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AMERICAN CIVIL LIBERTIES UNION
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SUPERIOR COURT OF CALIFORNIA

COUNTY OF MARIN

AMERICAN CIVIL LIBERTIES UNION OF
NORTHERN CALIFORNIA,

Petitioner,

vs.

CALIFORNIA DEPARTMENT OF
CORRECTIONS AND REHABILITATION,

Respondent.

Case No. **CV1504195**

**VERIFIED PETITION FOR
PEREMPTORY WRIT OF MANDATE
AND WRIT OF MANDATE**

[Code Civ. Proc. §§ 1085, 1086, 1088.51,
1095]

Department: **FE**

Hrg. Date: **1-8-2016**
~~Nov. 30, 2015~~

Hrg. Time: 9:00 am

FILED

NOV 18 2015

**JAMES M. KIM, Court Executive Officer
MARIN COUNTY SUPERIOR COURT
By: R. Smith, Deputy**

INTRODUCTION

1. This is a suit to enforce the California Public Records Act. On August 14, 2015 and September 4, 2015, Petitioner American Civil Liberties Union of Northern California submitted requests to obtain records relating to the Respondent California Department of Corrections and Rehabilitation's lethal injection practices and protocols. Although Respondent has produced a small number of documents, it is clear that a substantial number of responsive and non-privileged documents exist and have not been produced. Petitioner therefore asks this court for (1) a peremptory writ of mandate to compel Respondent CDCR to provide those records that are subject to disclosure immediately and without further delay; (2) a peremptory writ of mandate compelling CDCR to provide Petitioner with a list specifically describing each record that CDCR is withholding and specifying the exemption(s) that CDCR contends to apply to each such record; and (3) a writ of mandate compelling CDCR to produce all requested records except those records that the Court holds are exempt from disclosure.

PARTIES

2. Petitioner American Civil Liberties Union of Northern California (“ACLU-NC”) is a nonprofit public interest organization with a longstanding goal of advancing free-speech and open-government rights. The ACLU-NC is a member of the public under Government Code § 6252(b) and is beneficially interested in the outcome of these proceedings; it has a clear, present and substantial right to the relief sought herein and no plain, speedy, and adequate remedy at law other than that sought herein.

3. Respondent California Department of Corrections and Rehabilitation (“CDCR”) is a public agency within the meaning of Government Code § 6252(d).

4. CDCR is in possession of the records sought by this Petition.

JURISDICTION AND VENUE

5. This court has jurisdiction under Government Code §§ 6258, 6259, Code of Civil Procedure §§ 1060, and 1085, and Article VI, section 10 of the California Constitution.

1 6. The records in question, or some portion of them, are situated in the County of
2 Marin, meaning that suit may be brought in this County. (Gov. Code § 6259.) Also, the suit
3 could be brought here because the CDCR resides in, and acts and omissions complained of herein
4 occurred in, the County of Marin. (See Code Civ. Pro. § 393.)

5 **THE CALIFORNIA PUBLIC RECORDS ACT**

6 7. Under the California Public Records Act (“PRA”), Government Code § 6250 et
7 seq., all records that are prepared, owned, used, or retained by any public agency, and that are not
8 subject to the PRA’s statutory exemptions to disclosure must be made publicly available for
9 inspection and copying upon request. (Gov. Code § 6253.)

10 8. The PRA requires the government to determine whether to disclose records within
11 10 days of receiving a request, unless “unusual circumstances” justify a 14-day extension of that
12 period. (Id. § 6253(c).) The government must then promptly inform the requesting party of what
13 records will be disclosed and provide an estimate of when they will be available. (Id.) It must
14 then promptly provide a copy of the records to the requesting person or allow inspection of the
15 records. (Id. § 6253(b).) The statute does not allow the government to delay or obstruct the
16 copying of public records. (Id. § 6253(d).)

17 9. Whenever it is made to appear by verified petition to the superior court of the
18 county where the records or some part thereof are situated that certain public records are being
19 improperly withheld from a member of the public, the court shall order the officer or person
20 charged with withholding the records to disclose the public record or show cause why he or she
21 should not do so. (Id. § 6259(a).) The court shall decide the case after examining the record in
22 camera (if permitted by the Evidence Code), papers filed by the parties and any oral argument
23 and additional evidence as the court may allow. (Id.)

24 10. If the Court finds that the failure to disclose is not justified, it shall order the public
25 official to make the record public. (Id. § 6259(b).)

