer speaks highly of him. He is supervised at a low level per our risk assessment. He is only seen once every 3 months. He completed his treatment on 9/26/2016.

**Other Attachments:**

Restitution receipt - 001.pdf

**Supervising Officer/Location:** [REDACTED]

**Date:** 12/11/2017

**Compact Administrator / Designee:** [REDACTED]

**Date:** 12/11/2017



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 02/21/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED] L	ICOTS Offender Number: [REDACTED] 4 Sending state #: 64633 Receiving state #: 104535	ICOTS Case Number: 9 [REDACTED]
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AKA: [REDACTED] Jackson

SS #: 4 [REDACTED]	FBI #: (if available) 389 [REDACTED]	Sex: F	Race: Black	DOB: 12/24/1954
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 4857 Marshall Drive, #201

City: [REDACTED] ha	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

Marilyn Jackson was placed on my caseload on 6/1/17. She continues to live in [REDACTED] a with her granddaughter, Octavia. Octavia said Marilyn is doing well, being successful and very proud of her.

### EMPLOYMENT:

Marilyn Jackson continues to be employed at Casey's and also works at Goodwill as a manager. In the Casey's "Spotlight" bulletin, Marilyn was acknowledged for being positive. Her positive attitude is also noticed by her supervising officer.

Company: Casey's

Address: 15275 Weir Street,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: 4 [REDACTED]
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Supervisor: Justin  
Job Title: Cashier

**ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE**

Anger Management

Electronic Monitoring

Alcohol/Drug Treatment

Colorado Standard Conditions: std cond

DNA Registration

Other: Parole Board Action Notice

Special Condition: Attend anger management classes.

Special Condition: Pay a one time fee of \$25 for DNA testing.

Special Condition: Obtain a substance abuse evaluation and follow the recommendations.

Standard Conditions: Standard Interstate Parole Conditions

Special Condition: Pay an ongoing \$25 monthly programming fee when electronic monitoring is completed.

Special Condition: Programming fees be waived while on electronic monitoring.

Special Condition: Be placed on electronic monitoring for 120 days at \$3.35 per day.

**PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:**

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:

Anger Management, Electronic Monitoring, Alcohol/Drug Treatment, State Standard Conditions, DNA Registration, Other

Description/update on conditions imposed by [REDACTED]:

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:

Conditions Updated:

No Change:

Special Condition, Special Condition, Special Condition, Special Condition, State Standard Conditions, Special Condition, Special Condition

Description/update on conditions required by [REDACTED]:

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY COLORADO:**

Conditions Violated:

Conditions Updated:

No Change:

Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions:

Corrective Actions:

**RECOMMENDATIONS/RESPONSE**

- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Marilyn [REDACTED] was placed on my caseload in June 2017. At the time, she was stable in her employment and residence and continues to have stability in those areas. Marilyn reports to the office, on time and prepared, every 3 months for monthly reporting. She continues to be responsible by mailing in her monthly report information for the months that she does not come to the office. She is current with her [REDACTED] Programming Fee payment. Regarding her Conditions of Supervision, notes from her previous supervising officer indicate Marilyn was to be assessed for Anger Management and Alcohol/Drug Treatment. The notes then indicate an evaluation was completed and no treatment was recommended. Regarding the Electronic Monitor, Marilyn states she was on the monitor in [REDACTED] and it was removed when her parole was transferred to [REDACTED] a. Per a Compact Action Request, the monitor was at the discretion of the [REDACTED] supervising officer. Marilyn was not placed on the monitor in [REDACTED]. While on parole in [REDACTED], Marilyn [REDACTED] appears to have made and continues to make positive choices in her life.

