



November 8, 2021

Ms. Monique DeSpain, Associate Counsel
Common Sense for Oregon Foundation
2007 State Street
Salem, OR 97301

Dear Ms. DeSpain:

In accordance with ORS 192.324(2), this acknowledges our receipt of your November 1, 2021, request for the following records:

- Copy of the letter(s) to the inmates and any information you can provide that explains the process to fulfill the Governor's Orders. By copy of the letter, I mean the template. We are requesting information as to the process DOC is establishing to comply with the Governor's wishes.

Having reviewed your request, we are able to inform you:

- Copies of all requested records within the possession or custody of the Department of Corrections are enclosed.

No specific procedures have been established for processing adults in custody for release by order of the Governor. AIC's are released in accordance with currently established procedures.

Sincerely,

A handwritten signature in black ink that reads "Michelle Dodson".

Michelle Dodson
Records Officer

cc: File

01/24/2018



Oregon

Kate Brown, Governor

Oregon Department of Corrections

Correctional Services Division

2575 Center Street NE

Salem, OR 97301-4667

Voice: 503-945-0927

Fax: 503-373-1173



October 15, 2021

Subject: Notification of Criteria Met

Dear :

On September 28, 2021, Governor Kate Brown requested the Department of Corrections (DOC) provide her with a list of youth and adults in the custody of DOC or the Oregon Youth authority who 1) were sentenced prior to the effective date of Senate Bill 1008 and did not benefit from its changes to our juvenile justice system and 2) meet the criteria described below:

- Will have served at least 50 percent of their sentence by December 31, 2022;
- Was a juvenile at the time of committing the offense for which they are in custody;
- Is serving a sentence that was ordered before January 1, 2020; and
- Is not serving a sentence for which any convictions are for crimes that were committed as an adult.

OR

- Was a juvenile at the time of committing the offense for which they are in custody;
- Is serving a sentence that was ordered prior to January 1, 2020;
- Is serving a sentence of 15 years or more of imprisonment;
- Is not serving a sentence for which any convictions are for crimes that were committed as an adult; and
- Is not serving a sentence with a current projected release date in 2050 or later. This does not exclude those serving life sentences without the possibility of parole.

This letter is to notify you that your name has been provided to the Governor due to meeting the criteria of one or both lists above. Please know this is the start of the process and DOC has not yet received direction on the next steps. You will be contacted when we have information or updates to share.

Sincerely,

Nathaline Frener
Assistant Director



Oregon

Kate Brown, Governor

Oregon Department of Corrections

Correctional Services Division

2575 Center Street NE

Salem, OR 97301-4667

Voice: 503-945-0927

Fax: 503-373-1173



October 20, 2021

Subject: Completion of Clemency Packet

Dear :

This letter is a follow up to the communication from me dated October 15, 2021, regarding adults in custody sentenced prior to the effective date of Senate Bill 1008. I would like to notify you of the next steps in the process.

The Governor's Office has requested completion of the enclosed abbreviated clemency packet. If you have already completed and submitted a clemency packet to the Governor's Office, you will still be required to complete the enclosed abbreviated clemency packet if you wish to move forward with this process.

After you complete the abbreviated clemency packet, **please take the packet to your institution's law library for scanning.** Once the packet has been scanned, you will need to send copies of the abbreviated clemency packet to the following parties:

- | | | |
|---|--|---|
| 1. Oregon Department of Corrections
Colette Peters, Director
2575 Center Street, NE
Salem, OR 97301 | 2. Oregon Board of Parole
1321 Tandem Ave, NE
Salem, OR 97301 | 3. The Honorable Kate Brown
Governor of Oregon
900 Court St., NE
Salem, OR 97301-4047 |
| 4. District attorney for the county in which you were convicted
<i>(see enclosed list for address)</i> | 5. District attorney for the county in which you are currently confined
<i>(see enclosed list for address)</i> | |

Please complete your abbreviated clemency packet as soon as possible and, to ensure timely consideration is given, no later than November 30, 2021. Please do not contact the Governor's office regarding the status of your abbreviated clemency packet. You will be notified of the next steps in the commutation process.