26 11. The California Constitution provides an additional, independent right of access to
27 government records: “The people have the right of access to information concerning the conduct
28

1 of the people’s business, and, therefore, the meetings of public bodies and the writings of public
2 officials and agencies shall be open to public scrutiny.” (Cal. Const., art. 1, § 3(b)(1).)

3 **FACTS**

4 **A. California’s Failed Efforts to Establish a Lawful Lethal Injection Protocol.**

5 12. The State of California executes condemned inmates by lethal injection.¹ To date,
6 the State has failed to adopt a lethal injection protocol that complies with the law.

7 13. In December 2006, a federal district court found that California’s then-existing
8 lethal injection protocol violated the Eighth Amendment because it created an undue risk that the
9 inmate would suffer excessive pain. (*Morales v. Tilton* (2006) 465 F.Supp.2d 972 (“*Morales I*”).)
10 California’s three-drug protocol, the same “used by the federal government and most other states,”
11 involved “sodium thiopental, a barbiturate sedative, to induce unconsciousness; pancuronium
12 bromide, a neuromuscular blocking agent, to induce paralysis; and potassium chloride, to induce
13 cardiac arrest.” (Id. at 975.) The court held that if sodium thiopental (the sedative) did not render
14 the inmate unconscious, he would experience excruciating, unconstitutional level of pain. (Id. at
15 975, 978.) The constitutional question thus turned on whether “sodium thiopental [was] delivered
16 properly”; the court found that, under California’s protocol, it was not, because of, among other
17 things, inadequate training of execution team members and improper mixing, preparation, and
18 administration of sodium thiopental by execution team members. (Id. at 979-80.)

19 14. In response to the ruling, CDCR decided to revise the protocol. The revised
20 protocol was made public in May 2007. In October 2007, the Marin County Superior Court held
21 that the adoption of the revised protocol violated the Administrative Procedures Act (“APA”),
22 Gov. Code § 11346, et seq. The Court of Appeal affirmed that decision in October 2008.
23 (*Morales v. California Dept. of Corrections & Rehabilitation* (2008) 168 Cal.App.4th 729
24 (“*Morales II*”).) As the Court of Appeal explained, “[a] major purpose of the APA is to provide a
25

26 ¹ By statute, the State of California may only execute inmates condemned to die by lethal gas or
27 lethal injection. (See Pen. Code, § 3604(a).) A condemned inmate may elect between the two
28 methods, and if he does not make an election, the default method is lethal injection. (See id.,
§ 3604(b).)

1 procedure for persons or entities affected by a regulation to be heard on the merits in its creation.”
2 (Id. at 736.)

3 15. In May 2009, CDCR issued a proposed regulation governing lethal injection that
4 elicited almost 30,000 written comments. In January 2010, CDCR provided public notice of
5 modifications to the proposed regulation. In June of that year, the Office of Administrative Law
6 (“OAL”) disapproved the regulation and CDCR issued further modifications to address OAL’s
7 findings. The final regulation took effect in August 2010.

8 16. Even before the regulation became final, however, litigation had been filed in the
9 Marin County Superior Court challenging the manner in which CDCR had promulgated the
10 regulation. The trial court found that CDCR had once again violated the APA in issuing its
11 revised protocol—a decision that was affirmed by the Court of Appeals in May 2013. (*Sims v.*
12 *Dept. of Corrections & Rehabilitation* (2013) 216 Cal.App.4th 1059.) The agency had again
13 proposed a three-drug protocol. (Id. at 1066.) The Court of Appeal held CDCR’s lethal injection
14 regulations invalid because, among other things, CDCR failed “to set forth ... alternatives to the
15 proposed three-drug lethal injection protocol; ... to provide a rationale for rejecting those
16 alternatives; ... [or] to explain, with supporting documentation, why the three-drug alternative was
17 superior to the use of a single drug.” (Id. at 1074.)

18 17. In July 2013, CDCR announced that, at the direction of Governor Brown, it would
19 not continue its legal defense of the three-drug protocol held invalid in *Sims* and would instead
20 pursue development of a one-drug protocol.

21 18. In November 2014, a lawsuit was filed in Sacramento County Superior Court
22 seeking to compel CDCR to promulgate a revised lethal injection protocol. As part of a settlement
23 of that action, CDCR agreed to commence promulgation of proposed regulatory standards
24 regarding lethal injection 120 days after the United States Supreme Court’s decision in *Glossip v.*
25 *Gross*, which was handed down on June 29, 2015. ((2015) 135 S. Ct. 2726, reh’g. den. Aug. 28,
26 2015.)

