COURT OF APPEALS
DIVISION II
OF THE STATE OF WASHINGTON

STATE OF WASHINGTON, Respondent,	Cause no. 43167-0-II
v.	STATEMENT OF ADDITIONAL GROUNDS FOR REVIEW
CHARLES V. FARNSWORTH, Appellant.	

I, Charles V. Farnsworth, have received and reviewed the opening brief prepared by my attorney. Summarized below are the additional grounds for review that are not addressed in that brief. I understand that the Court will review this Statement of Additional Grounds for Review when my appeal is considered on the merits.

Additional Ground 1

Appellant's California Conviction is not Comparable to Washington's 2009 Vehicular Homicide Statute.

1. Comparability under Lavery
2. Intoxification element v. Driving element
3. Washington's 1984 Vehicular Homicide Statute is not a "most serious offense" necessary to

be considered a "Persistent Offender."

4. The Implied Consent Statute
5. Full Faith and Credit

Additional Ground 2

The Trial Court Record does not support its Finding that Appellant has, or in the Future will have, the Ability to Pay LFOs.

Dated: 5/6/13

by: _____
Charles V. Farnsworth
Appellant

I. APPELLANT'S 1984 CALIFORNIA CONVICTION IS NOT COMPARABLE TO WASHINGTON'S 2009 VEHICULAR HOMICIDE STATUTE

1. Comparability under Lavery

The Washington Supreme Court noted that to determine if a foreign conviction was comparable to washington offense for the purposes of the Persistent Offenders Act (POAA), the elements of the out-of-state conviction has to be compared to the elements of the washington Statute. In Re Lavery, 154 Wn.2d 249, 111 P.3d 837, 841 (2005), the Court held:

> To determine if a foreign crime is comparable to a washington crime, the sentencing court must look first to the elements of the crime. Morely, 94 Wn. 2d at 605-06. More specifically, the elements of the criminal statute in effect when the foreign crime was committed. (emphasis added)

Appellant's California conviction must be compared to a washington crime at the time the foreign crime was committed 1984, not 2009.

2. Intoxification Element v. Driving Element

Prior to the 1983 amendment, crimes involving vehicles that resulted in mortal injury were tried under washington state's "Negligent Homicide" statute. LAWS of 1983, Ch. 164, section 1, pg. 719, Appendice A. As can be seen under the pre-1983 statutory language, the crime Negligent Homicide by means of

a motor vehicle described the act of causing mortal injury "under the influence of alcohol or drugs ... as defined by RCW 46.61.520 ..."

From 1937, when the "Gross Negligence" statute was first enacted, until the 1991 amendment, the causal element, or proximate cause of "intoxification" was necessary for conviction under the "Gross Negligence," "Negligent Homicide," and "Vehicular Homicide" statutes.

In State v. MacMaster, 113 Wn.2d 226, 778 P.2d 1037, 1041 (1984), the Supreme Court held:

> In the case at hand, the Court of Appeals recognized the trial court error and held that such requirement [intoxification] still exists [subsequent to the 1983 amendment] under the amended version of the statute. We affirm the Court of Appeals on this issue and reaffirm our consistent adherence to the rule regarding a causal relationship [between intoxification and death] still exists under the amended statute. (alterations added)

MacMaster, 788 P.2d at 1042, reversed a Vehicular Homicide conviction because the jury instruction only required the defendant's driving to have been the cause of the accident.

"A literal reading of the [1983] statute would not require the influence of intoxificating liquor on the defendant to be a proximate cause of the ensuing death. Nevertheless, to avoid a 'strict liability' result, this Court and the Court of Appeals engrafted on the statute and have consistently held that impairment due to alcohol [or drugs] must be a proximate cause of the fatal accident." MacMaster, 778 P.2d at 1040. (alteration added). In other words, to convict a defendant of the crime of Gross Negligence, Negligent Homicide, or Vehicular

Homicide from 1937 until a 1991 amendment made Vehicular Homicide a "strict liability" statute requiring "driving" to be the element of death, the state must have proven beyond a reasonable doubt that "intoxification" was the cause of death in Appellant's 1984 California conviction in order to be comparable to washington's 1984 vehicular Homicide statute, under Lavery, for POAA or any other sentencing enhancement.

The Legislation responded to Macmaster by amending the statute to omit that element. See State v. Rivas, 126 Wn.2d 443, 444, 778 P.2d 61 (1995); State v. Salas, 127 Wn.2d 173, 897 P.2d 1246 (1995). Since the Legislature's 1991 amendment, washington's vehicular Homicide statute has been a strict liability statute requiring "driving" to be the causal element. It does not require a causal connection between the driver's drug or alcohol impairment and the victim's death. Rivas, 896 P.2d at 61. Because there is no evidence of drug or alcohol content, lab report, or any other factual basis for a comparability analysis between Appellant's 1984 California conviction to a 1984 washington vehicular Homicide, it cannot be compared under Lavery for POAA purposes.

Even if California's conviction provided a factual basis, and if that crime required "intoxification" as the proximate cause of death, and therefore comparable to washington's 1984 Statute or required under Lavery, neither are a "most serious offense" defined under RCW 9.94A.030(32)(r):

> vehicular Homicide when proximately caused by the driving of any vehicle by any person under the influence of intoxicating liquor or drugs... (emphasis added)

Washington's 1984 vehicular Homicide itself is no longer comparable to the 2009 statute in effect at the time of the present crime. Had California's 1984 vehicular Manslaughter's proximate cause been "driving" rather than "intoxification," it still would not count for failure to meet Washington's 1984 statute's "intoxification" proximate cause necessary for conviction in 1984 under Lavery.

3. Washington's 1984 Conviction Is Not A "Most Serious offense" Necessary To Be Considered A "Persistent offender"

Washington State's 1984 vehicular Homicide statute necessary for comparability does not meet the 2009 definition of a persistent offender. "Persistent offender," RCW 9.94A.030 (37), is an offender who:

(a)(i) Has been convicted in the state of any felony considered a most serious offense; and (emphasis added)

(b)(ii) Has, before the commission of the offense under (a) of this subsection, been convicted as an offender on at least two separate occasions, whether in this state or elsewhere with two felonies that under the laws of this state would be considered most serious offenses and would be included in the offender score under RCW 9.94A.525...

Under RCW 9.94A.525 (3), it reads in pertinent part:

> Out-of-state convictions for offenses shall be classified according to the comparable offense definitions and sentences provided by Washington law.

"If the elements of the foreign crime are not similar to the washington crime, or if the crime is more broadly defined [for lack of an "implied consent" statute], the court may analyze the factual comparability of the conviction." State v. Farnsworth, 130 P.3d 389, 398 (2006) (alteration and emphasis added). Not only are there no facts necessary for comparability under Lavery, California lacked an "implied consent" statute with which to acquire potentially exculpatory evidence in violation of Apellant's rights pursuant to the Fairness Doctrine under washington law.