**Other Attachments:**

Casey's Spotlight-Marilyn J [REDACTED] - Marilyn [REDACTED] -CaseysSpotlight.pdf

Supervising Officer/Location:

[REDACTED]

Date:

02/21/2018

Compact Administrator / Designee:

[REDACTED]

Date:

02/21/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 03/22/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: 4 [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED] Jeremie	ICOTS Offender Number: 8 [REDACTED] 5 Sending state #: 157327 Receiving state #: 104815	ICOTS Case Number: 1 [REDACTED] 7
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AKA: Jeremie [REDACTED] Jeremy [REDACTED], [REDACTED]

SS #: [REDACTED]	FBI #: (if available) 7 [REDACTED] 7	Sex: M	Race: White	DOB: 02/07/1992
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 72 South Street

City: Gering	State: NE	Zip: 69341
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### HOME/LIVING SITUATION:

Jeremie lives with his wife, Jessica and her parents, David and Cindy. They also have Jessica's 2 children from a previous relationship. David and Cindy have custody of the children.

### EMPLOYMENT:

Jeremie remains unemployed. He has been unsuccessful in securing and maintaining approved employment.

### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Colorado Standard Conditions: [REDACTED] Conditions of Parole
Other: Parole Board Action Notice
Colorado Standard Conditions: C [REDACTED] Conditions of Parole
Other: Parole Board Action Notice
Other: Custodial Sanctions may be imposed in accordance with [REDACTED] supervision protocols.
Other: DNA registration and a one time \$25 processing fee. To be collected at the time of orientation in Nebraska.
Other: Substance Abuse Programming-Intensive Outpatient
[REDACTED] Standard Conditions: Interstate Parole Certificate
Other: \$25 monthly programming fee

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

### COMPLIANCE WITH CONDITIONS OF SUPERVISION

<b>CONDITIONS IMPOSED BY [REDACTED]:</b>
Conditions Violated: State Standard Conditions, State Standard Conditions
Conditions Updated: No Change: Other, Other

Description/update on conditions imposed by [REDACTED]:  
Jeremie has numerous technical violations. He was previously sanctioned for a positive narcotics test and admission. He has failed to attend regularly scheduled outpatient substance abuse and mental health programming. Jeremie has failed to secure and maintain approved employment. Jeremie has failed to pay supervision fees as assessed. Jeremie has submitted and admitted to another narcotics violation.

<b>CONDITIONS IMPOSED BY</b> [REDACTED]			
Conditions Violated: Other, State Standard Conditions			
Conditions Updated:			
No Change: Other, Other			
Description/update on conditions required by [REDACTED]: Jeremie has numerous technical violations. He was previously sanctioned for a positive narcotics test and admission. He has failed to attend regularly scheduled outpatient substance abuse and mental health programming. Jeremie has failed to secure and maintain approved employment. Jeremie has failed to pay supervision fees as assessed. Jeremie has submitted and admitted to another narcotics violation.			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED]			
Conditions Violated:			
Conditions Updated: Other			
No Change:			
Description/update on additionally imposed conditions: Jeremie has been referred for a higher level of care for continued substance abuse.			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: None			
Corrective Actions: Report violation to sending state through Progress Report, Increased drug screens, Treatment referral, Brief period of incarceration			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input checked="" type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
Jeremie is scheduled to serve a 14 day custodial sanction for the current violations. Jeremie has been directed to report to the [REDACTED] f County Detention Center by noon on March 28th, 2018. He will be released on April 10th, 2018.			
<b>Other Attachments:</b>			
Custodial Sanction Agreement - S [REDACTED] Jeremie104815CustodialSanctionAgreement.pdf, Violation Report - [REDACTED] Jeremie104815-AVRwCustodialSanction.pdf			
Supervising Officer/Location: [REDACTED]	Date: 03/22/2018	Compact Administrator / Designee: [REDACTED]	Date: 03/22/2018



# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 04/26/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED], Joseph Anthony	ICOTS Offender Number: [REDACTED] Sending state #: 6221804 Receiving state #: 104885	ICOTS Case Number: 1 [REDACTED]
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AKA:				
SS #: [REDACTED] 0	FBI #: (if available) 2 [REDACTED] B4	Sex: M	Race: White	DOB: 08/23/1981

Type of Report:  Annual (*Historical Only*)  As requested

Address: 4041 D Street

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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**HOME/LIVING SITUATION:**  
Joseph continues to live with his sister. Due to his drug use, he will be seeking transitional living.

