

RANT TO RAVE

6 RTR 9.2016
Blog entry

Part 2.

Our Present.

our current state of existing
AS negro-ethnic Being... IS
AS THE ROAD OF LIFE we TRAVEL
down. It's only so many ways
we CAN PLAY THIS GAME. And
IT BOILS DOWN TO TWO ways...
The Right way... Praying that
you don't MAKE THAT MISS-move

our || Path, //
our || History, //
our || Present, //
our || Presence, //
our || Dominator, //
our || And future //
The
***** Race.

That Bring your time of existing, your Health,
wealth, to A SAD end. And it's The wrong
WAY... The way - That you play The Game,
Violating All the Rules and which you Battle
excessively to ~~maintain~~ ^{maintain} your time for existing,
your Health, wealth Because you know that at
A Blink of An eye you will Loose it All...
IS NOT our present state, Litter with stains
OF Misfortune and so forth,, with the ~~Horror~~
HORRORS of ... ERADICATION,, ethnic
ERADICATION, MANIPULATION... And... YES!
our DAY Light.

my Rant
See the kite
attach them
ASK your self
That question.
Then who is
The person who
is The identify
of The signature
on The kite.
I did AS The
operator, advise,
and Resubmitted
The Kite...
To That person..
I dont know
How many More
Time I'll be able
to send out these
Blogs. The Institution
official keep hinting
that they will
cancel the rest
of the mail.
Privileges I
have.. That
contact to
society.


LEVEL I - INITIAL GRIEVANCE
NIVEL 1 - QUEJA INICIAL

Name: NOMBRE:	Last APELLIDO	First PRIMERO NOMBRE	Middle 2DO NOMBRE	DOC Number NUMERO DOC	Facility/Office FACILIDAD	Unit/Cell UNIDAD/CELDA
	Phipps	Linniell		718276	MCC/IMU	122
PART A - INITIAL GRIEVANCE/PARTE A - QUEJA INICIAL				Date Typed 8/26/16	Date Due 9/12/16	
<p>I WANT TO GRIEVE / QUIERO QUEJARME DE: I follow the who, what, when, where and why when filing the complaint. I sent the kite to the main institution library. I explain that I'm filing the grievance because the library official refuse to send me the requested information. The name of the medical official at this institution. The kite I sent was dated 7-26-16. I filed a grievance within the time limitation. The grievance was filed on 8-3-16. Staff members are require to tell inmates their name. And the name of other officials at the institution for which they are house at. I filed the grievance within the 20 day period of the incident. I have the kite if you want to see it. It has become difficult to get grievance envelopes so you'll have to come and get it... sorry...</p> <p>SUGGESTED REMEDY / REMEDIO SUGERIDO:</p>						
/S/ Brandi [REDACTED]	8/26/16	/S/ Linniell Phipps	8/26/16			
Grievance Coordinator Signature	Date	Grievant Signature	Date			
FIRMA DE COORDINADOR DE QUEJAS	FECHA	FIRMA DE QUEJANTE	FECHA			

PART B - LEVEL I RESPONSE / PARTE B RESPUESTA PRIMER NIVEL	
<p>During this interview I contacted MCC Librarians Jason [REDACTED] and David [REDACTED] and reviewed your complaint forms.</p> <p>You state you sent a request to the main institution library at MCC asking for medical staff names and that the library staff refuse to give you the requested information.</p> <p>MCC has two main libraries, one at WSRU and one at TRU. I checked with both MCC Librarians regarding your kite request. Your kite was not received at either main Library at MCC.</p> <p>I recommend that you resubmit your request and address it to Librarian Mr. Faux at the WSRU Library. He stated once he receives your request he will process it.</p>	
<p>[REDACTED]</p> <p>Brandi [REDACTED]</p> <p>Grievance Coordinator Signature COORDINADOR DE QUEJAS</p>	<p>9/7/16</p> <p>Date FECHA</p>
<p>You may appeal this response by submitting a written appeal to the Coordinator within five (5) working days from date this response was received. Ud. puede apelar esta respuesta al someter una apelación por escrito al coordinador dentro de cinco (5) días de trabajo de la fecha en que esta respuesta fue recibida.</p>	

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RANT TO RAVE

Our presence

our presence in this world. In the European white society IS the most precious priceless resource ever known to the mankind, Humankind Race. without us, they - fall into a state of despair, utter sickness... In a structural control society... we as human being don't really need our society to be utterly structured... AS the Europeans, white-mankind, Human-kind Society...