4. The Implied Consent Statute

In 1984 California lacked a comparable statutory scheme that protected a defendant's right to fundamental fairness in obtaining exculpatory evidence available under local law. RCW 46.20.308, the Implied Consent Statute, is statutorily linked to RCW 46.61.500, Vehicular Homicide, through RCW 46.61.502 and 506. Those statutes must conform under statutory law. RCW 46.61.500 provides in pertinent part:

(1) when the death of any person ensues within three years as a proximate cause result of injury proximately caused by the driving of any vehicle by any person, the driver is guilty of vehicular Homicide if the driver was operating a motor vehicle

(a) while under the influence of intoxicating liquor or any drug as defined by RCW 46.61.502 ... (emphasis added)

RCW 46.61.502 reads in pertinent part:

(1) A person is guilty of driving under the influence of intoxicating liquor or any drug if the person drives a vehicle within this state:

(a) And the person has, within two hours after driving an alcohol concentration of 0.08 or higher as shown by analysis of the person's breath or blood made under RCW 46.61.506; or... (emphasis added)

RCW 46.61.506 reads in pertinent part:

(5) When a blood test is administered under the provision of RCW 46.20.308, the withdrawal of blood for the purpose of determining its alcohol or drug content may be performed only by a physician, a registered nurse, a licensed practical nurse, nursing assistant... (emphasis added)

RCW 46.20.308, reads in pertinent part:

(2) The officer shall inform the person of his right ... to have additional tests administered by any qualified person of his or her own choosing as provided in RCW 46.61.506. (emphasis added)

Because RCW 46.61.520 references RCW 46.61.502, which references RCW 46.61.506, which in turn references 46.20.308, they therefore become part and parcel of the same statutory scheme under local law, and therefore statutory elements of Washington's Vehicular Homicide statute missing in California's Vehicular Manslaughter. Not to have been provided a .308 warning, or right to further testing, violates a defendant's right to called potentially exculpable evidence under the State's constitution to due process, equal protection, and is a violation of statutory law as well.

In Washington State, an accused has the opportunity to gather potentially exculpable evidence, regardless of the fact that there is no right to refuse the mandatory test. State v. Turpin, 94 Wn.2d

820, 820 P.2d 990, 993 (1987). This statutory requirement demonstrates an important protection of the subject's right to fundamental fairness which is built into our implied consent procedure. State v. Bartels, 112 Wn.2d 882, 886, 774 P.2d 1183, 1184-85 (1989) (citing State v. Canady, 90 Wn.2d 808, 817, 585 P.2d 1185 (1978).

In California at the time of Appellant's conviction, there were three testing methods for blood-alcohol concentrations, and suspects were simply required to be informed that samples would be retained in blood and urine sample tests administered by the state. Cal. Veh. Code, section 13353-5 (West 1971) (enacted 1993). See California v. Trombetta, 467 U.S. 479, 480 fn. 11 (1984). California failed to provide a suspect a right to a second test at his or her own choosing, nor was one allowed. In Washington State, to allow comparability under local law, it is a violation of Appellant's statutory and constitutionally rights, and therefore not comparable. Because the issue is the preservation of exculpatory evidence, it is a matter of state, not federal constitutional law, Id. at 491 (citing U.S. v. Augenblick, 393 U.S. 348, 352-53 (1969).

California's lack of a similar statutory scheme using mandatory language allowing a defendant to impeach the result of a state-administered test, is a violation of the Washington State Constitution. State v. McNichols, 128 Wn.2d 242, 250-51 904 P.2d 329. (1995). Under McNichols, dismissal of a driving while intoxicated charge, not suppression of state's blood test results was appropriate remedy for the State's interference with defendant's right to obtain independent concentration test; suppression of State's test could not eliminate prejudice because favorable blood test was reliable evidence of non-intoxification

and error could not be remedied by a new trial. State v. McNichols, 76 Wn. App. 283, 284-90, 884 P.2d 620 (1994), overruled on other grounds, 128 Wn.2d 242 (1995). As stated, under local law, a person who submits a blood test at the direction of state law enforcement has a statutory right to additional testing by a person of his or her own choosing. State v. Dunivin, 65 Wn. App. 501, 503, 828 P.2d 1150, 1152, rev. den., 120 Wn.2d 1002 (1992).

In 1980, four years prior to Appellant's 1984 conviction, the Washington Supreme Court held that when the defendant was injured in an automobile accident which caused the death of another party, and a blood sample had been taken from the defendant without being advised of her right to have other tests made, results of blood test were inadmissible in the prosecution on charges of Negligent Homicide. Turpin, at 620 P.2d 991-92.

5. Full Faith And Credit

Once having determined the issue of a foreign law, the trial court treats the foreign law no differently than local law. Byrne v. Cooper, 11 Wn. App. 549, 523 P.2d 1216, 1218-20 (1974), rev. den. 84 Wn.2d 1013 (1974). In other words, even if the court finds the elements of the out-of-state conviction are similar to a Washington crime, it is then treated in all respects as local law, and in the instant case, the implied consent statute would be an explicit and statutorily mandated part of the Washington crime of Vehicular Homicide under local statutory law. Therefore, the trial court should have analyzed the factual comparability, as well as compara-

bility of the elements missing a 1308 warning of Appellant's 1984 conviction because a 1308 warning would have protected his ability to acquire potentially exculpable evidence, and is part of a statutory scheme that includes RCW 46.61.520 that is missing in California's Vehicular Manslaughter statute.

While the Full Faith and Credit Clause applies in full force to judgments its effect is lessened when the statute or jurisdictional decision of another forum are at issue. Baker by Thomas General Motors Corp. v. Industrial Accident Comm'n, 522 U.S. 222, 232-33 (1998). "The Full Faith and Credit Clause does not compel 'a state to substitute its own statutes dealing with a subject matter concerning which it is competent to legislate.'" Id. (Quoting, Pacific Employees Ins. Co. v. Industrial Accident Comm'n, 306 US. 493, 501 (1939).

Shear[1] amply demonstrates that Washington law may be applied to a petitioner who is a Washington resident and who has committed his most recent offense within the State. All the Full Faith and Credit Clause requires is that Washington respect California's Judgment and conviction which we have done.

State v. Berry, 141 Wn.2d 121, 129, 5 P.3d 658, 662 (2000).

[1] People v. Shear, 71 Cal. App. 4th 278, 83 Cal. Rptr. 767 (1999).

A valid foreign judgment may be collaterally attacked only if the court lacked jurisdiction or constitutional violations were involved. Absent these grounds, "'a court of this state must give full faith and credit to the foreign judgment and regard the issue thereby adjudged to be precluded in a Washington proceeding.' In re Estate of Wagner, 50 Wash. App. 162, 166, 746 P.2d 639 (1987).'"

Berry, 5 P.3d at 660.

II. THE TRIAL COURT RECORD DOES NOT SUPPORT ITS FINDING THAT APPELLANT HAS, OR IN THE FUTURE WILL HAVE, THE ABILITY TO PAY LFO'S

Appellant assigns error to the trial court's judgment and sentencing "finding" that he has the current or future ability to pay LFOs. Appellant claims that he has already made payments on those LFOs and that the ripeness test no longer applies. Attachment B.

Appellant challenges the trial court's imposing LFOs as part of his life-without parole sentence. More specifically, he argues that (1) the record does not support the trial court's finding that he has, or in the future will have, the ability to pay LFOs, or the hardship those LFOs present to Appellant, and (2) this finding violates his equal protection rights because he is disabled and unable to pay. Although Appellant was sent to Washington State Hospitals on two occasions and was provided diagnoses of PTSD, PTSD brain injury, and

depression, he had other medical and military records that the trial court failed to take into consideration at his 3.5 hearing. (Appendix C.)

Appellant assigns error that the trial courts judgment and sentence finding number 2.5, court record, does not show the trial court took account Appellant's homelessness or lack of financial resources and the nature of the burden of imposing LFOs on him. The record now before the court, as in State v. Bertrand, 165 Wn. App. 393, 267 P.3d 511 (2012), rev. den., 175 Wn.2d 1014 (2012), contains no evidence to support the trial court's finding number 2.5 that Appellant has the present or future ability to pay LFOs. In Bertrand, 267 P.3d at 517, this Court held "that the trial courts judgment and sentence finding was clearly erroneous." Appellant's case mirrors Bertrand.