Sincerely,

Nathaline Frener
Assistant Director

Enclosures

Oregon County District Attorney Office Addresses

Baker County District Attorney 1995 3rd Street, Suite 320 Baker City, OR 97814	Harney County District Attorney 450 N. Buena Vista Ste. #15 Burns, OR 97720	Morrow County District Attorney PO Box 664 Heppner, OR 97836
Benton County District Attorney 120 NW 4th Street, 3rd Floor Corvallis, OR 97330	Hood River County District Attorney 309 State Street Hood River, OR 97031	Multnomah County District Attorney 1200 SW 1st Avenue, Suite 5200 Portland, OR
Clackamas County District Attorney 807 Main Street, Room 7 Oregon City, OR 97045	Jackson County District Attorney 815 W 10th Street Medford, OR 97501	Polk County District Attorney 850 Main Street Dallas, OR 97338
Clatsop County District Attorney PO Box 149 Astoria, OR 97103	Jefferson County District Attorney 129 SW "E" Street, Suite 102 Madras, OR 97741	Sherman County District Attorney PO Box 393 Moro, OR 97039
Columbia County District Attorney 230 Strand Street, Room 336 St. Helens, OR 97051	Josephine County District Attorney 500 NW 6th St., Dept. 16 Grants Pass, OR 97526	Tillamook County District Attorney 201 Laurel Avenue Tillamook, OR 97141
Coos County District Attorney 250 N. Baxter Coquille, OR 97423	Klamath County District Attorney 316 Main Street, Room 135 Klamath Falls, OR 97601	Umatilla County District Attorney 216 SE 4th Street Pendleton, OR 97801
Crook County District Attorney 300 NE 3rd St, Rm. 34 Prineville, OR 97754	Lake County District Attorney 513 Center Street, Room 309 Lakeview, OR 97630	Union County District Attorney 1104 K Avenue, 2nd Floor La Grande, OR 97850
Curry County District Attorney 94235 Moore Street, #232 Gold Beach, OR 97444	Lane County District Attorney 125 East 8th Ave. # 400 Eugene, OR 97401	Wallowa County District Attorney 101 S. River Street, Rm. 201 Enterprise, OR 97828
Deschutes County District Attorney 1164 NW Bond St. Bend, OR 97703	Lincoln County District Attorney 225 West Olive Street, Rm 100 Newport, OR 97365	Wasco County District Attorney 511 Washington St Ste 304 The Dalles, OR 97058
Douglas County District Attorney PO Box 1006 Roseburg, OR 97470	Linn County District Attorney PO Box 100 Albany, OR 97321	Washington County District Attorney 150 N First Avenue, Suite 300 Hillsboro, OR 97124
Gilliam County District Attorney PO Box 636 Condon, OR 97823	Malheur County District Attorney 251 B ST. West #6 Vale, OR 97918	Wheeler County District Attorney PO Box 512 Fossil, OR 97830
Grant County District Attorney 201 S. Humbolt Street, Suite 100 Canyon City, OR 97820	Marion County District Attorney PO Box 14500 Salem, OR 97309	Yamhill County District Attorney 535 NE 5th Street McMinnville, OR 97128

EXECUTIVE CLEMENCY APPLICATION

_____, 20____
(Date)

The Honorable Kate Brown
Governor of Oregon
900 Court Street NE
Salem, OR 97301-4047

Dear Governor Brown:

Pursuant to ORS 144.650, I hereby apply for a COMMUTATION.

I have served copies of my application on the Director of the Corrections Department, the State Board of Parole, the District Attorney for the county in which I was sentenced, and the District Attorney for the county in which I am confined.

