



NOTICE OF CLAIM BY CITIZEN TO THE STATE OF IDAHO

This form is for filing a tort claim against the state of Idaho. Information requested on this form is required by Idaho Code 6-907 and is subject to public disclosure

For Official Use Only

B0970-2312 03/19/2025 8:00 AM Received by Office of the Idaho Secretary of State

IMPORTANT INFORMATION

Business Hours:

Monday – Friday 8:00 a.m. – 5:00 p.m. (Closed during lunch hour 12:00 p.m. – 1:00 p.m.)
Closed on weekends and official state holidays.

Questions? Contact us:

(208) 334-2852
claims@sos.idaho.gov

CLAIMANT INFORMATION

Claimant's Name

First	Middle	Last
Richard	Lynn	Hammond

Claimant's Phone Number

(208) 317-4747

Additional Claimants (If applicable)

Who is Filing this Claim? (Select one)

☒ Claimant ☐ Insurance Company (Subrogee)
☐ Attorney ☐ Parent/Legal Guardian

Attorney/Insurance Company Information (If applicable)

Name of Attorney/Insurance Company	Phone Number
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Claimant's Current Residential Address

Street Address	City	State	Zip Code
Hammond IDOC # 159265, ISCI Unit 14 P.O. Box 14	Boise	Idaho	83707-0014

Claimant's Previous Residential Address (If different from above for a period of six (6) months immediately prior to the time the claim arose)

Street Address	City	State	Zip Code
14266 Maqbool St	Caldwell	Idaho	83607

INJURY OR DAMAGE INFORMATION

Date(s) of Injury or Damage (If the injury or damage occurred once, leave Date and Time of Last Occurrence blank)

Date of the Injury or Damage (or first occurrence)	Time of Injury or Damage (or first occurrence)	Date of Last Occurrence	Time of Last Occurrence
03/18/2025	12:00 pm	03/18/2025	12:00 pm

Place or Location the Injury or Damage Occurred (Fill as many details as possible)

Unit 14 P.O. Box 14 Boise, ID 83707-0014 Current Resident at ISCI since 11/2024.

If the Injury or Damage Occurred on a Street or Highway

Name of Street or Highway	Nearest Intersecting Street	Milepost Number
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State Agency or Department Alleged Responsible for Damage/Injury

(Select all that apply from the list of State Agencies below. You MUST select at least one State Agency to continue this claim.)

<input type="checkbox"/> Boise State University	<input type="checkbox"/> Department of Juvenile Corrections	<input type="checkbox"/> Lava Hot Springs Foundation
<input type="checkbox"/> Commission of Pardons & Parole	<input type="checkbox"/> Department of Labor	<input type="checkbox"/> Lewis-Clark State College
<input type="checkbox"/> Department of Agriculture	<input type="checkbox"/> Department of Lands	<input type="checkbox"/> Military Division
<input type="checkbox"/> Department of Administration	<input type="checkbox"/> Department of Veterans Services	<input type="checkbox"/> Parks & Recreation Department
<input type="checkbox"/> Department of Commerce	<input type="checkbox"/> Division of Occupational & Professional Licenses	<input type="checkbox"/> Public Utilities Commission
<input checked="" type="checkbox"/> Department of Correction	<input type="checkbox"/> Human Resources Division	<input type="checkbox"/> Public Works Division
<input type="checkbox"/> Department of Education	<input type="checkbox"/> Idaho State Police	<input type="checkbox"/> State Board of Education
<input type="checkbox"/> Department of Environmental Quality	<input type="checkbox"/> Idaho State University	<input type="checkbox"/> State Tax Commission
<input type="checkbox"/> Department of Fish & Game	<input type="checkbox"/> Idaho Transportation Department	<input type="checkbox"/> University of Idaho
<input type="checkbox"/> Department of Health & Welfare	<input type="checkbox"/> Industrial Commission	<input type="checkbox"/> Other: _____



**NOTICE OF CLAIM BY CITIZEN
TO THE STATE OF IDAHO** *(continued)*

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ADDITIONAL INFORMATION

Describe the Injury or Damage

Accurately Describe The Conduct And Circumstances Which Brought About The Injury Or Damage

See attached

Names Of All Persons Involved In Or Witness To The Injury Or Damage *(Include Addresses and Telephone Numbers if known)*

FINALIZE CLAIM

I claim Damages from the State of Idaho in the Sum of: _____

Signature:

Richard Lynn Hammond

Date:

March 19, 2025

NOTICE OF CLAIM

Idaho Secretary of State's Office
P.O. Box 83720
Boise, ID 83720-0080

In compliance with Title 6, Idaho Code, the undersigned hereby presents a claim against the below listed individuals for damages arising out of an occurrences which happened as follows:

Time and Place: The notice of taking described below was announced on or About February 1, 2025 starting with "Resident Communications Update/Memo #1" and followed by #2 - #6, and continuing throughout all IDOC Facilities via actual posting in IDOC Facilities Units, followed by JPay Emails.