III CONCLUSION

Appellant respectfully requests that the Court remand for sentencing, excluding his 1984 California conviction either as a strike or any other sentencing enhancement, and strike the court's finding number 2.5 of the judgment and sentence thereby relieving him of those LFOs.

Noted:

by: _____
Charles V. Feuerworth
pro se

Attachment A

modify the commission's revision or amendment at the next legislative session after the revision or amendment takes effect. Failure of the legislature to act shall be deemed as approval of the revision or amendment;

(2) If the emergency occurs prior to July 1, 1988, call the board of prison terms and paroles into an emergency meeting for the purpose of evaluating its guidelines and procedures for release of prisoners. The board may take any action authorized by law to modify the terms of prisoners under its jurisdiction;

(3) Call the clemency and pardons board into an emergency meeting for the purpose of recommending whether the governor's commutation or pardon power should be exercised to meet the present emergency.

NEW SECTION. Sec. 5. There is added to chapter 9.94A RCW a new section to read as follows:

The commission shall conduct an analysis of the anticipated effects of the guidelines adopted in chapter ... (SB 3414), Laws of 1983, on a representative sample of counties. This analysis shall include, but not be limited to, an estimate of the impact on jail population and availability of alternatives in the community. The analysis required by this section shall be filed at the beginning of the 1984 legislative session.

NEW SECTION. Sec. 6. The legislative budget committee shall prepare a report to be filed at the beginning of the 1987 session of the legislature. The report shall include a complete assessment of the impact of the Sentencing Reform Act of 1981. Such report shall include the effectiveness of the guidelines and impact on prison and jail populations and community correction programs.

NEW SECTION. Sec. 7. Sections 1 through 5 of this act shall take effect on July 1, 1984.

Passed the Senate April 23, 1983.
Passed the House April 11, 1983.
Approved by the Governor May 11, 1983.
Filed in Office of Secretary of State May 11, 1983.

CHAPTER 164

[Engrossed Senate Bill No. 3106]

DRUNK DRIVING——VEHICULAR HOMICIDE——VEHICULAR ASSAULT

AN ACT Relating to driving while intoxicated; amending section 3, chapter 137, Laws of 1981, as last amended by section 1, chapter ___ (ESB 3416), Laws of 1983 and RCW 9.94A.030; amending section 24, chapter 121, Laws of 1965 ex. sess. and RCW 46.20.285; amending section 1, chapter 5, Laws of 1973 as amended by section 13, chapter 61, Laws of 1979 and RCW 46.20.391; amending section 1, chapter 120, Laws of 1963 and RCW 46.21.010; amending section 46.56.040, chapter 12, Laws of 1961 as last amended by section 3, chapter 287, Laws of 1975 1st ex. sess. and RCW 46.61.520; amending section 12, chapter 10, Laws of 1982 and RCW 46.63.020; amending section 4, chapter 284, Laws of 1971 ex. sess. as last amended by section 1, chapter 188, Laws of 1981 and RCW

Attachment B

TRUST ACCOUNT STATEMENT

DOC#: 0000875475 Name: FARNSWORTH, CHARLES VERDEL DOB: 02/10/1950
LOCATION: E01-194-GW133

ACCOUNT BALANCES Total: 0.00 CURRENT: 0.00 HOLD:

SUB ACCOUNT	09/30/2012 START BALANCE	04/03/2013 END BALANCE
SPENDABLE BAL	2.61	0.00
SAVINGS BALANCE	0.00	0.00
WORK RELEASE SAVINGS	0.00	0.00
EDUCATION ACCOUNT	0.00	0.00
MEDICAL ACCOUNT	0.00	0.00
POSTAGE ACCOUNT	0.00	0.00
COMM SERV REV FUND ACCOUNT	0.00	0.00

WASHINGTON STATE PENITENTIARY

MLP 4-3-13

DEBTS AND OBLIGATIONS

TYPE	PAYABLE	INFO NUMBER	AMOUNT OWING	AMOUNT PAID	WRITE OFF AMT.
~~TVD~~	~~TV CABLE FEE DEBT~~	~~12202004~~	~~0.00~~	~~2.00~~	~~0.00~~
LFO	LEGAL FINANCIAL OBLIGATIONS	20041021	UNLIMITED	8.07	0.00
WDCD	WESTERN DISTRICT COURT DEBT	C04-5780RBL	0.00	60.96	0.00
MISCD	MISCELLANEOUS DEBT	06102005	10.09	0.00	0.00
MISCD	MISCELLANEOUS DEBT	04042005	1.64	0.00	0.00
COPD	COPY COSTS DEBT	12202004	290.69	0.00	0.00
HYGA	INMATE STORE DEBT	04202012	268.17	27.75	0.00
HYGA	INMATE STORE DEBT	04112005	352.17	4.20	0.00
COPD	COPY COSTS DEBT	05292012	950.42	0.00	0.00
MEDD	MEDICAL COPAY DEBT	06282005	0.00	9.00	0.00
MISCD	MISCELLANEOUS DEBT	02012013	3.25	0.00	0.00
MEDD	MEDICAL COPAY DEBT	08062012	15.99	1.54	0.00
HYGA	INMATE STORE DEBT	11292004	14.64	44.61	0.00
DEND	DENTAL COPAY DEBT	12062006	0.00	3.00	0.00
LMD	LEGAL MAIL DEBT	05082012	149.63	0.00	0.00
COPD	COPY COSTS DEBT	04142005	627.13	0.00	0.00
COPD	COPY COSTS DEBT	10272004	31.70	0.00	0.00
WDCD	WESTERN DISTRICT COURT DEBT	C05-5177RBL	212.06	37.94	0.00
POSD	POSTAGE DEBT	08132007	2.64	0.00	0.00
TVD	TV CABLE FEE DEBT	04142012	6.00	0.00	0.00
UPSD	PERSONAL PROPERTY POSTAGE DEBT	10262004	14.78	0.00	0.00
POSD	POSTAGE DEBT	04122005	532.03	0.00	0.00
DEND	DENTAL COPAY DEBT	05172012	3.00	0.00	0.00
POSD	POSTAGE DEBT	12102004	155.23	0.00	0.00
CVCS	CRIME VICTIM COMPENSATION/07112000	10052004	UNLIMITED	1.00	0.00
~~EDCD~~	~~EASTERN DISTRICT COURT DEBT~~	~~CV-12-5103-L~~	~~0.00~~	~~0.73~~	~~0.00~~
COIS	COST OF INCARCERATION	10052004	UNLIMITED	4.00	0.00

appendice C

Reason for initial hospitalization:
☒ Forensic Evaluation ☐ Other:

Charges: Mr. Farnsworth is charged with Robbery in the 1st Degree.

Strengths: Mr. Farnsworth was cooperative with the treatment team. He reported a degree in theology and recent employment in the community.

Assessed Problem Areas (check all that may apply):

☐ 1. Negative Sxs of Schizophrenia	☐ 10.Command Hallucinations	☐ 19. Past Psychotropic Medications
☐ 2. Positive Sxs of Schizophrenia	☐ 11. Cultural/Ethnic Concerns	☒ 20. Legal/Criminal History
☐ 3. Mania	☐ 12. Developmental Issues	☐ 21. Lack of Community Support
☒ 4. Depression	☐ 13. Sexual Deviance	☐ 22. Homeless
☐ 5. Paranoia	☐ 14. Suicidal Ideation	☐ 23. Lack of Peer/Family Support
☐ 6. Delusions	☐ 15. BIF/DD Status	☒ 24. Physical Health Issues
☒ 7. Alcohol/Drug History	☐ 16. Hx of Self-Harm Behavior	☐ 25. Hostility/Agitation
☐ 8. Alcohol/Drug Treatment History	☐ 17. Mental Health Treatment History	☒ 26. Other
☐ 9. Abuse History	☐ 18. Domestic Violence	☐ 27. Other

Brief narrative for each checked item (Refer to item number): 4. When asked to describe his mood, Mr. Farnsworth said, "I just can't pick myself up. Since last September it's just gotten worse". 7. Mr. Farnsworth reported that he drinks about 3 or 4 cans of beer per day. He uses marijuana a couple of times per week. He also smokes heroine. When asked how often he said, "I might go 2 to 3 years without it". 20. Mr. Farnsworth has been convicted of two prior felonies and was in a federal prison from 1993 to July 2009. 24. Status Post Traumatic Brain Injury. 26. Mr. Farnsworth has a history of combat and reports past and present symptoms of PTSD.

