INMITE REQUEST TO STAFF

TO: MR. BILBET: 515,

ACCORDING TO INMATE DISCIPLINE PROGRAM # 335 STATES: COMMUNICATING GANG AFFILIATION; PARTICIPATING IN GANG RELATED ACTIVITIES; POSSESSION OF PARAPHERNALIA INDI-CATING GANG AFFILIATION.

- · PLEASE EXPLAIN WHAT EXACTLY CONSTITUTES A GANG S
- · AND COMMUNICATING GANG AFFILIATION 5
- · PARTICIPATING IN GANG RELATED ACTIVITIES 5
- · POSSESSION OF PARAPHERNALIA INDICATING GANG AFFILIATIONS

THANK U!

T. SILVERSTEIN #14634-116, B-309



1. 20

INFORMAL RESOLUTION FORM

Notice to inmate: Inmates	nave the responsibility to use this Program in Good Fait h and in
an Honest and Straightfor	ward manner.
Inmate Name: THOMAS SV. Unit: D	No. 14631-116 Date: 11-20-17
NOTICE TO INMATE: You are BP-229(13), you must attempt Counselor. Please follow the statements.	advised that normally prior to filing a Request for Administrative Remedy, to informally resolve your complaint through your Correctional eps listed below:
1. State your complaint (s	igle complaint or a reasonable number of closely related issues):
	NOT ANSWERING MY 10-1-17 IMMATE RE-
QUEST TO STA	FLIEE ATTACHITENT.
page. You must also returned with the rest	ed, you may use up to one letter size (8 1/2 x 11) continuation submit one copy of supporting exhibits. (Exhibits will not be onse to BP-229(13) responses.))
2. State what resolution y	expect: ANSWER MY REQUEST TO STAFF'SO I
	THEY CONSIDER A RULE VIOLATION
	TAFFS, CAPRICIOUS INTERPRETATION.
Inmate's Signature: 7,54	Date: 11-26-17
Counselor's Signature:	2/L Date: 11-28-17
Department Involved: 52	Date Assigned: Due Date:
Department's Response reg	ording Complaint: Spoke with SIS, they Stated
	your copout and Have addressed all these
	everal times when They spoke with you at your coll.
Department Head Signatu	
Unit Manager's Review:	Date: 1/28/T/
Informally Resolved:	Date:
· BP-8 IS	SUED BP-8 RETURNED BP-9 ISSUED BP-9 RETURNED REMEDY CLERK
	11-24-17 11-29-17 12-1/-/7
TIME	
COUNSELOR 5	31L SIL 3/L
	# 913144 92500
FCC: 1330.18B	Administrative Remedy Program Attachment 1

REQUEST FOR ADMINISTRATIVE REMEDY

Federal Bureau of Prisons

rederal Bureau of Frisons				
Type or use hall-not	int pen If attachments are	needed, submit four copies. A	dditional instructions o	n reverse.
From SILVERSIEIN,	Hemas, E.	14634-116	D	FLORENCE
- COMPANIE THE COMPANIE	A MINISTER TO TAILUIT A I	REG. NO.	UNIT	INSTITUTION SIS IN HO ADD =
Part A- INMATE REQUEST A RESSED ALL THE 155W THAT THESE 155WES A ARE SPECIFICALLY,	RAISED IN	ED IN WEITING	SOIKNOW I	WHAT THERULES
ARE SPECIFICALLY, OPINION OF WHAT I	DIATES THE	RULE.		
Part B- RESPONSE		Thomas	SIGNATURE OF REDECT 11	QUESTER IVED 2017
DATE			WARDEN OR REGIONA	
If dissatisfied with this response, you may ap	ppeal to the Regional Director. Yo	ur appeal must be received in the Reg	ional Office within 20 calend CASE NUMBER: _	925000-F1
ORIGINAL: RETURN TO INMATE			CASE NUMBER:	The same and the s
Part C- RECEIPT				
	RST, MIDDLE INITIAL	. REG. NO.	UNIT	INSTITUTION
SUBJECT:	Ш			(3)

USP LVN

DATE

PRINTED ON RECYCLED PAPER

REJUCTION NOTICE - ADMINISTRATIVE REMEDY

DEC 2 0 201

DATE: DECE

FROM: ADMINISTRATIVE A HEDY COORDINATOR

FLORENCE ADMAX US

TO : THOMAS EDWARD SILVERSTEIN, 14634-116

FLORENCE ADMAX USP UNT: D QTR: D03-110L

PO BOX 8500

FLORENCE, CO 81226

FOR THE REASONS LISTED | BELOW, THIS ADMINISTRATIVE REMEDY REQUEST IS BEING REJECTED AND RETURNED TO YOU. YOU SHOULD INCLUDE A COPY OF THIS NOTICE WITH ANE FUTURE CORRESPONDENCE REGARDING THE REJECTION.