(1) Full Name: _____

(2) Date of Birth: _____

(3) State Identification Number (SID #): _____

(4) To the best of your knowledge, please provide the names of the institutions and the dates of your incarceration at those institutions.

(5) Please state the crime(s) you were convicted of and describe your past criminal record, including juvenile delinquency, if any.

(6) To the extent you feel comfortable doing so, please describe your childhood and

adolescence. Talk about your lived experiences and the things/events/people that shaped and impacted who you were at the time of your crime. This could include:

- Traumatic events;
- Family dynamics and associated responsibilities;
- Financial situation;
- Interactions with law enforcement and/or child protective services;
- Substance use;
- Education; and
- Anything else that you believe shaped or impacted who you were at the time of your crime.

- (7) Briefly and accurately explain the events surrounding your offense. If your version differs from the official version of events, you must give the official version before explaining the way in which your view differs. Do not go into the question of your guilt or innocence, but explain any mitigating circumstances, such as your role in the crime, potential culpability of the victim, unusual circumstances, harm caused to anyone, necessity of your actions, addiction, or any other similar things.

- (8) Please list the groups, programs, or classes/courses that you have completed or been involved with during your incarceration. Please include dates associated with each. Talk about any impact these groups, programs, classes/courses had any impact on you and how/why.

- (9) To the extent you feel comfortable doing so, please describe any mental health counseling/therapy or substance abuse treatment or programming that you have been involved in. If applicable, please also describe whether additional drug and alcohol treatment would be beneficial to your recovery and sobriety.

- (10) Please describe any educational opportunities that you have undertaken while incarcerated. This includes graduating high school, obtaining your GED, enrolling in college courses, taking technical skills courses, or engaging in vocational training.

(11) Please list any certificates that you have received while incarcerated.

- (12) Please describe your employment history prior to and during your incarceration, and include time commitment and dates associated with each.

- (13) If applicable, and to the extent you feel comfortable doing so, please describe your personal strengths and support system. Please also describe how these have helped you and will continue to help you in the future.

- (14) If applicable, and to the extent you feel comfortable doing so, please describe your personal stressors and problematic patterns that contributed or continue to contribute to negative behavior. Please also describe how you have addressed these and plan to continue to do so if released from custody.

- (15) Please describe your involvement with mentoring, tutoring, volunteer work, extracurricular activities and clubs, fundraising, or community service.

(16) Please list character references in the space provided below. Do not list relatives. If possible, these individuals should be aware of your crime and can include correctional officers, employees, or volunteers. Whether they know about the crime or not, they must be familiar with your present circumstances and activities. Attach additional pages if necessary. (You may submit letters of recommendation from these references, or from other individuals, if you would like to; however, you are not required to do so.)

Name and relationship to you

Name and relationship to you

Name and relationship to you

Name and relationship to you

Name and relationship to you

(17) Please explain why you believe the Governor should use her power to grant you

clemency and conditionally release you from custody. This explanation should reference your personal transformation while in custody and all efforts made at rehabilitation. If these efforts are described in the above sections, please feel free to simply reference those sections. Use extra sheets as necessary.

Signature

Date: _____

CLEMENCY AFFIDAVIT
Commutation

STATE OF _____)
) ss.
COUNTY OF _____)

I, _____, being first duly sworn, depose and say as
 (Print Full Name)
follows:

Pursuant to ORS 144.650, I certify that I have served copies of my clemency application on the:

- (1) Director of the Department of Corrections;
- (2) State Board of Parole;
- (3) District Attorney for the county in which I was convicted; and
- (4) The District Attorney for the county in which I am confined.

I solemnly swear that the statements made in this affidavit and in the application signed by me and attached to this affidavit, are true and correct to the best of my knowledge and belief, and that I will be a law-abiding person in the future and will support and defend the Constitution of the United States and the State of Oregon and the law thereof, so help me God.

(Signature of Applicant)

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20___.

Notary Public for _____
My Commission Expires: _____