

# \*ATTENTION\*

All the following posts (18 pages) had to be snuck out to be posted, AS you will read, I have been illegally blocked from writing to Between The Bars. The facility I am at is scared of what I am saying. My posts after this may take longer to get posted but I will keep trying to get them out as soon as possible.

Thank you all and feel free to contact me at: John Peana  
277888  
STARC  
9005 Old River Rd.  
Marcy, NY, 13403

I REFUSE TO LET THIS PLACE SILENCE ME OR VIOLATE MY 1<sup>st</sup> AMENDMENT RIGHT.



<b>LOSS OF PRIVILEGES</b>	Resident Name: [REDACTED]
	C Number: [REDACTED]
	Bridgeview ___ Oakview <u>x</u> Unit: 405

Date of Event: 12/4/23

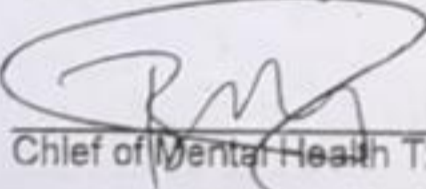
Brief Summary of Behavioral Events: [REDACTED]

Treatment Team Recommendation:  
Complete a Thinking Report and present it in Treatment Groups.

PRIVILEGE LOST	PRIVILEGE WILL BE RETURNED:
-Dorm room	-After tx team reviews in 7 days.

  
 Treatment Team Leader/Designee Date 12/4/23

Approval of Tx Team Recommendation:  
 Loss of Privilege as described above  
 Loss of Privilege as described below

  
 Chief of Mental Health Tx Services/Designee Date 12/06/2023

PRIVILEGE LOST	PRIVILEGE WILL BE RETURNED:

\*STARC residents may appeal this decision through the formal Resident Complaint/Concern process.

OMH PHI

Served: 12/17/23

On 12/6/23 the following happened.

1.) I sent Chief Jensen the following letter:

"I write you today after being told to by risk management to request a copy of: 1.) Safety Report/Photos,  
2.) Contraband Report/Photos  
pertaining to the search done on my room on 11/7/23."

2.) I sent Alyssa Luley, Director of Risk Management the following letter:

"I write this 2<sup>nd</sup> follow up letter to my 11/15/23 Objection to Care and Treatment pertaining to a strip search on 11/7/23. To date I have not received a reply to it and want to know why."

3.) I received a letter from Patient accounts in reply to my 12/3/23 letter stating that the missing money has been put back in my account.

4.) To my amazement my "Jack The Lad" magazines were approved to have in the facility. On the other hand my "Cineaste" Magazine and "The New York Review of Books" were denied. This whole situation is very confusing to me as the denied magazines/periodicals have nothing inappropriate in them.

5.) Social Worker Cordero came to question me about why I want to talk to Dr. Fred Berlin, what I was going to talk to him about, what I want to get from speaking to him and a bunch of other questions. Dr. Berlin is a psychologist and I should not have to explain anything about what we are going to talk about or want to talk about. According to the supposed "Rights of Residents" I have the right to communicate with anyone inside or outside the facility, so why am I being questioned if I have that right? The truth is, the facility is scared of what dirty secrets I'll let out by speaking to him.

On 12/7/23 the following happened.

1.) I sent a letter to the 405 TX Team that said:

"I write today to:

1.) request a time cut on my 28 days loss of regular privileges,  
2.) request that whenever Mr. Cordero comes to meet with me that another TX Team member (Ric Stern, Ms. Vuong, Tr. Dawes) be present."

On 12/8/23 I received 3 letters. They were from:

1.) Alyssa Luley, Director of Risk Management and it said in part:  
"Risk Management has received and reviewed your correspondence dated December 5, 2023 regarding concerns with a previous letter you submitted dated November 15, 2023. Concerns regarding orders for strip searches was previously addressed in an appeal from the Executive Director. Use of the BOSS chair and hand held detector will not assist in the search on confiscation of all forms of contraband. At the point of the search in question, there was concern for contraband in general, hence, a strip search being conducted."

2.) Chief Brendon Stooks, CNYPc Safety Department and it said in part:  
"In response to your letter dated 12/05/23, requesting Safety and Contraband Reports Completed for a search done on 11/07/23 in your room. In order to receive copies of reports completed by the Safety Department, you will need to complete a FOIL request."