1 19. On November 6, 2015, CDCR published proposed lethal injection regulations in
2 the California Regulatory Notice. (Cal. Reg. Notice Register 2015. No. 45-Z, p. 2024
3 <http://www.oal.ca.gov/September_2015_Notice_Register.htm> [as of November 6, 2015].)

4 20. CDCR has established a comment period on the proposed regulations that will
5 close on January 22, 2016.

6 21. The proposed regulations provide for a one-drug protocol that permits the Warden
7 of San Quentin State Prison to select one chemical from the following list of four barbiturates:
8 amobarbital, pentobarbital, secobarbital, and thiopental (referred to above as sodium thiopental).

9 **B. Other States' Unlawful and Incompetent Efforts to Implement Lethal**
10 **Injection.**

11 22. In the time since CDCR's last lethal injection regulation was struck down, reports
12 of problems with the implementation of lethal injection protocols in other states have mounted.

13 23. On April 29, 2014, Oklahoma executed Clayton D. Lockett using a sedative called
14 midazolam as part of a three-drug protocol. The execution team pricked him over 16 times over
15 the course of an hour just to establish intravenous access. (See Stern, *The Cruel and Unusual*
16 *Execution of Clayton Lockett*, The Atlantic (June 2015)

17 <<http://www.theatlantic.com/magazine/archive/2015/06/execution-clayton-lockett/392069/>>;
18 Fretland, *Scene at Botched Oklahoma Execution of Clayton Lockett Was 'a Bloody Mess,'* The
19 Guardian (Dec. 13, 2014) <[http://www.theguardian.com/world/2014/dec/13/botched-oklahoma-](http://www.theguardian.com/world/2014/dec/13/botched-oklahoma-execution-clayton-lockett-bloody-mess)
20 [execution-clayton-lockett-bloody-mess](http://www.theguardian.com/world/2014/dec/13/botched-oklahoma-execution-clayton-lockett-bloody-mess)> [as of Nov. 11, 2015].) The doctor present at the
21 execution stated that after the lethal injection drugs were administered, Lockett "raised his head
22 up" and was "kind of jerking it," "started moaning," and "was seizing." (Id.) The prison warden
23 later testified that the scene was "a bloody mess," and that she "was kind of panicking," and
24 "[t]hinking oh my God. He's coming out of this. It's not working." (Id.) A victim services
25 advocate with the corrections department stated: "It was like a horror movie ... he kept trying to
26 talk." (Id.) The corrections director actually called off the execution 33 minutes after the first
27 lethal injection drugs were administered, but Lockett died 10 minutes after that. (Id.) An
28 investigation into the Lockett execution ultimately concluded that the execution team's failure to

1 establish a viable IV access point “was the single greatest factor that contributed to the difficulty
2 in administering the execution drugs.” (*Glossip*, supra, 135 S.Ct. at 2734.)

3 24. In January 2015, Oklahoma executed Charles Warner under new procedures that
4 involved additional training and a higher dosage of certain drugs. (Eckholm, *Oklahoma Executes*
5 *Fist Inmate Since Slipshod Injection in April*, N.Y. Times (Jan. 15, 2015)
6 <[http://www.nytimes.com/2015/01/16/us/oklahoma-execution-charles-warner-lethal-](http://www.nytimes.com/2015/01/16/us/oklahoma-execution-charles-warner-lethal-injection.html)
7 [injection.html](http://www.nytimes.com/2015/01/16/us/oklahoma-execution-charles-warner-lethal-injection.html)> [as of Nov. 11, 2015].) As the injections began, however, he cried out “my body
8 is on fire.” (Id.) The State later admitted that it used the wrong drug—potassium acetate—instead
9 of potassium chloride. (Brandes, *Oklahoma Used Wrong Drug in January Execution*, Reuters
10 (Oct. 8, 2015) <[http://www.reuters.com/article/2015/10/08/us-usa-execution-oklahoma-](http://www.reuters.com/article/2015/10/08/us-usa-execution-oklahoma-idUSKCN0S22GZ20151008#Ei0ZHty7V1S4f9kM.97)
11 [idUSKCN0S22GZ20151008#Ei0ZHty7V1S4f9kM.97](http://www.reuters.com/article/2015/10/08/us-usa-execution-oklahoma-idUSKCN0S22GZ20151008#Ei0ZHty7V1S4f9kM.97)> [as of Nov. 11, 2015].) Potassium
12 chloride is the third drug in the protocol and supposed to stop the heart; the drug Oklahoma
13 actually used is not included in the state’s official protocol at all. (Id.)