It's because we as God chosen being most surely was created to acknowledge the actual concept of life. colleges or schools of intellectual comprehension and evolution, modern industrialize sophisticated dwelling, places of healing, security forces and an judicial systems ~~that~~ aid us into the evolution process, IS a must.

But we need not have alot of laws, but because we must go into the ~~evolution~~ process of evolution - and - that process include the human-kind species it is now a must.

or us and the precious resources of this planet will be depleted.

To be continue.



my rant
THAT'S IS A
CONTINUANCE THING.
But because these
Individual are CLOS
They will not be
Brought up on
charges that
violate the state
Prea Laws.

NO MENTOR OR
SHERIFF or Police
want Be coming
To Talk to me.

It's that code
Blue... I
Bleed Blue
Bull-shit, ASS
Wall of Social
Privilege.

any and any
Person else
only Justice
In this matter
It's a settlement
from a civil
complaint and
You Resorting
TO Vigilante
Justice...
If you so
Dare to...
But it just may
change you your
Life...



LOG I.D. NUMBER
116617179

OFFENDER COMPLAINT

CHECK ONE: Initial Emergency Appeal Rewrite

RESIDENTIAL FACILITIES: Send completed form to the Grievance Coordinator. Explain what happened, when, where, and who was involved or which policy/procedure is being grieved. Be as brief as possible, but include the necessary facts. Use only one complaint form. A formal grievance begins on the date the typed grievance forms are signed by the Coordinator. Contact a Department employee to report an emergency situation or to initiate an emergency complaint. Please attempt to resolve all complaints through the appropriate Department employee(s) before pursuing a grievance.

NOTE: Complaints must be filed within 20 working days of the incident. Appeals must be filed within 5 working days of receiving the response. Include log ID # on rewrite or response being appealed.

Last Name PHIPPS	First Linnell	Middle J	DOC Number 718276	Facility/Office MCC	Unit/Cell M122
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COMMUNITY SUPERVISION: Send completed copies of this form directly to: Grievance Program Manager, Offender Grievance Program, Department of Corrections, P.O. Box 41129, Olympia WA 98504-1129.

MAILING ADDRESS: STREET OR P.O. BOX	CITY, STATE	ZIP CODE	TELEPHONE
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COMPLAINT: On 8-30-16 C/O Avert and Thorton intentionally sexually harass me while I was standing at 122 cell door waiting for it to be open and me to enter into the cell. C/O Avert brush my butt with his hand stand on the right hand side and C/O Thorton use a cuff key to touch the inside of my butt area. I was inform of this by other C/O. C/O Smith was the camera man I felt something by I had no idea that this was what had occur. It was so slight of a touch, I thought nothing of it. But then correctional officials who inform me of this would not lie about this.

SUGGESTED REMEDY: I would like this incident investigate. And I would like the Snohomish county sherriff or Monroe police to be contacted and charges file for sexual harassment or assault. Mandatory

Signature: *[Signature]* Date: 8-31-16

GRIEVANCE COORDINATOR'S RESPONSE Your complaint is being returned because: <input type="checkbox"/> It is not a grievable issue. <input type="checkbox"/> You requested to withdraw the complaint. <input type="checkbox"/> You failed to respond to callout (sheet) on _____. <input type="checkbox"/> Administratively Withdrawn _____. <input type="checkbox"/> The formal grievance/appeal paperwork is being prepared.	Facility/Office MCC MUU	Date Received 9/2/16
	<input checked="" type="checkbox"/> The complaint was resolved informally. <input type="checkbox"/> Additional information and/or rewriting needed. (See below.) Return within 5 working days or by: _____. <input type="checkbox"/> No rewrite received _____. <input type="checkbox"/> Sent to _____ (facility) on _____ (date).	