3.) Justin Lopata, Chief of Service/FOIL officer and it said in part:  
"This letter is in response to your November 29, 2023, letter regarding your November 12, 2023, Freedom of Information Law (FOIL) request for a copy of the policy governing searches with the STARC program, FOIL # 23-62. Please note that if you wish to appeal any part of your request, you must do so within 30 days."

Then on 12/11/23 I sent:

1.) a appeal to Daniel Tope, Executive Director in reply to Alyssa Luley's reply to my objection to Care and Treatment, It said under "Please provide the reason for your appeal":

"1.) first part of Objection to care and Treatment (strip search) was not properly answered,

2.) I was specifically told the strip search was for electronic devices by Scta 2 Scott Ashley. Video/audio will prove this, The BOSS chair and hand held detectors should have been used. Strip search was excessive and a 4<sup>th</sup> Amendment Violation. I also still have not been told what the probable cause was for the search or who authorized it."

2.) a FOIL Request to Chief Brendon Stooks requesting documents per his letter to me. I also enclosed a letter with it that said in part:

"Please find enclosed a FOIL Request, I am sending it per your 12/8/23 letter telling me to, if you are not the proper person to receive this please forward it to the proper person."

3.) a Appeal to New York State office of Mental Health, C/o: House Counsel in reply to Justin Lopata's letter. It said in part: "I write today after receiving a letter dated 12/7/23 from Justin Lopata, chief of service/FOIL officer at STARC-Oakview. I would like answers to my 11/20/23 letter and all documents requested. Mr. Lopata's reply is/was inadequate."

## \* NEW YORK STATE GOVERNMENT CONTACTS \*

Please use these to complain about NY MHL Article 10 (civil confinement) and what is/isn't happening here.

- |   |  |
|---|--|
| 1.) Governor Kathy Hochul<br>The Capitol<br>Albany, NY, 12224<br>518-474-7516                     | 2.) Attorney General Letitia James<br>The Capitol<br>Albany, NY, 12224<br>518-474-7330                   |
| 3.) Danielle Tope, Executive Director STARC<br>9005 Old River Rd.<br>Marcy, NY, 13403<br>315-765- | 4.) Ann Marie T. Sullivan, NYS OPMH Commissioner<br>44 Holland Ave.<br>Albany, NY, 12229<br>518-474-2568 |
| 5.) NYS Senate<br>Legislative office Bldg.<br>Albany, NY, 12248                                   | 6.) NYS Assembly<br>Legislative office Bldg.<br>Albany, NY, 12248  |
| 7.) Senator Brad Hoylman-Sigal<br>LOB 310<br>Albany, NY, 12248<br>518-455-2451                    | 8.) Assemblymember Deborah Glick<br>LOB 621<br>Albany, NY, 12248<br>518-455-4841                         |
| 9.) Assemblymember Daniel O'Donnell<br>LOB 712<br>Albany, NY, 12248<br>518-455-5603               | 245 W. 104 <sup>th</sup> St.<br>Apt. 30<br>New York, NY, 10025<br>212-866-3970                           |

## A few side notes

1.) AS of today (12/10/23) I still have not been able to talk to Dr. Fred S. Berlin.

2.) AS of today (12/10/23) I still have not received a reply from: Worth Rises

C/o: Bianka Tylek

85 Delancey St.

2<sup>nd</sup> FL.

New York, NY, 10002

in reply to my 8/9/23 letter concerning phone prices here.

3.) I want to bring your attention to 2 Newsletters.

a.) CURE-SORT NEWS

b.) The Legal Pad

CURE-SORT NEWS is put out by: CURE-SORT

P.O. Box 1022

Norman, OK, 73070

WWW.Cure-Sort.org

The Legal Pad is Produced by: Cyrus P. Gladden II

1111 Highway 73

Moose Lake, MN, 55767

WWW.Cure-Sort.org/the-legal-pad.html

\*PLEASE SEE PAGE 6. ALSO, CONCERNING THIS\*

4.) Page 7 is what we are calling the "STARKE Shadow Prison Hierarchy of Responsibility" and it represents this facilities/Article 10's framework.

5.) Page B-1P is a letter from another resident ("D.S.") about a incident he went through on 11/7/23.