14 25. Oklahoma is not the only state that has encountered problems. In July 2014,
15 Arizona executed Joseph Wood using a two-drug protocol consisting of the barbiturate midazolam
16 and the narcotic hydromorphone. (Ortega, et al., *Execution of Arizona Murderer Takes Nearly 2*
17 *Hours*, Ariz. Republic (July 24, 2014)
18 <[http://www.azcentral.com/story/news/local/arizona/2014/07/23/arizona-execution-](http://www.azcentral.com/story/news/local/arizona/2014/07/23/arizona-execution-botched/13070677/)
19 [botched/13070677/](http://www.azcentral.com/story/news/local/arizona/2014/07/23/arizona-execution-botched/13070677/)> [as of Nov. 11, 2015].) Officials had to use 15 doses of each of the two
20 drugs, rather than the two doses called for by the state’s protocol. (Berman, *The Prolonged*
21 *Arizona Execution Used 15 Doses of Lethal Injection Drugs*, Wash. Post (Aug. 4, 2014)
22 <[https://www.washingtonpost.com/news/post-nation/wp/2014/08/04/the-prolonged-arizona-](https://www.washingtonpost.com/news/post-nation/wp/2014/08/04/the-prolonged-arizona-execution-used-15-doses-of-lethal-injection-drugs/)
23 [execution-used-15-doses-of-lethal-injection-drugs/](https://www.washingtonpost.com/news/post-nation/wp/2014/08/04/the-prolonged-arizona-execution-used-15-doses-of-lethal-injection-drugs/)> [as of Nov. 11, 2015].) The execution took
24 nearly two hours with Wood snorting and gasping for air. (Ortega, et al., supra) One witness
25 counted Wood gasping “about 640 times.” (Id.)

26 26. In March 2015, the state of Georgia, which uses a one-drug protocol consisting of
27 pentobarbital, postponed the execution of Kelly Gissendaner because its supply of the drug, which
28

1 it obtains from a compounding pharmacy, “appeared cloudy.” (*Georgia Delays Woman’s*
2 *Execution Because of ‘Cloudy’ Lethal Injection Drug*, The Guardian (Mar. 2, 2015)
3 <[http://www.theguardian.com/world/2015/mar/03/georgia-delays-womans-execution-because-of-](http://www.theguardian.com/world/2015/mar/03/georgia-delays-womans-execution-because-of-cloudy-lethal-injection-drug)
4 [cloudy-lethal-injection-drug](http://www.theguardian.com/world/2015/mar/03/georgia-delays-womans-execution-because-of-cloudy-lethal-injection-drug)> [as of Nov. 11, 2015].)

5 27. A court in Montana recently ruled that pentobarbital is not a “fast acting
6 barbiturate” and that its use in lethal injection therefore violates state law. (*Montana Judge Rules*
7 *Lethal Injection Drug Violates State Law*, The Guardian (Oct. 6, 2015)
8 <[http://www.theguardian.com/us-news/2015/oct/07/montana-judge-rules-lethal-injection-drug-](http://www.theguardian.com/us-news/2015/oct/07/montana-judge-rules-lethal-injection-drug-violates-state-law)
9 [violates-state-law](http://www.theguardian.com/us-news/2015/oct/07/montana-judge-rules-lethal-injection-drug-violates-state-law)> [as of Nov. 11, 2015].)

10 28. States have repeatedly used unlawful and/or duplicitous methods in their efforts to
11 obtain lethal injection drugs. In January 2014, Louisiana officials reportedly obtained the drug
12 hydromorphone from an in-state hospital pharmacy without telling the hospital that the drug was
13 intended for use in a lethal injection. (Hasselle, *In Rush to Find Lethal Injection Drug, Prison*
14 *Officials Turned to Hospital*, The Lens (Aug. 6, 2014) <[http://thelensnola.org/2014/08/06/lake-](http://thelensnola.org/2014/08/06/lake-charles-memorial-hospital-sold-execution-drug-to-state/)
15 [charles-memorial-hospital-sold-execution-drug-to-state/](http://thelensnola.org/2014/08/06/lake-charles-memorial-hospital-sold-execution-drug-to-state/)> [as of Nov. 11, 2015].) A state judge
16 who sits on the hospital’s board told the press that the hospital would not have provided the drug if
17 it had known the intended purpose. (Id.)