Goal:

Patient Role/Expectations during this hospitalization (check all that apply):

☐ Will engage in 5-minute reality based conversation with a staff member each day.	☐ The patient will identify current substance use/abuse issues.	☐ The patient will attend the following groups offered at the following times: _____
☒ The patient will cooperate with his / her forensic evaluation, to include answering questions, reporting symptoms of mental illness and reporting any side effects of the prescribed medication.	☐ The patient will report any signs or symptoms of mental illness, including: _____	☐ Will identify _____ coping skills to employ to better manage signs/symptoms of his/her illness and prevent problems in the community. Review these skills with ___ times per week.
☐ Will take medications daily as prescribed.	☐ Will identify ___ triggers that might cause him/her to stop taking medications and identify corresponding strategies for each trigger to optimize success with medication adherence.	☐ Will provide ___ reasons how medications help with management of his/her mental illness and will help.

Do Not Write In This Space
For Patient Identification Only

WESTERN STATE HOSPITAL
Tacoma, WA 98498-7213

CENTER for FORENSIC SERVICES
DIAGNOSTIC PLAN

☐ Complete his/her personal hygiene / activities of daily living to include: _____	☐ Other: _____	☐ Other: _____

Do Not Write In This Space For Patient Identification Only	WESTERN STATE HOSPITAL Tacoma, WA 98498-7213
	CENTER for FORENSIC SERVICES DIAGNOSTIC PLAN

Interventions (check all that apply; write in name of the staff responsible for each selected intervention):		
☒ The physician will meet individually with the patient for up to 15 minutes per week to evaluate/assess mood, symptoms, effectiveness of medication and adjust for side effects, if any. Will answer questions about medications, symptoms, etc. Will explain why medication adherence is important. H. Steinwender, MD Responsible Staff	☒ The MSW will meet with the patient for 15 minutes per week to assess for signs and symptoms of mental illness. Will work with the patient to identify strengths and how the patient's strengths will help accomplish the patient's goals. M. Bullock, MSW Responsible Staff	☒ The primary nursing care staff will engage the patient 3 times per week in conversation to answer questions and give instruction on ward expectations and intercede when necessary to provide a safe environment, and to encourage participation in ward and group activities. Jane PSA, James PSN, Carlos PSA Responsible Staff
☐ TRC staff will provide educational opportunities and materials including handouts, videos and discussions during classes held at the TRC 8:30 – 10:30 am M-F and 1-3 pm M-F. The classes will include: _____ (frequency/duration and focus of group). _____ Responsible Staff	☒ The RN will meet with the patient 1:1 3 times per week to assess for symptoms and provide support and reorientation to reality-based thinking. ~~Alison RN, Jean RN, Sam RN~~ Responsible Staff	☒ PSA will meet with the patient for 15 minutes weekly to discuss concerns, provide guidance, direction, and feedback regarding ADLs (hygiene, room cleanliness, personal grooming, etc). Jane PSA, James PSN, Carlos PSA Responsible Staff
☐ Psychologist will perform psychological and/or neuropsychological test if indicated. _____ Responsible Staff	☐ The RN will encourage attendance in on ward groups and the TRC, and will engage the patient in 1:1 reality-based conversation ___ times per week for up to ___ minutes. _____ Responsible Staff	☐: _____will assist the patient in identifying / listing the ways that chemical use has negatively impacted his/her life; process the list. Explore history, frequency, patterns of use. _____ Responsible Staff
☐ _____will assist patient in making the connection between underlying feelings of (anxiety, anger) and unacceptable choices/behaviors. Use problem-solving strategies to encourage the use of coping skills when (anxious/ angry). _____ Responsible Staff	☒ Other: The RN will observe for changes in ability to perform daily activities in relation to PTSD symptoms ALison RN Jean RN Sam RN _____ Responsible Staff	☐ Other: _____ _____ Responsible Staff

Date of most recent Dx: 4/20/2010	Principal	Diagnosed By: H. Steinwender, MD
Axis I	☒	Post Traumatic Stress Disorder
	☐	Depression, Not Otherwise Specified Polysubstance Abuse
Axis II	☐	Deferred
	☐	
Axis III	☐	Status Post Traumatic Brain Injury
	☐	

Axis IV (Severity of Psychosocial Stressors)	Low, Moderate or Severe	Specific factors or problems
☒ Problems with primary support group	M	No Contact with Family Members
☐ Problems related to the social environment		
☐ Educational problems		
☐ Occupational problems		
☒ Housing problems	M	Living with friends
☐ Economic problems		
☐ Problems with access to health care services		
☒ Problems related to interaction with the legal system	S	Mr. Farnsworth is recently (07/09) released from federal prison. Has current charge of Robbery 1.
☐ Other psychosocial and environmental problems		

Axis V Current GAF (Specific GAF score, not range): 45

Previous GAF (last discharge or outside source: ___ Date: _____ (if available)

Required Signatures

☐ I have had an opportunity to provide input to this plan.
☒ I understand my role and expectations for my plan.

Patient: [signature]

Patient Comments:

Psychiatrist: [signature] Date: 4/30/10

Do Not Write In This Space
For Patient Identification Only

WESTERN STATE HOSPITAL
Tacoma, WA 98498-7213

CENTER for FORENSIC SERVICES
DIAGNOSTIC PLAN

BP-S620.060 **PATIENT PROBLEM LIST** CDFRM
AUG 96

U.S. DEPARTMENT OF JUSTICE **FEDERAL BUREAU OF PRISONS**

PROBLEM LIST

DATE NOTED	SIGNIFICANT DIAGNOSES	SIGNIFICANT OPERATIONS/ INVASIVE PROCEDURES	DATE
9/19/07	CARE LEVEL I (II) III IV		
	HS PTSD		
	HS HEP. C		
	LUMBAGO		
1-29-08	Axis I PTSD		
	w/c Adverse Effect from Medicine		
	Axis II No Diagnosis		
	Axis III Hepatitis C		
	Axis IV Incarcerated		
	Vietnam Combat Experience		
	Axis V GAF 60		

ADVERSE / ALLERGIC
DRUG REACTIONS
(If none, record "No Known Drug Allergies")

NO KNOWN DRUG ALLERGIES

Patient Iden
(Name, Reg #

(This form may be replicated via WP)

FARNSWORTH
CHARLES VERDEL 20701-138
W/M/O/02-10-1950
HT/602 WT/215 HR/BN EY/BN
CUSTODY/

DEPARTMENT OF SOCIAL & HEALTH SERVICES

ASSISTANCE FOR THIS INDIVIDUAL IS BEING HELD PENDING RECEIPT OF THIS INFORMATION

A. CLIENT IDENTIFICATION

CLIENT'S NAME	DATE OF BIRTH	CASE NUMBER
CHARLES V FARNSWORTH	02/10/1950	4846201

Impairment/symptoms claimed by individual

PTSD

B. AUTHORIZATION TO RELEASE INFORMATION

I authorize BRETT T. COPELAND PsyD to release to the Department of Social and Health Services (DSHS)
EXAMINING PROFESSIONAL'S NAME

the following information regarding my condition, solely to evaluate eligibility for public assistance. This release includes diagnostic testing or treatment information concerning mental health, alcohol or drug abuse, sickle cell disease, and results of sexually transmitted disease, including HIV/AIDS (Revided code of Washington (RCW) 78.24.105).