6.) AS of today (12/10/23) I have not received replies to my letters to:

a.) Senator Brad Hoylman-Sigal (9/17/23 letter)

b.) Assemblymember Debrah Glick (9/17/23 letter)

c.) Assemblymember Daniel O'Donnell (9/17/23 & 11/12/23 letter)

Concerning everything going on here (see my bullets from previous posts).

7.) Page 11 is a redacted copy of the "contract" we have to sign in order to actually take the program/groups here, if you don't sign you don't program. Does anyone find it odd that we have to sign "contracts" to take a program we are civilly committed to? What is the purpose of the "contract"?

### 8.) ATTENTION!!

The following groups need help in dealing with Civil Commitment and the Registry in all states but specifically New York. WILL YOU HELP THEM??

- 1.) CURE-SORT    (2.) NARSOL    (3.) SASH    (4.) WAR  
5.) Williams Institute    (6.) SOSEN    (7.) BYU-ACT    (8.) ACSOL

and others. Look them up and ask how you can help. please.

I THANK EVERYONE WHO HAS COME TO READ MY BLOG AND HOPE THAT TOGETHER WE CAN MAKE SOME REAL CHANGES WHEN IT COMES TO CIVIL CONFINEMENT AND THE REGISTRY.

\*This was sent to those civilly committed but I felt it would be usefull to post for others to see\*

### CURE NATIONAL CIVIL COMMITMENT

Please do your best to stay involved in efforts to address civil commitment matters. Share the enclosed information, and any other information you have, with other detainees as well as family/friends. Encourage family/friends to become involved in the monthly CURE Civil Commitment calls. We need everyone to be involved in whatever capacity they can be. We must work together to advocate for change.

With the exception of legal holidays, monthly CURE Civil Commitment conference calls are held the first Saturday of each month, beginning at 9:00 AM Central Standard Time. The calls are informal and a great opportunity for friends, family, advocates and other interested individuals to share information, ideas to advocate for change, and just to meet one another. To obtain call in information (toll free) for the monthly calls, send an email to [eldoncdillingham@gmail.com](mailto:eldoncdillingham@gmail.com). The number and code will be provided via email.

If you have concerns/questions/issues or comments regarding legal or forensic matters as to sex offender civil commitment ("SOCC") or challenges which may free you from it, Cyrus Gladden, whose address is at the bottom-left of the front page of each edition of *The Legal Pad* ("TLP") monthly newsletter, has dialoged with many in the 20 states having SOCC laws. He does not provide legal advice, but can oftentimes steer an inquiring correspondent in a direction that may prove helpful. However, Mr. Gladden asks of those who have any outside support persons(s) to first have him/her/them check the archive of past editions of the TLP appearing at: <http://www.cure-sort.org/the-legal-pad.html> for any obvious answers to your questions (s). The complete table of contents to all TLP editions to date that can be found there is searchable by word or phrase for that purpose. TLP editions are downloadable for free from this web page.

Separately, regular writers of the articles appearing in TLP are always interested in hearing from people regarding activities, concerns, etc. concerning SOCC and anything related to it. Inquiries/comments will be forwarded on to any specific writer upon request.

We must work as a group, those incarcerated and those not.