**EMPLOYMENT:**  
[REDACTED] Nissan/Kia listed as employment although Hellman has not had approved employment since paroling to [REDACTED]. I input the end date to be when he was sentenced in [REDACTED].

Company: [REDACTED] Nissan/Kia

Address: 920 32nd Avenue,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Mark	Job Title: Salesman
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### ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE

Other: Parole Order attached

[REDACTED] Standard Conditions: [REDACTED] parole agreement

Other: \$25 monthly programming fee, subject to custodial sanctions and blank agreement attached, One time only \$25 DNA testing

### PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:

#### COMPLIANCE WITH CONDITIONS OF SUPERVISION

**CONDITIONS IMPOSED BY [REDACTED]:**

Conditions Violated:  
Other

Conditions Updated:

No Change:

Description/update on conditions imposed by [REDACTED]:  
On 4/19/18, Joseph [REDACTED] submitted a urine specimen which later tested positive for the use of amphetamines. He said he took Ecstasy on 4/18/18. Today, as we were addressing the 4/19/18 violation, Joseph admitted to taking 2 more Ecstasy early this morning. A drug swab was conducted and it showed positive for amphetamine and methamphetamine. He signed the Voluntary Acknowledgement of Alcohol/Drug Use Contrary to Terms and Conditions of Parole admitting to taking 2 Ecstasy.

<b>CONDITIONS IMPOSED BY</b> [REDACTED]			
Conditions Violated: State Standard Conditions			
Conditions Updated:			
No Change: Other			
Description/update on conditions required by [REDACTED] On 4/19/18, Joseph [REDACTED] submitted a urine specimen which later tested positive for the use of amphetamines. He said he took Ecstasy on 4/18/18. Today, as we were addressing the 4/19/18 violation, Joseph admitted to taking 2 more Ecstasy early this morning. A drug swab was conducted and it showed positive for amphetamine and methamphetamine. He signed the Voluntary Acknowledgement of Alcohol/Drug Use Contrary to Terms and Conditions of Parole admitting to taking 2 Ecstasy.			
<b>ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY</b> [REDACTED]:			
Conditions Violated:			
Conditions Updated:			
No Change:			
Description/update on additionally imposed conditions:			
<b>INCENTIVE AND CORRECTIVE ACTIONS</b>			
Incentive Actions: None			
Corrective Actions: Increased office reporting, Increased drug screens, Treatment referral			
<b>RECOMMENDATIONS/RESPONSE</b>			
<input type="checkbox"/> Consider early termination of supervision for good behavior <input type="checkbox"/> Remove conditions/requirements for good behavior <input type="checkbox"/> Review status with the sentencing/paroling authority for possible recommendations/extension of supervision <input type="checkbox"/> Await outcome/update of new pending charges <input checked="" type="checkbox"/> Notification purposes only - Continue to supervise <input type="checkbox"/> Other requests/recommendations - provide explanation below			
<b>Additional Information:</b>			
<b>Other Attachments:</b>			
Violation paperwork - [REDACTED]104885-Sanction.pdf			
Supervising Officer/Location: [REDACTED]	Date: 04/26/2018	Compact Administrator / Designee: [REDACTED]	Date: 04/26/2018





# Interstate Commission for Adult Offender Supervision

## PROGRESS REPORT

To: [REDACTED]	Date: 04/19/2018	Type of supervision: <input checked="" type="checkbox"/> Parole <input type="checkbox"/> Probation	Is this case: <input checked="" type="checkbox"/> Registered Sex Offender <input type="checkbox"/> Victim sensitive
From: [REDACTED]	Phone #: [REDACTED]	Fax #: [REDACTED]	

### OFFENDER INFORMATION

Offender's full name (last, first, MI): [REDACTED] Justin Ryan	ICOTS Offender Number: 6 [REDACTED] Sending state #: 6357588 Receiving state #: 104413	ICOTS Case Number: 8 [REDACTED]
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AKA: Justin [REDACTED]