INDIVIDUAL'S SIGNATURE X [signature] DATE 1/8/09

C. RELEVANT MEDICAL HISTORY

Indicate presenting problems, date of onset, hospitalizations and previous treatment. List alcohol or drug treatment and other medical treatment seperately from mental health treatment. CLIENT IS A 58-YEAR-OLD DIVORCED MALE WHO REPORTS MENTAL HEALTH CONCERNS STEMMING FROM VIETNAM. REPORTS A 2004 MENTAL HEALTH HOSPITALIZATION AND NO D/A HISTORY

D. CLINICAL FINDINGS

DO NOT COMPLETE THE INTERVIEW IF THE INDIVIDUAL IS INTOXICATED

Please indicate which type of disorder applies to this individual and provide requested information.

☐ 1. **MENTAL RETARDATION:**

a. Provide scores for any Intelligence Quotient (IQ) test you have performed.

Verbal score: _____ Performance score: _____ Full scale score: _____

Date of test: _____ Name of test: _____

b. If test scores are not available, can IQ range be estimated? ☐ Yes ☐ No

Please check range and explain basis for estimation.

(85 and above) _____ 70-84* _____ 69 and below* _____

*Contact the local office for approval for an IQ test before completing this evaluation.

Basis of IQ score estimate for scores of 85 and above:

ESTIMATE FROM HISTORY

RECEIVED JAN 08 2009 PLACE NORTH CSO

☐ 2. **ORGANIC MENTAL SYNDROME:** Do not complete this section unless organic mental syndrome is diagnosed under Section E.

	DEGREE OF SEVERITY*				
	NONE	MILD	MODERATE	MARKED	SEVERE
a. Memory defect for recent events	☐	☐	☐	☐	☐
b. Impoverished, slowed, perseverative thinking, with confusion or disorientation	☐	☐	☐	☐	☐
c. Labile, shallow, or course affect	☐	☐	☐	☐	☐
d. Is this condition permanent?	☐	☐	☐	☐	☐

e. Is the present couse of this condition:

☐ stable, ☐ deteriorating, ☐ improving, or ☐ unable to determine?

f. Briefly describe evidence upon which these ratings were based:

INCURRED A CONCUSSION IN 1968.

* Determining severity of each symptom, based on the degree of the symptom's interference with the individual's ability to perform the basic work-related activities of communicating and understanding and following directions.

None - No interference
Mild - No significant interference with basic work-related activities
Moderate - Significant interference with basic work-related activities
Marked - Very significant interference with basic work-related activities
Severe - Inability to perform one or more basic work-related activities

D. CLINICAL FINDINGS (CONTINUED)

☑ 3. **FUNCTIONAL MENTAL DISORDER:** Please indicate how this individual could perform during a normal work day, based on objective findings and your professional opinion.

Please use the medial provider instructions, included with this form, to increase reliability of this assessment.

Check only one box when rating the severity of each symptom on the scale.

SHORT CLINICAL RATING SCALE**	DEGREE OF SEVERITY* NONE	MILD	MODERATE	MARKED	SEVERE
a. Depressed mood			✓		
b. Suicidal trends	✓				
c. Verbal expression of anxiety or fear				✓	
d. Expression of anger (verbal and/or physical)		✓			
e. Social withdrawal			✓		
f. Motor agitation				✓	
g. Motor retardation	✓				
h. Paranoid behavior		✓			
i. Hallucinations				✓	
j. Thought disorder		✓			
k. Hyperactivity	✓				
l. Physical complaints			✓		
m. Global illness: Based on intensity and pervasiveness of all symptoms and impairment of functioning. This item is the rater's assessment and is not based only on scores of preceding items				✓	

** Archives of General Psychiatry 1970, 23, 233-240, abridged.

E. ASSESSMENT/DIAGNOSIS

1. List each established diagnosis, including the diagnostic code from the diagnostic and Statistical Manual of Mental disorders, Third Edition - Revised (DSM III-R). Include diagnosed alcohol or drug abuse and identify both Axis 1 and Axis 2 diagnosis.

DIAGNOSTIC CODE (DSM III-R)	DIAGNOSIS
309.81	PTSD, CHRONIC, DELAYED ONSET
300.01	PANIC D/O W/O AGORAPHOBIA

2. List each possible diagnosis, where additional information concerning the medial condition must be obtained to either establish or rule out the diagnosis. Please specify the additional information, medical procedures or medical service needed to help define the diagnosis.

POSSIBLE DIAGNOSIS	ADDITIONAL INFORMATION NEEDED

F. SUBSTANCE ABUSE

1. Is there indication of alcohol or drug abuse? ☐ YES; **IF YES, COMPLETE THIS SECTION.** ☑ NO
2. Are any of the diagnosed conditions listed in Section E.1. caused by past or present alcohol or drug abuse? ☐ YES ☐ No

a. List each diagnosed condition likely caused by alcohol or drug abuse and explain the relationship of the condition to alcohol or drug abuse.

b. Would alcohol or drug treatment be likely to decrease the severity of the condition?

c. What effect would sixty (60) days of abstinence from alcohol or drug use have on each diagnosed condition likely caused by alcohol or drug use?

F. SUBSTANCE ABUSE (CONTINUED)

3. To what extent does alcohol or drug abuse exacerbate other diagnosed conditions?

4. Does the individual acknowledge the existence of alcohol or drug abuse? ☐ YES ☐ No
If not, please describe the evidence that indicates alcohol or drug abuse.

G. FUNCTIONAL LIMITATIONS

Please check the degree of limitation that diagnosed conditions impose on the individual's ability to perform on a normal day to day work basis. Basic work-related activities include communicating and understanding and following instructions.

NOTE: Base the degree of limitation on reports by the individual and others concerning behavior over the past month and interpretation of appropriate tests, along with your own observation during the interview.

1. Cognitive factors:

	DEGREE OF SEVERITY*				
	NONE	MILD	MODERATE	MARKED	SEVERE
a. Ability to understand, remember and follow simple (one or two step) instructions		✓			
b. Ability to understand, remember and follow complex (more then two step) instructions			✓		
c. Ability to learn new tasks		✓			
d. Ability to exercise judgement and make decisions				✓	
e. Ability to perform routine tasks		✓			

f. Describe the basis for each rating in this section:

ANXIETY ASSOCIATED W/ PTSD LIMITS CONCENTRATION, HOWEVER MASTER'S DEGREE SUGGESTS GOOD COGNITIVE ABILITIES.

g. Are the above cognitive limitations most likely the result of alcohol or drug abuse?
☐ YES ☑ No

h. If yes, are the cognitive limitations likely to dissipate within sixty (60) days of sobriety?
☐ YES ☐ No

2. Social factors:

a. Ability to relate appropriately to co-workers and supervisors			✓		
b. Ability to interact appropriately in public contacts				✓	
c. Ability to respond appropriately to and tolerate the pressure and expectations of a normal work setting				✓	
d. Ability to care for self, including personal hygiene and appearance		✓	✓		
e. Ability to control physical or motor movements and maintain appropriate behavior			✓		

f. Describe the basis for each rating in this section:

PTSD SYMPTOMS CAUSE INTERPERSONAL DISTRUST AND ISOLATION.