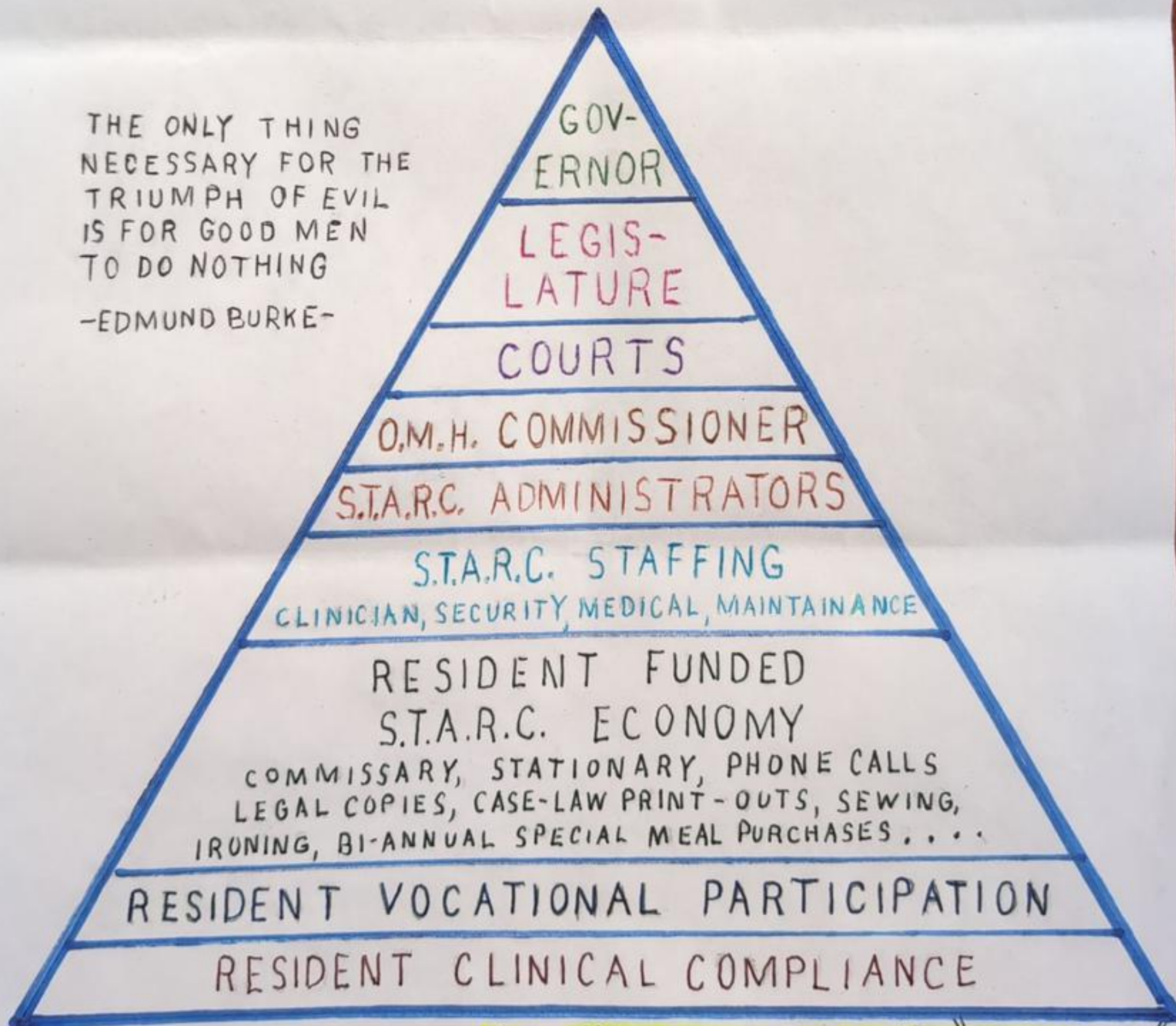
Thank you.



# S.T.A.R.C. SHADOW PRISON HIERARCHY OF RESPONSIBILITY

WITHOUT ONE OF THESE, THE SYSTEM WOULD FAIL

THE ONLY THING  
NECESSARY FOR THE  
TRIUMPH OF EVIL  
IS FOR GOOD MEN  
TO DO NOTHING  
-EDMUND BURKE-



The following is but one account of the many abusive and unlawful practices of STARC/Dakview, an DMH secure treatment facility in NYS. This facility holds civilly confined men whom in the past committed sexually based crimes and have already been punished through the criminal justice system with often long prison sentences. Civil Confinement was enacted, based upon false claims of high recidivism rates for sex offenders and the incorrect theory that forced treatment is meaningful treatment.

On Tuesday, 11/7/2023, around 5pm, as I sat in my room after the evening meal, a STARC security staff member (TA) opened my door and ordered me to go back to the messhall. As I walked there, the hallway was filled with more TAs moving all residents on the unit to the messhall. Once all residents were there I was ordered to go to the side-room/isolation-room/restraint-room

I was met there by a security supervisor (TA2) and two other TAs. I was ordered to sit and then was asked if I had any "electronic devices" on my person or in my room. I said I had a radio and television in my room. The TA2 clarified his question by saying "Cell phone or tablet" I answered no, I did not have either of these.