SS #: [REDACTED]	FBI #: (if available) [REDACTED] 8	Sex: M	Race: White	DOB: 04/09/1977
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Type of Report:  Annual (*Historical Only*)  As requested

Address: 2423 South 18th Street

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]
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### HOME/LIVING SITUATION:

### EMPLOYMENT:

Company: Leavenworth Cafe

Address: 2417 Leavenworth Ave,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]
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Supervisor: Tony Caniglia      Job Title: Dishwasher

Company: [REDACTED] Staffing

Address: 713 S 16th street,

City: [REDACTED]	State: [REDACTED]	Zip: [REDACTED]	Telephone: [REDACTED]-344-4848
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Supervisor: Maria      Job Title: Labor

**ADDITIONAL CONDITIONS IMPOSED BY THE RECEIVING STATE**

Standard Conditions: Unsigned Parole Agreement with Sex Offender Treatment/Aftercare  
Other: Register as a sex offender within 3 days of arrival in [redacted] Actual length of registration to be determined by the [redacted] State Patrol. Troop A Headquarters - 4411 South 108th St. - [redacted]. PH: [redacted]

Special Condition: Sex Offender conditions (Attach with check marks of all that apply.)  
Supervision Fees: \$25.00 per month programming fees(Fees waived while on Electronic Monitoring)

Other: Required DNA testing at parolee expense in amount of \$25.00  
Standard Conditions: [redacted] Interstate Conditions

Other: Electronic Monitoring to include costs (Attach EM Agreement)  
Sex Offender Treatment

**PROGRESS UPDATE ATTACHMENT DESCRIPTIONS:**

**COMPLIANCE WITH CONDITIONS OF SUPERVISION**

**CONDITIONS IMPOSED BY [redacted]**

Conditions Violated:  
Conditions Updated:  
No Change:  
State Standard Conditions  
Description/update on conditions imposed by [redacted]

**CONDITIONS IMPOSED BY [redacted] :**

Conditions Violated:  
Conditions Updated:  
No Change:  
Other, Supervision Fees, Other, State Standard Conditions, Other, Sex Offender Treatment, Special Condition  
Description/update on conditions required by [redacted] :

**ADDITIONAL CONDITIONS OF SUPERVISION IMPOSED BY [redacted] :**

Conditions Violated:  
Conditions Updated:  
No Change:  
Description/update on additionally imposed conditions:

**INCENTIVE AND CORRECTIVE ACTIONS**

Incentive Actions: None  
Corrective Actions: Report violation to sending state through Progress Report, Increased drug screens  
Other, describe:  
Attend Relapse Group weekly

**RECOMMENDATIONS/RESPONSE**

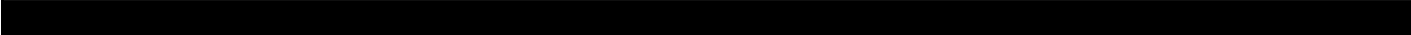
- Consider early termination of supervision for good behavior
- Remove conditions/requirements for good behavior
- Review status with the sentencing/paroling authority for possible recommendations/extension of supervision
- Await outcome/update of new pending charges
- Notification purposes only - Continue to supervise
- Other requests/recommendations - provide explanation below

**Additional Information:**

Client Self admitted to using Marijuana on 3/27/2018 and it was determined to place him in Relapse Group. On 4/10/2018 Client admitted he smoked Methamphetimes. Substance Evaluation was completed and it was determined to continued his attendance in Relapsed group. PO Recommended Mr [redacted] continue on supervision in [redacted] and follow recommendation on Sanction agreement and Substance Abuse Evaluation.

**Other Attachments:**

Attached Sanction Agreement and Substance Evaluation - [redacted] SantionsAgreemntandEvalRecommedation.pdf



Supervising Officer/Location: [redacted]	Date: 04/19/2018	Compact Administrator / Designee: [redacted]	Date: 04/19/2018
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