3. Describe effects of prescribed medication on the individual's ability to perform normal day to day work activites.

MOOD STABILIZATION

4. Describe the effects of the diagnosed conditions on the individual's ability to care for children, if applicable.

N/A

H. PLAN OF CARE/PROGNOSIS

	YES	NO
1. Is the individual eligible to receive treatment from your agency?	☐	☑
2. Is mental health intervention likely to restore or substantially improve the individual's ability to work for pay in a regular and predictable manner?	☑	☐

a. Explain: COGNITIVE ABILITIES + ~~COGNITIVE ABILITIES~~ BC MOTIVATION SUGGESTS FAVORABLE LONG-TERM PROGNOSIS.

b. Describe recommended plan of care, including frequency and type of interventions, i.e. medication, psychological rehabilitation, group and individual therapy, day treatment, case management services, etc.

MED MANAGEMENT + COUNSELING

3. Is the individual currently receiving mental health services?	☑	☐
a. Is the individual cooperating with the treatment plan?	☑	☐

b. Explain:

TAKING MEDS AS PRESCRIBED

4. Describe treatment results to date.

MOOD STABILITY

5. Are additional tests or consultations needed? Explain (include any recommendations for neurological or physical evaluations not noted elsewhere):	☐	☑

6. Estimate length of time (weeks, months) the individual will be impaired to the degree indicated in Section D (CLINICAL FINDINGS) and Section G (FUNCTIONAL LIMITATIONS).

Maxium INDEFINITE Minimum 1 YEAR

7. Describe conditions which might impair this individual's ability to cooperate with treatment (such as physical handicap, genuine fear of treatment, treatment not reasonably available, religious scruples, difficulty accessing treatment).

FEAR OF PUBLIC PLACES

I. MENTAL HEALTH PRIORITY POPULATIONS

Does the individual meet the criteria for one of the priority populations defined in the Community Mental Health Services Act (RCW 71.24.035)?

1. ☐ Acutely mentally ill 2. ☑ Chronically mental ill 3. ☐ Seriously disturbed 4. ☐ These terms do not apply

J. ADDITIONAL REMARKS

Other observations which, in our professional opinion, may have a bearing on this individual's ability to perform during a normal work day or to care for children. Please include indication of a possible learning or developmental disability, such as a history of special education, sheltered employment, training, etc. REY = 10, NOT MALINGERING

BAI = 35, EXTREMELY SEVERE ANXIETY

The information you provide is subject to Washington State Public Disclosure laws and may be released to the individual upon his or her request. All information disclosed from your records will remain confidential under state law and DSHS discloses no further information without the written consent of the individual to whom it pertains, or as otherwise permitted by state law.

RETURN THIS REPORT TO.	EXAMINING PROFESSIONAL SIGNATURE/TITLE	DATE
Pierce North CSO PO BOX 1557 TACOMA WA 98401-1557	[signature] PhD	1/08/09
	PRINT NAME OF EXAMINING PROFESSIONAL: BRETT J. COPELAND	SPECIALTY: PSYCHOLOGIST
	ADDRESS STREET	
INCAPACITY SPECIALIST SIGNATURE: Lynne Hay-Chapman (by PRET)	CITY / STATE / ZIP CODE	
TELEPHONE NUMBER: 253.983.6760 / DATE: 01/08/2009	EXAMINATION DATE: 1/08/09	TELEPHONE NUMBER: (253) 752-7320
FAX NUMBER: 253-593-2334	RELEASING AUTHORITY SIGNATURE/TITLE (FOR USE BY THE VETERANS ADMINISTRATION) OR AREA OF ADVANCED TRAINING FOR ARNP	DATE

MENTAL STATUS EXAMINATION (MSE)

General Appearance

Hygiene/Grooming ☑ Average ☐ Other _____

Eye contact ☐ None ☑ Poor ☐ Fair ☐ Good

Dress ☑ Appropriate ☐ Inappropriate _____

Attitude/Behavior

Patient attitude toward examiner ☑ Cooperative ☐ Other _____

Mood/Affect

MODERATELY DEPRESSED

Orientation

☑ Day ☑ Date ☑ Time ☑ Other CIRCUMSTANCE

Stream of Mental Activity

Speech ☐ Slow ☑ Average ☐ Fast/Pressured ☑ Quiet ☐ Average ☐ Loud

Property of speech ☑ Normal ☐ Other _____

Memory/Concentration

Recall of 3 objects Immediate 3/3 5 Minute 1/3

Digit span _____ Forward 3 Backward 3

3 Step task ☑ Correct ☐ Impaired _____

Serial 3's ☐ Intact ☑ Errors: 3

Serial 7's ☐ Intact ☑ Errors 2

Memory impairment ☐ Absent ☑ Short-term ☑ Long-term

Fund of Knowledge

☑ President ☑ Vice President ☑ Governor

☑ Knowledge of current events ☐ Impaired

☑ Knowledge of bordering states/5 cities ☐ Impaired

Abstract Thought

Rolling stones ☑ Intact ☐ Other _____

Glass houses ☑ Intact ☐ Other _____

Insight/Judgment

Lost in forest ☑ Intact ☐ Other "FOLLOW THE SUN"

Fire in theatre ☑ Intact ☐ Other _____

Level of insight ☐ None ☐ Poor ☐ Fair ☑ Full

Content of Thought

Delusions ☑ Absent ☐ Other _____

Hallucinations ☐ Absent ☑ Other PTSD FLASHBACKS

Paranoia ☑ Absent ☐ Other _____

Suicidal/Homicidal ☐ Absent ☑ Other OCCASIONAL IDEATION W/O PLAN OR INTENT

Activities of Daily Living

Hygiene/Grooming	☑ No/mild impairment	☐ Impaired	
Cooking/Shopping	☑ No/mild impairment	☐ Impaired	
Cleaning/Laundry	☑ No/mild impairment	☐ Impaired	
Money Management	☑ No/mild impairment	☐ Impaired	
		☐ Protective Payee recommended	
Transportation	☑ No/mild impairment	☐ Impaired	
Friends/Socialization	☐ No/mild impairment	☑ Impaired	INADEQUATE

Concentration (Reading, TV, Computer, Conversation)

IRREGULAR CONCENTRATION

Vegetative Symptoms (Sleep, Appetite, Hobbies)

SLEEP: 3-4 PER NIGHT, OKAY APPETITE, ENJOYS READING

Deterioration/Decompensation

STABLE

How does this individual meet the DSM IV criteria for the diagnoses given? Estimated GAF?

DAI AND HISTORY

GAF = 48

Signature [signature] **Date** 1/08/09

Name: Charles Farnsworth
Date: 1/08/09
Additional Symptoms:
Current Medications: Wellbutrin
HISTORY:
Family of Origin: Describes upbringing as "good." Reports that his parents divorced when he was 6 years old, but reports that he had a good relationship with his parents and siblings. Denies abuse history.
Education: Reports he received a Master's degree in Theology.
Marriage/Family: Reports he is divorced from a marriage that lasted from '77 to '82. Reports he has two children, ages 35 and 30, and reports that he is trying to re-establish a relationship with them now that he has been released from prison.
Trauma/Loss/Abuse: Reports that he experienced PTSD symptoms due to his service in Vietnam. Reports delayed onset of PTSD.
Work: Reports he last worked for pay in 1993 as an Office Manager for 1½ years and reports that he quit due to problems with his boss. Reports he had extreme difficulty interacting with others. Has not worked since then because he has been in prison. Longest job: 1½ years
Military: Served in the military from '67 to '68 and participated in Vietnam.
Medical: Back pains and hepatitis C
Legal: Reports he was in prison from '93 to '02 and '04 to December '08 for gun possession and robbery.