18 29. In June 2015, Nebraska officials’ efforts to import lethal injection drugs from India
19 were rejected by the Food and Drug Administration. (Duggan and Hammel, *FDA Says Nebraska*
20 *Can’t Legally Import Drug Needed for Lethal Injections*, Omaha.com (June 1, 2015)
21 <[http://www.omaha.com/news/legislature/fda-says-nebraska-can-t-legally-import-drug-needed-](http://www.omaha.com/news/legislature/fda-says-nebraska-can-t-legally-import-drug-needed-for/article_0dc1c2d0-0638-11e5-979e-77b47170b978.html)
22 [for/article_0dc1c2d0-0638-11e5-979e-77b47170b978.html](http://www.omaha.com/news/legislature/fda-says-nebraska-can-t-legally-import-drug-needed-for/article_0dc1c2d0-0638-11e5-979e-77b47170b978.html)> [as of Nov. 11, 2015].)

23 30. In July 2015, Arizona and Texas officials tried to buy sodium thiopental from a
24 supplier that was not approved by the FDA, forcing federal agents to step in and physically seize
25 the unapproved drugs before they could get to the states’ departments of corrections. (Galvan and
26 Pritchard, *Feds Confiscate Lethal-Injection Drugs Obtained Overseas by Arizona and Texas*, U.S.
27 News & World Report (Oct. 23, 2015)

1 <[http://www.usnews.com/news/us/articles/2015/10/23/documents-arizona-tried-to-illegally-](http://www.usnews.com/news/us/articles/2015/10/23/documents-arizona-tried-to-illegally-import-execution-drug)
2 [import-execution-drug](http://www.usnews.com/news/us/articles/2015/10/23/documents-arizona-tried-to-illegally-import-execution-drug)> [as of Nov. 11, 2015].)

3 31. As revealed by a prior PRA request by the ACLU-NC, California itself engaged in
4 an elaborate and desperate search for sodium thiopental, with CDCR ultimately procuring the drug
5 from the State of Arizona. (Schwartz, *Seeking Execution Drug, States Cut Legal Corners*, N.Y.
6 Times (Apr. 13, 2011) <<http://www.nytimes.com/2011/04/14/us/14lethal.html>> [as of Nov. 11,
7 2015] [discussing emails from CDCR Undersecretary of Operations, Scott Kernan, to aides,
8 dispatching them on “secret and important mission” to drive to Arizona to pick up drugs from
9 Arizona corrections officials].)

10 **C. ACLU-NC’s Public Records Act Requests to CDCR**

11 32. On August 14, 2015, ACLU-NC submitted a PRA request to CDCR via facsimile
12 and first-class mail, for records related to lethal injection. (Exhibit A.)

13 33. On September 4, 2015, ACLU-NC submitted a second request pursuant to the
14 California Public Records Act to CDCR, via email and first-class mail, for additional records
15 related to lethal injection. (Exhibit B.)

16 34. CDCR responded to the August 14, 2015 PRA request by letter dated September
17 28, 2015. (Exhibit C.) That letter stated that CDCR had identified approximately 40 responsive
18 pages and would provide the records upon receipt of duplication fees. The CDCR further asserted
19 that it would withhold additional documents that it contends to be exempt from disclosure. CDCR
20 contended that withholding was justified because: (1) certain materials are “drafts not kept in the
21 ordinary course of business” (citing Gov. Code § 6254(a)); (2) certain materials are protected by
22 the attorney-client privilege, attorney work product privilege, or prepared for CDCR’s use in
23 pending litigation; (3) “[d]isclosure of some documents could compromise the safety and security
24 of the institutions, staff, offenders, and others,” and (4) disclosure of some materials “would
25 impose an unwarranted invasion of personal privacy.”

26 35. CDCR responded to the September 4, 2015 PRA request by letter dated October 2,
27 2015. (Exhibit D.) That letter stated that CDCR had identified approximately 10 responsive
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1 pages and would provide the records upon receipt of duplication fees. The letter further asserted
2 that CDCR would withhold additional documents that CDCR contends to be exempt from
3 disclosure. The letter set forth justifications identical to those set forth in CDCR's September 28,
4 2015 letter.

5 36. ACLU-NC submitted the requested payment for duplication fees. On October 23,
6 2015, CDCR provided the 40 pages of documents it contended were responsive to the August 14,
7 2015, request. (Exhibit E.)

8 37. On October 23, 2015, CDCR also provided the 10 pages of documents it contended
9 were responsive to the September 4, 2015, request. (Exhibit F.) These 10 pages were entirely
10 duplicative of pages included in the 40-page production in response to the August 14, 2015
11 request, so CDCR's response to both requests totaled only 40 pages.