: 92500**þ**∦F1 ADMINISTRATIVE REMEDY REQUEST REMEDY ID

DATE RECEIVED : DECEMBER 11, 2017 SUBJECT 1 : OTHER OPERATIONS

SUBJECT 2

INCIDENT RPT NO:

REJECT REASON 1: YOUR REQUEST IS UNTIMELY. INSTITUTION AND CCC REQUESTS

(BP-09) MUST BE RECEIVED W/20 DAYS OF THE EVENT COMPLAINED

ABOUT

REJECT REASON 2: PROVIDE STAFF VERIFICATION STATING REASON UNTIMELY FILING

WAS NOT YOUR FAULT.

REJECT REASON 3: YOU MAY RESUBMIT YOUR REQUEST IN PROPER FORM WITHIN

5 DAYS OF THE DATE OF THIS REJECTION NOTICE.

: YOU ARE FILING AN ADMINISTRATIVE REMEDY 71 DAYS REMARKS

AFTER YOU SENT A REQUEST TO STAFF AND DID NOT

RECEIVE A RESPONSE.

THIS IS WHAT THEY DO WHEN THEY DON'T WANNA ANSWED A COMPLAINT



FEDERAL CORRECTIONAL COMPLEX FLORENCE, COLORADO INFORMAL RESOLUTION FORM

Notice to Inmate: Inm	ates have t	he responsibili	ty to use this l	Program in God	od Faith and in	
an Honest and Straig						
Inmate Name: There	15 5/2Va	ERSTEIN	_ Reg. No. <u>/</u> -	1634-116		
Unit: D	_		Date: _/	21-17	-	
NOTICE TO INMATE: Y	nu are advis	ed that normally n	ior to filing a Re	quest for Adminis	trative Remedy	
BP-229(13), you must a						
Counselor Please follow						
1. State your compla	nt (single co	omplaint or a reas	sonable numbe	r of closely relat	ed issues):	
1. State your compla MY BY 9 92200 FI WAS A SUBMITTING A WINGTE B HIND ANNILE TIME, BU	FULLST TO SI	REF. TONGOVOUNDE	EDF HOW LONG.	START HAVE TA	REPLY, SO I GAV	E
HIM AMPLETIME. BU	HEDID:NO	TRESPOND.SAL	FILED POLICE	VSTATES I AND	STATTEMPTY	0
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PLEASE PECANSIDES	THIS POLI	CY AMBIVALI	NEE + ADVI	CEMEDFHON	VLONG ISHOU	00
12 1 FOR STAFF TO .	INSWER -	A'COPOUT' + A	ILLEIN MY B.	RG TO ADDRE	SSED. THANK U	· · ·
(If more space is	needed, yo	u may use up to	one letter siz	ze (8 1/2 x 11) c	ontinuation	
page. You must	also submit	t one copy of su	pporting exhi	bits. (Exhibits	will not be	
returned with the				7		
						/
2. State what resolut	n you expe	ct: RECONSI	DER FILLIN	GMY ORIGIO	NALCOM -	
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ANSWER A						
2 WAS GIVEN THIS	BASKTS	RESUBMI	7 122-18		102109.	/
Inmate's Signature: 77				1-2-17	Description Action	/
	1	000000000000000000000000000000000000000	Date.	24. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		/
Counselor's Signature:	95-7	216	Date:	1-8-18		/
A	,					/
Department Involved:	DMIN KE	Date	Assigned:	Due	Date:	
		,	1 3			
Department's Response	regarding C	omplaint: New	01 10	Stato	a /	
resolution a	1 Su	u, and	Date	Plante r	esuhuit!	
this 16500 11	5 0,1000	ly boar and	alessad a			1 -
This issue 1/2 and will not be	rew.151d	ernol.	MIESSEW UN	a rejection	POI CINTIN	Chen
Department Head Sign				Date:		
Unit Manager's Review	v:			Date: 1/8	118	
Informally Resolved:		1100		Date:	110	
	P-8 ISSUED	BP-8 RETURNED	BP-9 ISSUED	BP-9 RETURNED	REMEDY CLERK	
	2.21-17	1-3 1%		1/11/18		
TIME	(3)					
COUNSELOR	(2	516		w		
15					0 1	10