BAI

NAME Fa DATE

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by eacl symptom during the PAST WEEK, INCLUDING TODAY, by placing an X in the corresponding space in the column next to each symptom

	NOT AT ALL	MILDLY It did not bother me much.	MODERATELY It was very unpleasant, but I could stand it.	SEVERELY I could barely stand it.
1. Numbness or tingling.			X	
2. Feeling hot.	X			
3. Wobbliness in legs.		X		
4. Unable to relax.				X
5. Fear of the worst happening.				X
6. Dizzy or lightheaded.	X			
7. Heart pounding or racing.				X
8. Unsteady.			X	
9. Terrified.		X		
10. Nervous.				X
11. Feelings of choking.	X			
12. Hands trembling.			X	
13. Shaky.			X	
14. Fear of losing control.				X
15. Difficulty breathing.				X
16. Fear of dying.		X		
17. Scared.		X		
18. Indigestion or discomfort in abdomen.	X			
19. Faint.				X
20. Face flushed.		X		
21. Sweating (not due to heat).		X		
		6	8	21

35

THE PSYCHOLOGICAL CORPORATION®
Harcourt Brace & Company
SAN ANTONIO
Orlando • Boston • New York • Chicago • San Francisco • Atlanta • Dallas
San Diego • Philadelphia • Austin • Fort Worth • Toronto • London

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41 42 43 44 45 A B C D E
0154018422

UNITED STATES OF AMERICA

Certification of
Military Service

****

This certifies that	Charles V. Farnsworth 2331951
was a member of the	United States Marine Corps
from	June 26, 1967
to	November 18, 1968
Service was terminated by	Undesirable Discharge
Last Grade, Rank, or Rating	Private
Active Service Dates	Same As Above

Date of Birth: Feb. 10, 1950 Place of Birth: Pocatello, ID

****

Given at St. Louis, Missouri on April 11, 2006

National Personnel Records Center
(Military Personnel Records)
National Archives and Records Administration

THE ARCHIVIST OF THE UNITED STATES IS THE PHYSICAL CUSTODIAN OF THIS PERSON'S MILITARY RECORD

This Certification of Military Service is issued in the absence of a copy of the actual Report of Separation or its equivalent. This document serves as verification of military service and may be used for any official purpose. Not valid without official seal.

1

NATIONAL ARCHIVES AND RECORDS ADMINISTRATION

NA FORM 13080 (REV. 04-01)

13

National Personnel Records Center

Military Personnel Records, *9700 Page Avenue St. Louis, Missouri 63132-5100*

April 13, 2006

MR CHARLES FARNSWORTH-875475
D307
WSR, P.O. BOX 777
MONROE, WA 98272

RE: Veteran's Name: FARNSWORTH, CHARLES
SSN/SN: 528708741
Request Number: 1-1167796063

Dear Sir or Madam:

Thank you for contacting the National Personnel Records Center. We are pleased to enclose NA Form 13038, *Certification of Military Service*. Since the military record did not contain a copy of a Report of Separation, the enclosed NA Form 13038 is furnished in lieu of the separation document and will verify military service. The military service information provided on this form has been extracted from the records on file at this Center and may be used for any official purpose, including application for and adjudication of veterans benefits. A seal has been affixed to the enclosed document to attest to its authenticity.

We have attempted to provide the information for personnel records requested, however, your military record was charged out and has not been returned to our file area. Our records indicate that your record was loaned out on a prior request. All available personnel records are enclosed.

If you have questions or comments regarding this response, you may contact us at 314-801-0800 or by mail at the address shown in the letterhead above. If you contact us, please reference the Request Number listed above. If you are a veteran, or a deceased veteran's next of kin, please consider submitting your future requests online by visiting us at http://vetrecs.archives.gov.

We Value Our Veterans' Privacy
Let us know if we have failed to protect it.

Sincerely,

Patricia L. Murray

PATRICIA L. MURRAY
Archives Technician (3B)

Enclosure(s)

AMVETS

AMERICAN VETERANS
SERVICE OFFICE
5717 SOUTH TYLER
TACOMA, WASHINGTON 98409

TELEPHONE: CML (253) 472-1966
(253) 472-2822
FAX: (253) 475-6715

CHARLES,

I regret to inform you that we are unable to retrieve you a DD214. Thet reason is NPRC is unable to find or complete one for you & that is why they sent you a certification of service. However the certification of service that was sent to you works just the same as your DD214.

Also this is the first letter that we have received from you.

Austin Clark, Aut Cl

State Service Director

ROUT/COLOR-CODE.....C/O DATE.....SE CHER.....ADDRESS-CODE 13

SSAN/SN	NA	SVC-CODE	RE	TY-NO.		
528 70 8741	N O T U N D				RUN DATE	11/15/88
002 33 1951	FARNSWORTH CHARLES	MC	N	3 286 711	RUN TIME	11.00
002 33 1951	FARNSWORTH CHARLES	NM	N	3 444 085	RUN PAGE	00714
					INQ PAGE	00001

==========REQUEST FOR INFORMATION VA FORM 70-3101-4 JUL 1986==========

DATE 11-11-88

TYPE-OF-REQUEST ORIGINAL

TYPE-OF-CLAIM EDUCATION

DATA-REQUESTED SERVICE

VA-INS-NO.

VA-FILE-NO. 528 70 874

1.NAME FARNSWORTH,CHARLES,V,JR

2.SSAN 528-70-8741

3.SERVICE-BRANCH MARINE CORPS

4.DATE-OF-BIRTH 02-16-50

5.PLACE-OF-BIRTH

6.DATE-OF-DEATH

==========

VETERANS ADMINISTRATION (326)
575 NORTH PENNSYLVANIA ST
INDIANAPOLIS IN 46204

ORIGINATING-UNIT ADJUDICATION 2304

==========

	7. ENT ACT DUTY	8. SEP ACT DUTY	9. CHAR DTH	10.SVC NUMBER	11. LAST GRADE, RATE, RANK, AND/OR ORGANIZATION	12.SEP FOR ON FILE NO
A	06-26-67	11-18-68	DTH	02331951		
B						

==========

13.SUBSEQUENT-RES/RET-STATUS NONE 14.TERMINAL-DATE 15.RET-STATUS

==========

16.ALLEGED DISEASE/INJURY 17.TREATMENT-DATES 18.PLACE-OF-TREATMENT 19.TYPE

A

==========

20.FACTS AND CIRCUMSTANCES OF DTH DISCHARGE ON 11-18-68, INCLUDING RECORDS OF COURTS MARTIAL, PUNISHMENT UNDER ARTICLE 15 UCMJ, AND BOARD OF OFFICERS PROCEEDINGS.

( ) AVAILABLE REQUESTED RECORDS FORWARDED.

( ) ITEMS 1, AND 2 OR 10 (WHICHEVER WAS THE IDENTIFIER) AND 7-9 VERIFIED CORRECT.

(X) ITEMS 1, AND 2 OR 10 (WHICHEVER WAS THE IDENTIFIER) AND 7-9 VERIFIED CORRECT, EXCEPT

10. 2331951

Attached is all of the available information concerning F+C.

ENCLOSURES ( )X-RAYS ( )CLINICAL RECORDS
( )HEALTH RECORDS ( )DENTAL RECORDS
( )ENTRANCE PHYSICAL ( )MEDICAL RECORDS
( )SEPARATION PHYSICAL ( )OTHER RECORDS (Review of Work Drafs)

SIGNATURE AND TITLE

DATE

DATE 12/1/88
NATIONAL PERSONNEL RECORDS CENTER (NPRC)
ST. LOUIS, MO 63132

VETERANS ADMINISTRATION
Regional Office
575 North Pennsylvania Street
Indianapolis, IN 46204

February 15, 1989
SS 528 70 8741
FARNSWORTH, Charles V.