12 **D. Substance of information requested and received**

13 38. The information requested in the August 14, 2015 and September 4, 2015 PRA
14 requests can be divided into five main categories:

- 15 (a) **Records related to lethal injection drugs**, including records related to: lethal
16 injection drugs in CDCR's possession; CDCR's efforts to purchase or acquire any
17 such drugs; pharmacies, drug compounding entities, or other suppliers of any such
18 drugs; inventory logs, chain of custody documents, expiration dates, and controlled
19 substance accountability reports of lethal injection drugs; communications within
20 CDCR about lethal injection drugs; communications about lethal injection drugs
21 with other California state entities such as the Attorney General's and Governor's
22 Offices; and communications about lethal injection drugs with the Criminal Justice
23 Legal Foundation, commercial suppliers of any such drugs, state and/or federal
24 agencies, medical personnel, or any other party. (See Exhibit A, items 1-10 and
25 Exhibit B, items 1-2, 4, 7, 10.)
26
27
28

- 1 (b) **Records related to lethal injection procedures**, including communications with
2 medical personnel or representatives of other states and scientific studies regarding
3 lethal injection procedures. (See Exhibit B, items 6-12.)
- 4 (c) **Records related to lethal injection equipment**, including supply inventories,
5 purchase orders and requisitions. (See Exhibit B, item 5.)
- 6 (d) **Records related to execution team qualifications.** (See Exhibit B, item 3.)
- 7 (e) **Records related to execution team training.** (See Exhibit A, items 11-14.)

8 39. The 40 pages of records provided by CDCR in response to these requests consist of
9 the following:

10 a. 30 pages related to training materials. This consists of documents related to
11 simulated executions conducted on May 10, 2013, including logs of the execution team under
12 three different scenarios, and execution team checklists related to supplies and sanitation
13 inspections.

14 b. 10 pages related to lethal injection drugs. This consists of a one-page letter
15 from a pharmaceutical company pertaining to midazolam and 9 pages related to sodium
16 thiopental:

17 i. a one-page July 29, 2014 letter from Sagent Pharmaceuticals to
18 CDCR prohibiting the drugs it manufactures, including midazolam, for use in “any capital
19 punishment activity, including lethal injection.” (See Exhibit E at 31.)

20 ii. two pages consisting of a “patient information leaflet” for sodium
21 thiopental.

22 iii. two pages consisting of DEA Form 41, which is the form the DEA
23 requires entities registered with the DEA to use when destroying controlled substances.² The form
24 is dated May 5, 2014 and lists 997 containers of sodium thiopental that expired in May 2014.

25
26 _____
27 ² See DEA Form 40, Dept. of Justice, Drug Enforcement Agency, Office of Diversion Control
28 <http://www.deadiversion.usdoj.gov/21cfr_reports/surrend/> (as of Nov. 11, 2015).

1 iv. two pages titled “INVENTORY OF SODIUM THIOFENTAL,” and
2 listing Box numbers 3 through 42.

3 v. three pages documenting the destruction of medical waste by a
4 company called Stericycle. These documents are dated May 5, 2014, the same date as the DEA
5 Form 41 listing sodium thiopental, suggesting that they pertain to CDCR’s destruction of its 997
6 containers of sodium thiopental.

7 **E. Documents Missing from CDCR’s Production**

8 40. Additional documents that CDCR has failed to produce clearly exist.

9 41. CDCR produced only 10 pages related to lethal injection drugs. These comprised
10 documents related to sodium thiopental and the letter from Sagent Pharmaceuticals related to
11 midazolam (a drug that is not included in CDCR’s new proposed protocol). But CDCR produced
12 no documents in the following categories:

13 a. **Documents related to drugs in CDCR’s possession:** CDCR produced no
14 documents relating to the other two drugs—pancuronium bromide and potassium chloride—in its
15 former three-drug protocol. The document production included an inventory of its supply of
16 sodium thiopental. CDCR must also have had a supply of pancuronium bromide and potassium
17 chloride; its training materials refer to these drugs. But it has produced no documents explaining
18 how CDCR purchased these drugs, inventorying them, or documenting their destruction.

19 b. **Communications with pharmaceutical companies, pharmacies, and**
20 **suppliers:** CDCR produced no communications with pharmaceutical companies (other than
21 Sagent), pharmacies, or suppliers pertaining to any lethal injection drugs. Its new protocol
22 proposes to use one of four barbiturates: amobarbital, pentobarbital, secobarbital, or thiopental.
23 Given the enormous difficulty states, including California, have encountered in procuring lethal
24 injection drugs, including pentobarbital and thiopental, it must have taken some steps to explore a
25 means of actually acquiring the drugs included in its new protocol.