The TA2 then told me that I was going to be stripped and searched. I respectfully told him I would not comply, that he could not legally strip search me. The TA2 claimed he had "probable cause". I asked to see this, saying I would comply if he actually had legal probable cause. I knew he had none because I am not one who habitually breaks rules and causes problems. The TA2 said he did not need to show me probable cause to strip search me and he was not going to show me. He went on to say that if I did not comply with his orders, I would be restrained in isolation until I did comply.

To avoid being strip searched or restrained in isolation I suggested the use of the "BOSS" chair. This is a metal detecting chair you sit in to detect metal objects, like those

in electronic devices, that may have been hidden in a person's rectum. I also suggested the "wand", a handheld device that is used throughout the world at airports and government buildings. STARC owns both of these. I was refused this "least intrusive", "least restrictive" method that is actually more effective at finding metal on or inside my body.

FYI... A strip search will not detect any object, metal or not, that has been inserted into a person's bowels. The Wand and the BOSS chair will. So now I pose this question... Why would STARC choose to not use a less intrusive and humiliating method to search for a cell phone or tablet when it is more effective than a strip search?

After repeatedly ordering me to remove my clothes while I repeatedly said I would not the TAZ called for my goon squad escort to come move me to another unit where I would be isolated and restrained until I agreed to comply with being strip searched. As I was being walked off of my unit we stopped in the hallway right in front of the messhall to wait for the exit door to be unlocked. I used this opportunity to verbally alert my fellow residents confined to the messhall exactly what was going on and what the staff's intentions were.

I was immediately pressed in on by my escorts bodies I was grabbed and touched EVERYWHERE. I was pushed out of the exit door, tackled and manually restrained on my back on the floor by no less than 10 TAs. Some TAs wanted to put me into 5 point restraints. Clearer heads prevailed. They saw I never lost control, that I did not resist or fight. I was allowed to my feet. The rest of my escorted trip to where I would spend the next 3 days was uneventful.

I was allowed a mattress on the floor, a pillow, sheets and a blanket. I was not allowed to use the bathroom. I had to urinate in what I would call a child's potty chair. I was not allowed a shower or a change of clothes. I could not wash my hands after urinating or prior to eating. I could not even

wash my face or brush my teeth. Each time I asked, I was told no, that if I complied with the strip search, I could go back to my unit and my room and have all of these things

Because I absolutely did not want to defecate in a child's potty chair on camera and in front of staff, I refused to eat. My mistake was refusing to drink. I broke in my 50<sup>th</sup> hour in restraint and isolation on Thursday evening, 11/9/2023. I asked for water and in a weak moment, I asked to speak with a mental health clinician. Who knew, there were no on duty mental health clinicians after hours in a mental health facility?

Because of no clinicians being available, a TA2 was sent for. A TA I have a good rapport with was with the TA2. He talked me into allowing myself to be strip searched. This was done off-camera unlike the others on my unit. I was told I would go right back to my unit. Come to find out, I was accused of punching a TA on 11/7/2023, their justification for assaulting me I was released from isolation and returned to my unit on 11/10/2023

There are a couple more facts I must add. Five people in total were strip searched. All of the rooms were searched. Not a single cell phone, tablet, laptop or desktop was found. Most rooms were completely ransacked and left in piles on beds. Several "Contraband" notes were written. This was typically for an item not in original purchased condition (repaired or altered)

I received no misbehavior note. I was given no punishment for refusing a strip search or for assaulting a TA. Being here for 4 years, I have plenty of "Contraband" as STARC defines it. My room was hardly touched. Almost everything was in its place as I had left it. All that was taken was a fan with no face. I received no note or discipline. Curious...

D.S.

Secure Treatment and Rehabilitation Center (STARC)  
Program Expectations and Commitment Options

Resident Name:	C#:	Date: 4/12/23
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Residents in the STARC have the option and are encouraged to engage in programming at different levels as they are ready and motivated. **Engagement** in programming means that you will participate to the best of your ability in order to obtain the most benefit from treatment.