Administrative Remedy Program

Attachment 1

FCC 1330.18B

REQUEST FOR ADMINISTRATIVE REMEDY

Federal Bureau of Prisons

Type or use ball–poin	pen. If attachments are r	needed, submit four copies. A	dditional instruction	s on reverse.
lunen emal	Hamas E	14634-116	0	FLORENCE
From: SILVER STEIN, I LAST NAME, FIRST, M	IDDLE INITIAL	REG. NO.	UNIT	INSTITUTION
B A DIMATE DECLIECT &	DO DESBANSES	CTATES THIS ISSUE	HAS ALRE	EN NOR TOLD
PART A- INMATE REQUEST DE RESSED. PLEASE AD HOW LONG I SHOULD				
PO FILING BERORS	ITS UNTIN	FIY	1111 60%	
PO FILING, BEFORE PLEASE GIVE ME TO WAIT FOR STA	THE POLICY S	TATING HOW	MUCH TIN	TE I HAVE
TO WAIT FOR STA	FTOANSU	ER LOPOUTS	· THANK	U;
1-10-18		Thorn	as E. Silv.	Erstein
DATE			SIGNATURE OF	REQUESTER
Part B- RESPONSE			RECE	M/FD
			MEGE	a H W Bases Bases
			JAN 1	1 2018
			ADX Ward	en's Office
DATE			WARDEN OR REGIO	
If dissatisfied with this response, you may app	eal to the Regional Director. You	ur appeal must be received in the Reg	gional Office within 20 ca	lendar days of the date of this response
ORIGINAL: RETURN TO INMATE			CASE NUMBER	(: 10/0///
			CASE NUMBER	R:
Part C- RECEIPT				(6)
Return to:	ST, MIDDLE INITIAL	REG. NO.	UNIT	INSTITUTION
	, MIDDLE INITIAL	NLD. 110.		
SUBJECT:	H			

USP LVN

DATE

PRINTED ON RECYCLED PAPE

RECIPIENT'S SIGNATURE (STAFF MEMBER)

BP-229(13) APRIL 1982 BP-229 Response

Case Number: 928141-F1

Your Request for Administrative Remedy dated January 10, 2018, and received in this office January 11, 2018, has been reviewed. Specifically, you request the policy which states how much time you have to wait for staff to answer a request or informal resolution.

A review of the issue raised in your Request for Administrative Remedy has been conducted. The results of the review revealed Program Statement 1330.18, Administrative Remedy Program, Section 8, states, the deadline for completion of informal resolution and submission of a formal written Administrative Remedy Request, on the appropriate form (BP-9), is 20 calendar days following the date on which the basis for the Request occurred. Furthermore, Institutional Supplement FCC 1330.18B, Administrative Remedy Program, Section V, Subsection C, states, "Ordinarily, the unit staff will complete the attempt at informal resolution within three (3) days, excluding weekends and holidays." The unit Correctional Counslor will then forward the documentation to the Unit Manager for review. Subsection D, states, If further efforts at Informal Resolution are deemed necessary or helpful, the Unit Manager will assist the Correctional Counselor in continued efforts to resolve the complaint. If Informal Resolution is not possible, the Unit Manager will sign the completed form and return it to the Counselor, who may then give the inmate a BP-229(13) form, if he so requests.

Based on the above, you will need to complete your Informal Resolution Form in a timely manner so you can submit your Administrative Remedy Request (BP-9) no later than 20 calendar days following the date of incident.

Accordingly, this response to your Request for Administrative Remedy is for informational purposes only. In the event you are not satisfied with this response and wish to appeal, you may do so within 20 calendar days of the date of this response by submitting a BP-230(13) to the Regional Director, Federal Bureau of Prisons, North Central Regional Office, Gateway Complex, Tower II, 8th Floor, 400 State Avenue, Kansas City, Kansas 66101-2492.

P. Klein, Acting Warden

2-1478

Date