26 In addition, pharmaceutical companies other than Sagent have communicated with
27 CDCR, expressing their objections to the use of the drugs they manufacture in executions. In
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1 March 2015, Akorn, which manufactures midazolam and hydromorphone, announced a
2 “comprehensive policy that endorses the use of its products to promote human health and wellness
3 and condemns the use of its products—particularly midazolam and hydromorphone
4 hydrochloride—in execution protocols.” The press release states that “Akorn has dispatched a
5 letter to the ... heads of departments of correction of the states that currently execute inmates or
6 have prisoners on death row ... reiterating the company’s policy on the appropriate use of its
7 products. In addition, Akorn is seeking the return of any of the company’s products that may have
8 been inappropriately purchased to aid in the execution process.” CDCR must have received a
9 letter from Akorn, but has failed to produce the letter.

10 c. **Communications with other states.** A prior PRA request by the ACLU
11 revealed that, in the past, California has communicated with other states about lethal injection
12 drugs and how to procure them. (See Schwartz, *supra*.) States routinely collaborate with each
13 other to share lethal injection drugs. *See, e.g., (Noble, Texas Provides Virginia Lethal Injection*
14 *Drugs Ahead of Pending Execution*, Wash. Times (Sept. 25, 2015)
15 <[http://www.washingtontimes.com/news/2015/sep/25/texas-provides-virginia-lethal-injection-](http://www.washingtontimes.com/news/2015/sep/25/texas-provides-virginia-lethal-injection-drugs-ahe/?page=all)
16 [drugs-ahe/?page=all](http://www.washingtontimes.com/news/2015/sep/25/texas-provides-virginia-lethal-injection-drugs-ahe/?page=all)> [as of Nov. 11, 2015].) Other states have encountered serious difficulties in
17 carrying out executions by lethal injection. (See *supra* ¶¶ 22-31.) It is implausible that California
18 has not communicated with any other states about lethal injection in order to try to avoid the high-
19 profile problems other states have experienced, yet CDCR has failed to produce a single email or
20 letter.

21 d. **Documents and communications pertaining to one-drug protocol.**
22 California announced over two years ago that it would no longer seek to defend its three-drug
23 protocol and would instead move to a one-drug protocol. The decision to do so was made by
24 Governor Brown in July 2013. (See Dolan, *California Will No Longer Pursue Three-Drug Lethal*
25 *Injections*, Los Angeles Times (July 10, 2013) <[http://articles.latimes.com/2013/jul/10/local/la-](http://articles.latimes.com/2013/jul/10/local/la-me-ln-lethal-injection-20130710)
26 [me-ln-lethal-injection-20130710](http://articles.latimes.com/2013/jul/10/local/la-me-ln-lethal-injection-20130710)> [as of Nov. 11, 2015] [“At the direction of Gov. Jerry Brown,
27 the Department of Corrections and Rehabilitation decided against challenging a unanimous
28

1 California appeals court ruling that blocked the three-drug method”].) CDCR must have
2 communicated with the Governor’s office about his final decision, but has produced no such
3 documents. Nor has CDCR produced a single document related to the one-drug protocol, which
4 CDCR has proposed in its proposed regulations and has been in the making for two and a half
5 years.

6 e. **Documents with federal agencies.** A prior PRA request submitted by
7 ACLU-NC to CDCR revealed extensive communications with federal agencies such as the DEA
8 regarding lethal injection drugs. If CDCR wanted to ensure that its use of the drugs in its new
9 proposed protocol complies with federal law, it should have communicated with federal agencies,
10 but it has produced no documents related to any such communications.

11 **F. Follow-up with CDCR**

12 42. On October 29, 2015, counsel for ACLU-NC, sent a letter to CDCR expressing
13 concern that CDCR’s response was deficient because it failed to produce responsive records and
14 the exemptions from disclosure it invoked were without merit. The ACLU-NC requested a
15 response by November 6, 2015. CDCR initially indicated it would aim to provide a response by
16 that time. On November 6, 2015, it requested an additional week to respond. On November 13,
17 2015, it declined to indicate a date by which it would respond.

18 **G. Urgency of Need for Records Sought**

19 43. CDCR made public its proposed lethal injection regulations on November 6, 2015
20 and provided for a public comment period that will close on January 22, 2016.

21 44. Petitioner ACLU-NC participated in the public comment process on CDCR’s prior
22 three-drug protocol. Both the ACLU-NC and its members submitted written comments and
23 provided oral testimony.