If you commit to engage in the program, you agree to meet the following expectations:

- 1) Attend all treatment groups and be prepared for transport to group or arriving to group on time. When you return to the community, the expectation is that you attend all scheduled appointments with treatment providers and/or Parole officers. You can begin preparing for this expectation now to build healthy habits. For program purposes, successful attendance is defined as attending 90% or more of your groups. Excused absences include but are not limited to outside trips, medical restrictions or serious medical issue or illness verified by the treatment team.
- 2) Listen attentively and actively to the group facilitator and members. This means being awake with your eyes open, head up and giving the physical appearance that you are paying attention. These behaviors are respectful to the individuals who are speaking and makes it clear to your facilitator(s) that you are putting effort into finding ways to apply the information to your life. You may choose not to speak on certain topics, but the minimum expectation is that you are paying attention to the group.
- 3) Behave respectfully toward other residents and facilitators. Staff and residents are working toward the same goal: ensuring that residents who participate in the treatment program have the opportunity to learn new skills in order to make changes to their thinking and behavior so that they can live safely and successfully in the community. We want all residents to have lives that they can be proud of, showing respect for each other helps us to work toward this goal. This does not mean that you will agree with everything that is said or presented in group. In fact, discussing the points of disagreement or concerns that you have is an important part of making progress in treatment. The expectation is that you show the same respect for staff and other residents as you would hope others have for you when they communicate points of disagreement with you.

THIS INFORMATION IS BEING RELEASED  
UNDER THE PROVISIONS OF NEW YORK  
STATE MENTAL HYGIENE LAW, SECTION  
33.16. CAKVIEW SECURE TREATMENT AND  
REHABILITATION CENTER ACCEPTS NO  
RESPONSIBILITY IF THE INFORMATION IS  
DISCLOSED TO OTHER PERSONS OR  
AGENCIES.

You have the option to participate in all, some or none of the following program components:

**Core Group** (up to 4 hours per week): These groups are developed specifically for people who have engaged in harmful and abusive sexual behavior and/or who have been convicted of crimes involving such behavior. They are based on Cognitive Behavioral Therapy, a form of therapy that is supported by research to contribute to positive outcomes for people who are referred to sex offense specific treatment. These groups can help you learn to solve problems better, support you in making better choices, change your thinking to be more realistic and productive, have better relationships with others, understand how your past experiences contributed to your current situation, and develop plans to live safely and successfully in the community. These groups will involve some educational elements as you learn program concepts and will also include discussion of your interactions with facilitators and other residents to help you understand patterns in the way you interact with other people.

**Risk-Relevant Groups** (up to 4 hours per-week) – These groups are designed to address factors that are directly associated with future risk of sexual recidivism known as criminogenic (crime producing) needs or dynamic (changeable) risk factors. These groups will help you develop skills to be successful at managing your needs and risk factors in the future such as managing emotions, effective communication, mindfulness, developing and maintaining healthy relationships, and managing unhealthy sexual arousal and illegal sexual behavior patterns.

**Wellness/Self-management groups** (up to 2 hours per week)– these groups may be related to responsivity needs (factors related to a person's ability to benefit from treatment), or help you develop skills related to living successful in the community such as decision making, planning and goal-setting, healthy leisure time activities, or coping with boredom.

Prior to each fall semester, you will be presented with the opportunity to make a commitment to engage in a certain number or type of groups. You are expected to follow through on this commitment and your participation will be assessed in each group.

The number of groups that you choose to participate in, your attendance, and the quality of your participation will be rated by group facilitators and will be used to determine the range of available vocational employment hours as well as other privileges in the program.

My signature below indicates that I have been provided with information about the treatment program and my options for participating in the program. Members of my treatment team have explained treatment engagement, behavior expectations and answered my questions about the treatment program and options for participation.

THIS INFORMATION IS BEING RELEASED  
UNDER THE PROVISIONS OF NEW YORK  
STATE MENTAL HYGIENE LAW, SECTION  
33.18 OAKVIEW SECURE TREATMENT AND  
REHABILITATION CENTER ACCEPTS NO  
RESPONSIBILITY FOR INFORMATION IS  
DISSEMINATED BY OTHER PERSONS OR  
AGENCIES.

\_\_\_\_\_  
Resident Name Printed

*[Signature]*  
Resident Signature

4/12/23  
Date

\_\_\_\_\_  
Staff Name/Title

*[Signature]*  
Staff Signature

4-12-23  
Date

Secure Treatment and Rehabilitation Center (STARCC)  
Program Expectations and Commitment Options

THIS INFORMATION IS BEING RELEASED  
UNDER THE PROVISIONS OF NEW YORK  
STATE MENTAL HYGIENE LAW, SECTION  
33.16. OAKVIEW SECURE TREATMENT AND  
REHABILITATION CENTER ACCEPTS NO  
RESPONSIBILITY IF THE INFORMATION IS  
DISCLOSED TO OTHER PERSONS OR  
AGENCIES

Resident Name:	C#:	Date: 4/12/23
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I understand that I am being asked to give my permission to participate in treatment at this Secure Treatment Facility. I understand that treatment involves active engagement and participation in psychoeducational groups and other therapeutic programming.