Claim against: Josh Tewalt, Director Idaho Department of Correction ("IDOC") Chad Page, Chief of Prisons IDOC, Patrick Roberts, Destiny Heart, Darci Acosta, J.Doe's 1-10, IDOC Grants and Contracts L. Edkins Purchasing Support, Division of Purchasing, Michael Piccono, J.Doe's 1-5, Purchasing Officer's, all sued in their official capacities and each of their successors in office. Hereinafter referred to as "Defendants".

Conduct: Conduct is to include but not limited to, Defendant's named above have performed bad faith negotiations and conversion of property which was done through the following negotiation(s) of an Amendment to a contract for tablet services with ICSolutions regarding Contract No. C014017 Amendment Seventeen and is set forth more fully below.

1. A claim for negligence, gross negligence and reckless, willful and wanton conduct, intentional negligence with malice based upon defendant's actions/nonactions is lodged against you. Whereby claiming the State of Idaho, and through its Director of the IDOC, Chief of Prisons, IDOC employees in the Grants and Contracts Office, and employees of the Idaho Division of Purchasing, as named herein above, have committed and/or failed in their legal obligation to properly negotiate a contract for tablet services with ICSolutions regarding Contract No. C014017 Amendment Seventeen.
2. The Defendants have chose under Idaho and Federal laws, IDAPA Rule's, IDOC Standard Operating Procedures (SOPs) to provide tablet services for Claimant and those IDOC Residents similarly situated.
3. Defendants had entered into Contract No. C014017 in where they entered into said agreement for the provision of inmate telephone and kiosk-based services in correctional Facilities within the State of Idaho.
4. IDOC Defendants on or about May 2024 chose to meet with a Resident at ISCC, and other IDOC Residents through out the State, regarding inmate telephone and kiosk-based services in correctional Facilities as they were Amending the Contract.
5. The IDOC Residents in this meeting conveyed to IDOC Contracts defendants the issue of current property on the Tablets and if it would be transferred over to the new system. Defendant Roberts conveyed to one of the Residents it would.
6. IDOC has set forth in IDOC SOP 320.02.01.001 (SOP 320), any content on the current tablets would be moved to the new system. See SOP 320 at pg.5. Additionally, a mortality clock on the current tablet is set for 6 months each time one syncs their Tablet to the Kiosk. See SOP 320 at pgs. 16-17. So, 6 months after implementation of the above-referenced Amendment 17 is in full force a effect they will cease to work.
7. Defendants since the announcement of Contract No. C014017 Amendment Seventeen have announced in six (6) separate Memo's they intend to remove our access to the content on the tablets, as they will not transfer the data/app's to the new system without just compensation. Rather, they explain how one may save the material to the Tablet, and then when it is no longer operational you have to send it out. They also refuse to acknowledge that their is a mortality clock good for 6 months only, and will not remove it or set it to 99 years. Therefore, making the tablet non-operational after 6 months from when last synced to the kiosk. All of which is considered Theft under Idaho Code § 18-2403.
8. Defendants have conspired among themselves to deprive Claimant, and all other similarly situated IDOC Residents, of their property as set forth above. All in violation of the Idaho Racketeering Act, Idaho Code §§ 18-7801 - 18-7805 the Idaho Consumer Protection Act as set forth in Title 48, Chapter 6, §§ 48-601 - 48-619, Idaho Code and other Monopolies and Trade Practices violations as set forth in Title 48, Idaho Code.

Injury: Loss of the Tablet, music, games, calendar entries, notes, photo's, videogram's, legal research and data, etc., which amounts to, but not limited to, theft, conversion, racketeering, violation of consumer protection, and monopoly and trade practices.

Amount of Claim: To be determined at jury trial, but not limited to for Claimant, and all other IDOC Residents similarly situated to: (1) reimbursement for all game/music purchases (2) punitive damages for intentional criminal conduct (3) loss of use of tablet App's and charges of \$ 0.05 per minute streaming service opposed to use from a Cloud Platform at no additional cost due to having purchased the music/game's and other App's. (4) Fees and costs, to include paralegal and attorney's fees.

DATED: 3/18/2021

Richard L. Hammond

IDOC # 159265 ISCI Unit 14
P.O. Box 14
Boise, ID 83707-0014
Current Resident at ISCI since 11/2024.

Previous address
14266 Maqbool St
Caldwell, ID 83607