

ARIZONA DEPARTMENT OF CORRECTIONS

Inmate Disciplinary Report

Please PRINT or TYPE all information

Dale example: (mm/dd/yyy

COPY

Case Number 17-A14-0705

		0,0	Oue Oue	e Maniper [] MI	9-0103	
INMATE NAME (Last, First M.I.) (Please)	a print) ADC NUMBER			INSTITUTION/UI	ISTITUTION/UNIT	
Karban	Karban 234332			ASPC-Eyman/COOK		
CHARGE: GROUP NUMBER AND	TITLE					
36B Violation of Any Published Depart	aitment or Institut	ion Rule			.,	
1. Statement of Violation (State fully t	he facts and circumste	anges of the violation in	cluding the means by which the	Inmale was advised of the o	harne(s)).	
On 9-2-2017 at 1545 hours, I COII O visitor, Standard Maller' right thigh. I at Karban approached me and asked n give anyone else a warning for any k touching but that there is nothing in p	strander #11433 dvised him that the ne if I had a perso ind of inappropria	observed Inmate here is no touching onal vendetta again ate touching in Vis	Karban #234332 with his In visitation except for h nat him. I told him that I o	outer left thigh presso olding hands. After his	ed up against his s visitor left, Inmate	
DATE/TIME OF VIOLATION	REPORTING STAFF NAME (Lest, First M.I.) (Please print)			SID NUMBER		
09/02/2017 / 1545	Ostrander			OJR5		
SIGNATURE			DATE/TIME COMPLET			
7100			9/2/17 1 1635 hours			
DISPOSITION N		14-14	DATE/TIME REVIEWED			
Formal			9-2-17/1640	-		
SHIFT SUPERVISOR REVIEW BY	ast, First M.I.) (Please	pini) SIGNATU			DATE	
MC MONEY		INXX	MB~		9-21)	
Accepted Declined		DATE 07 07	DELIVERING OF	FICER SIGNATURE	DATE: 09 07 17	
III. Report of Investigation FE	LONY VIOLATIO	ONS ONLY - SEE	ATTACHED (Use form #8	: ::::::::::::::::::::::::::::::::::::		
NVESTIGATING OFFICER (Last, First M.I.) (Please print) SIGNATURE			1	DATE INVESTIGATION COMPLETED 9/15/17		
V. Disposition: This case was hand Felony Violation: Refer to Discipling Informal Resolution Dismiss		☐ Misden cer	neanor Violation: Reaso	n for finding of guilt:	Di Sa	
	n eprimand etum/Forfeit Con		Other .			
-	una niune – +	Etha manute	land that the street of the street			
For Misdemeanor Violations Only: Inmate on NMATE SIGNATURE	was giveri a copy o	r me resuits and adv	isea inat effective date, he/			
AINTHE SIGNAL OUT	20			DATE/TIME	1	
COORDINATOR'S NAME (Last, First M.I.,	(Please print) S	IGNATURE		DATE/TIME		
	, care planty			DATETIME	1	

Distribution: Coordinator to make two copies of form; Original to Master Record, File Copy to Inetitutional File, Copy to Inmate

STATE-000000016

803-1 10/16/16



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Continuation Sheet

To be used as a continuation for all reports. Indicate sections being continued.

ate		Report Num	ber	
9/02/2017				
n visitation. I handed him a copy of t old me that he already had a copy fo anbery at 1605 hours on 09/02/201	the visitation rules that a om past warnings that v 7. This report was writte	re directly printed from vere given to him. Inm n by COII Ostrander #	n the policy. Inmate refused nate Karban was verbally pla #11433 on 09/02/2017 at 163	to take the handout and ced on report by COII 5 hours. End of report.
		E.		*
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oyee Name (Last, First M.I.)	The state of the s			
Ostrander	comployee signat	ure and Badge Numb	Date 9/2/	2017
L Z DIA CULICVIA	1	~ ~	0////	/ 1.77 /

CASE NO. 19-cv-04377-DW	Lv
Stephen F. Karban	
VS. Vivian Baliterra	
PLAINTIFF'S EXHIBIT 3	
DATE:	IDEN.
DATE:	EVID.
BY:	
Deputy Clerk	