I understand that I have the choice to consent to some treatment components without consenting to others. I know that I will have to be successful in completing work in some parts of the treatment program before I will be able to move on to participate in more advanced parts of the program. I understand that if I choose to participate, that means that I am making a commitment to attend, engage, and work to apply treatment concepts to my own life.

I understand that my group assignments will depend on my individual treatment goals and needs. Treatment goals will be developed and implemented with my input as part of my Individualized Service Plan (ISP). The goals will also incorporate information from past risk assessments and psychiatric evaluation reports and will include factors that are directly associated with my risk of sexual recidivism and are known as criminogenic (crime producing) needs, dynamic (changeable) risk factors, responsivity needs, (factors related to my ability to benefit from treatment), and factors that are related to my overall health and stabilization (my unique medical and mental health needs). The ISP will be reviewed and updated over the course of my participation in or declination of treatment programming to reflect changes and identify current treatment goals I am working on. I will have the opportunity to provide input and ask questions when the ISP is reviewed.

I understand that my treatment success depends on my willingness to be honest with myself and treatment providers and on my efforts to develop skills, strategies, and interventions that will help with my specific risks.

I understand that I may choose not to participate in sex offense specific treatment. I also understand that I can at any time, during any stage of treatment, withdraw my consent to participate.

I understand that information about my participation, the quality of my participation, lack of participation, and/or withdrawal from treatment will be documented in my clinical record.

I understand that if I decide not to participate in sex offense specific treatment, it may affect the benefits I could derive from treatment, may result in a reduction in privileges and work hours, and may be considered during my annual review.

I understand that anytime I communicate with any staff or engage in any behavior, it may be documented in my clinical record and may be subject to disclosure in accordance with relevant laws and regulations (e.g., attorneys, judges, qualified psychiatric examiners).

MED STARC 517  
07/21/2021

I understand that psychotherapy interventions present a minimal risk. At times, while exploring emotionally charged material, some individuals may experience some emotional distress such as shame, sadness, anger, and anxiety. If I experience extreme distress, I will discuss these feelings with my treatment provider, so they can help me address them in treatment.

On the above date, I met with (Staff Name/Title) \_\_\_\_\_  
and I was informed about the procedures, possible risk, possible benefits, documentation, limits of confidentiality, and voluntary nature of my participation in sex offense specific treatment.

Please initial below each area of agreement.

\_\_\_\_\_ I have been provided with information about the treatment program and about my options for participating in the program. Program staff have explained the information about treatment to me and answered my questions about the treatment program and my options for participation.

**Consent and Commitment:** I agree to participate in the following recommended treatment:

\_\_\_\_\_ Core Groups    \_\_\_\_\_ Risk-Relevant Groups    \_\_\_\_\_ Wellness/Self-Management

\_\_\_\_\_ Other programming recommended by treatment team: \_\_\_\_\_

\_\_\_\_\_ I understand that I am making a commitment to attend and appropriately participate in the above groups. I understand that my attendance and participation along with other information about my behavior will be used to determine my eligibility for work hours and other privileges.

\_\_\_\_\_ If I have excessive absences from group, I will be considered for removal from the group roster and encouraged to attend a group focusing on engagement and treatment motivation.

**Decline to Participate in Programming:**

\_\_\_\_\_ I do not wish to participate in programming, at this time. I understand that I will be encouraged to attend a group that will focus on my understanding of the potential benefits of engaging in all or some of the programming offered and discussing my motivation to make changes in my life and my behaviors. Members of my treatment team will follow up with me to provide the opportunity to discuss my interest in participating in the future or answer questions about treatment.

\_\_\_\_\_  
Resident Name Printed

\_\_\_\_\_  
Resident Signature

4/12/23  
Date

\_\_\_\_\_  
Staff Name/Title

\_\_\_\_\_  
Staff Signature

4-10-23  
Date