ADMINISTRATIVE DECISION

ISSUE: Character of discharge and entitlement to healthcare benefits under Chapter 17, Title 38 U.S.C.

FACTS: This former serviceman entered the United States Marine Corps. on June 26, 1967 and received an undesirable discharge, by reason of misconduct, on November 18, 1968.

Evidence of record shows veteran was AWOL for nine days, forfeited $25.00 and had two weeks extra duty. He was recommended for discharge, by reason of willful misconduct, based on conviction by civil authorities of transporting a stolen automobile. In addition, he admitted to using LSD for two years.

DISCUSSION: 38 C.F.R. 3.12(d)(4), provides that a discharge by reason of willful and persistent misconduct is considered to have been issued under dishonorable conditions. This includes a discharge under other than honorable conditions if it is determined that it was issued because of willful and persistent misconduct.

38 C.F.R. 3.360, provides healthcare benefits under Chapter 17, Title 38 U.S.C. for veterans discharged under other than honorable conditions for disabilities incurred in or aggravated during military active duty with exception that these benefits are not available to a veteran whose service was terminated by a bad conduct discharge or when one of the bars listed in 38 C.F.R. 3.12(c) applies.

CONCLUSION: The veteran's discharge on November 18, 1968, is considered to have been issued under dishonorable conditions. He is, however, entitled to healthcare benefits under Chapter 17, Title 38 U.S.C. as no bar applies under 38 C.F.R. 3.12(c).

SUBMITTED BY: Z. Bledsoe — Adjudicator — 3-1-89 Date

APPROVED BY: Robert J. Lemon — Assistant Adjudication Officer — 3/3/89 Date

ZBLEDSOE:dd 2-15-89 211A 2-1-89

V. Regional Office
575 N. Pennsylvania St.
Indianapolis, IN 46204

NOV 28 1988

In Reply Refer To:
326
SS 528-70-8741

Mr. Charles V. Farnsworth
P. O. Box 33
Terre Haute, IN 47808

Dear Mr. Farnsworth:

You have applied for educational benefits based upon military service. Entitlement to VA benefits is contingent upon discharge from military service under conditions other than dishonorable.

If your service was terminated by an "other than honorable" discharge we are required to examine all relevant facts, including a report from the service department of the facts and circumstances leading to your discharge for the purpose of determining whether or not you were discharged under conditions other than dishonorable. If you received a "dishonorable" discharge, service records will not be routinely requested by the VA.

The determination made by the Veterans Administration is of the utmost importance to you. An unfavorable decision will not only result in the denial of the benefit you presently seek, but, in addition, it will bar entitlement to all gratuitous VA benefits which you or your dependents may seek now or in the future based on this period of service.

The criteria on which all character of discharge determinations are made are contained in title 38 of the Code of Federal Regulations, section 3.12. A copy of this regulation is attached.

For the purpose of determining whether or not you were discharged under conditions other than dishonorable, we are required to examine all relevant facts, including a report from the service department, of the events leading to the discharge. You should submit any evidence, contention or argument bearing on the issue that will present your side of the case. If the circumstances leading to your discharge involved frequent or prolonged periods of unauthorized absence, you should include a statement explaining the reason(s) for these absences.

"America is #1—Thanks to our Veterans"

Mr. Charles V. Farnsworth SS 528-70-8741

You may be represented, without charge, by an accredited representative of a veterans organization or other service organization recognized by the Administrator of Veterans Affairs, or you may employ an attorney or secure a local Legal Aid Service counsel to assist you with your claim; however, the services of an attorney are subject to a maximum fee limitation of $10, under 38 U.S.C. 3404(c). If you wish representation, let us know and we will send you the necessary forms. If you have already designated a representative, no further action on your part is required. You may have a personal hearing prior to the determination. If you wish a personal hearing to present evidence or argument on any point of importance in your claim, notify this office and we will arrange a time and place for the hearing. You may bring witnesses if you desire who have personal knowledge of the circumstances and their testimony will be entered in the record. The VA will furnish the hearing room, provide hearing officials, and prepare the transcript of the proceedings. No other expense connected with the hearing can be borne by the VA.

If we do not hear from you within 30 days we must assume you have no additional evidence to submit and do not desire additional time for presentation of your case. A decision will be made on the basis of the evidence of record.

It is the regular policy of the VA to assist a claimant in developing the pertinent facts and to render a decision which grants every benefit that can be supported in law while protecting the interest of the Government. You may be assured that we will try to help you in every reasonable way so that a fair and impartial decision will result.

Sincerely yours,

F. G. RATHGEBER
Adjudication Officer

Enclosure
38 CFR 3.12

211A/327 AE:akp

RE: 346/Team7/a 9/13/07

Dear T. Clark,

On April 19, 2007, in response to a request for my C-file, you sent me a reply informing me that my request had been forwarded to the VA Records Management Center. I recently received their response and am enclosing that with this letter. Attachment A.

Within their response is an Administrative Decision dated February 15, 1989 by the Veterans Administration in Indianapolis, Indiana. While I have made continuous requests for all of my military records, including dishcarge, beginning in about 1971, three years after my discharge, I have never received any other than those included in this letter, except a few medical records from MCRD (boot camp), which are not included with these records. I have never been able to attack my discharge because of my missing records. I recently filed a claim in the Court of Federal Claims in Washington, D.C. for my unlawful discharge. See attachement B.

In the meantime, I am requesting another Administrative Hearing on these matters and am requesting the VA's assistance to inusre that any rights and privileges I may retain remain in effect at all times. It is my contention that I am and have been unlawfully discharged and am eligible for the full panalopy of Vetern's benefits and request the same. If you will read attachments B regarding my claim in federal court, you will have a much better understanding of what has taken place.

It is my contention that the Admistrative Hearing dated February 15, 1989 is solely based on 2 Review of Discharge documents, neither of which is signed and therefore not valid proof of my discharge, type of discharge, or whehter it was lawful. I have been seeking a just determination of my VA benefits for over 40 years without success. As a Vietnam Veteran, I believe I deserve a fair and just hearing on these matters.

On September 19, 2007, I will be transferrred into federal custody at the below address for your response. Please let me know how long a determination will take.

Charles V. Farnsworth 20701-138
Federal Detention Center
POB 13900
Seattle, WA 98189

CEST
EP: 290
Date of Claim: 9/17/07
Established by: S
Date Established: 9/24/07

WASHINGTON APPELLATE PROJECT

May 09, 2013 - 3:24 PM

Transmittal Letter

Document Uploaded: 431670-Statement of Additional Grounds Brief.pdf

Case Name: STATE V. CHARLES FARNSWORTH

Court of Appeals Case Number: 43167-0

Is this a Personal Restraint Petition? Yes ■ No

The document being Filed is:

Designation of Clerk's Papers Supplemental Designation of Clerk's Papers

Statement of Arrangements

Motion: ____

Answer/Reply to Motion: ____

■ Brief: __Statement of Additional Grounds__

Statement of Additional Authorities

Cost Bill

Objection to Cost Bill

Affidavit

Letter

Copy of Verbatim Report of Proceedings - No. of Volumes: ____
Hearing Date(s): _____

Personal Restraint Petition (PRP)

Response to Personal Restraint Petition

Reply to Response to Personal Restraint Petition

Petition for Review (PRV)

Other: _____

Comments:

No Comments were entered.

Sender Name: Maria A Riley - Email: **maria@washapp.org**