EXPLANATION:

Your complaint contained allegations related to PREA and has been sent to the PREA unit for consideration of investigation. Per page 24 of the grievance manual, your complaint is considered "informally resolved" in the grievance process. If the PREA unit determines the issue is not PREA, you have the option of refiling a complaint to the grievance office once you receive notification from the PREA unit. **Sent to the Lt.**

Coordinator's Name (print) B. [Redacted]	Coordinator's Signature <i>[Signature]</i>	Date 9/2/16
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PAPELETA DE PETICIÓN DEL INTERNO

OFFENDER NAME (PRINT) NOMBRE DEL INTERNO (LETRA DE MOLDE) PHIPPS Linnell		
DOC NUMBER/NÚMERO DOC 118276	FACILITY, UNIT, CELL/FACILITY IS INSTALACIÓN UNIDAD, CELDA MCC IMA D-279	DATE/FECHA 7-26-16
DESIRE INTERVIEW WITH OR ANSWER FROM/DESEA ENTREVISTA CON O RESPUESTA DE LIBRARY... M.I.		

Interpreter needed for _____ (language).
 Necesito intérprete para _____ (idioma).

REASON/QUESTION
RAZÓN/PREGUNTA

Will you send me the NAMES of the
 medical officials that fulfill this
 position at MCC.
 (1) The Health Authority Officer
 (2) the members of the Case Review Com-
 mittees
 (3) the chief medical officer
 (4) the facility clinical discipline leader
 (5) the clinical monitor
 (6) the Director of Pharmacy.
 Please respond ASAP...

SIGNATURE/FIRMA 	DAYS OFF/DÍAS LIBRES 7-26-16 JUL 29 2016
RESPONSE RESPUESTA	

YOU SHOULD OBTAIN THIS INFORMATION
THROUGH YOUR COUNSELOR.

RESPONDER/PERSONA QUE RESPONDE 7	DATE/FECHA 7/29/16
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OFFENDER'S KITE

PAPELETA DE PETICIÓN DEL INTERNO

OFFENDER NAME (PRINT) NOMBRE DEL INTERNO (LETRA DE MOLDE)		
PH# PPS Linnell		
DOC NUMBER/NÚMERO DOC	FACILITY, UNIT, CELL/FACILITY IS INSTALACIÓN UNIDAD, CELDA	DATE/FECHA
718276	MCC 1204	3/3/16
DESIRE INTERVIEW WITH OR ANSWER FROM/DESEA ENTREVISTA CON O RESPUESTA DE		
Counselor [REDACTED]		

Interpreter needed for _____ (language).
 Necesito intérprete para _____ (idioma).

**REASON/QUESTION
RAZÓN/PREGUNTA**

SO I WROTE THE INITIAL STORE ON 3-1-16 AND THEY RESPONDED ON 3-3-16 SAYING BRING IT UP WITH MY TIER REP. WHY THEY SAID IT YOU'LL HAVE TO ASK THEM. BUT I REQUESTED THAT THEY PUT A CHEAPER BAR OF SOAP NONE INDIGENT ON THE STORE ROTATE CHILI (VEGETABLE) PUT MOUTH WASH ON THE STORE AND ~~change~~ dandruff shampoo. SO, TO ADD TO THIS LIST GARLIC POWDER, ITALY AND HOT SAUCE ITALY AND ROTATE A PACK OF BAG OF COOKIES, PUT I NONE INDIGENT TOOTH PASTE (THE DO IT ALL)

SIGNATURE/FIRMA

DAYS OFF/DÍAS LIBRES

[Handwritten Signature]

5-13-16

**RESPONSE
RESPUESTA**

[Handwritten Response]

RESPONDER/PERSONA QUE RESPONDE

DATE/FECHA

Distribution: **WHITE/YELLOW**-Responder, **YELLOW**-Return to Offender with Response, **PINK**-Offender keeps
 Distribución: **BLANCA/AMARILLA**-Persona que responde, **AMARILLA**-Devuelva al interno con respuesta, **ROSA**-Interno