24 45. Petitioner ACLU-NC and its members seek to participate in the public comment
25 process on CDCR’s recently published proposed lethal injection regulations. The information
26 requested in its August 14, 2015 and September 4, 2015 PRA requests will shed light on important
27 issues such as CDCR’s choice of drugs to include in the proposed regulations, the source of the
28

1 drugs, amount of the drugs to be administered, mechanisms to ensure the quality, sterility, and
2 potency of the drugs, the method of administration, and the adequacy of CDCR's training
3 protocols. The information requested is therefore relevant to those proceedings and the comments
4 that Petitioner ACLU-NC and its members wish to submit.

5 46. Petitioner ACLU-NC therefore has an urgent need for the records requested, so that
6 it and its members have a meaningful opportunity to participate in the public comment process on
7 CDCR's proposed lethal injection regulations.

8 **FIRST CAUSE OF ACTION**

9 **For Writ of Mandate for Violation of the California Public Records Act, Gov. Code §§ 6250** 10 **et seq., Code Civ. Proc. § 1085, & Article I, § 3 of the California Constitution**

11 (Petitioner ACLU-NC v. Respondent CDCR)

12 47. Petitioner incorporates herein by reference the allegations of paragraphs 1 through
13 46 above, as if set forth in full.

14 48. The PRA requires that the government make disclosable records available to the
15 public promptly and without delay.

16 49. Petitioner promptly tendered payment for duplication costs for the records CDCR
17 did produce and at all relevant times stood ready (and stands ready) to tender payment for
18 duplication costs for any additional responsive records CDCR produces.

19 50. CDCR's failure to provide all records that the ACLU-NC requested on August 15,
20 2015 and September 4, 2015 violates this duty to provide records promptly and without delay.

21 **SECOND CAUSE OF ACTION**

22 **For Writ of Mandate for Violation of the California Public Records Act, Gov. Code §§ 6250** 23 **et seq., Code Civ. Proc. § 1085, & Article I, § 3 of the California Constitution**

24 (Petitioner ACLU-NC v. Respondent CDCR)

25 51. Petitioner incorporates herein by reference the allegations of paragraphs 1 through
26 50 above, as if set forth in full.

52. Respondent has failed to provide a list describing each responsive document that it contends is exempt from disclosure and specifying the exemption(s) it contends to be applicable to each such document.

53. Production of such a list will streamline this litigation and aid in this Court's review of Respondent's contentions. The Court has the authority to order production of such a list under the Public Records Act and its inherent authority.

THIRD CAUSE OF ACTION

For Writ of Mandate for Violation of the California Public Records Act, Gov. Code §§ 6250
et seq., Code Civ. Proc. § 1085, & Article I, § 3 of the California Constitution

(Petitioner ACLU-NC v. Respondent CDCR)

54. Petitioner incorporates herein by reference the allegations of paragraphs 1 through 53 above, as if set forth in full.

55. The PRA requires that the government disclose all records requested, unless it satisfies its burden of proving the applicability of a statutory exemption from disclosure.

56. Respondent is unlawfully withholding non-exempt records and has failed to release the requested records to Petitioner as required by the PRA and Article I, § 3 of the California Constitution.

WHEREFORE, Petitioner prays as follows:

1. That the Court issue a writ of peremptory writ of mandate directing Respondent CDCR to provide Petitioner ACLU-NC with all disclosable records, immediately and without further delay;

2. That the Court issue a peremptory writ of mandate directing Respondent CDCR to provide Petitioner ACLU-NC and the Court with a list of any responsive records that it has not released to Petitioner, describing with specificity each document and identifying the exemptions that it contends apply;

1 3. That the Court issue a writ of mandate directing Respondent CDCR to provide
2 Petitioner ACLU-NC with all remaining requested records except those records that the Court
3 determines may lawfully be withheld, or an order to show cause why it should not do so;

4 4. That Petitioner be awarded their attorneys' fees and costs;

5 5. For such other and further relief as the Court deems proper and just.

6
7 Dated: November 17, 2015

8
9 By: 

10 DAVID H. FRY

11 Attorney for Petitioner ACLU-NC

12
13
14
15 VERIFICATION

16
17 I, Ana Zamora, am Criminal Justice Policy Director of the American Civil Liberties Union of
18 Northern California. I have read this VERIFIED PETITION FOR PEREMPTORY WRIT OF
19 MANDATE AND WRIT OF MANDATE in the matter of AMERICAN CIVIL LIBERTIES
20 UNION OF NORTHERN CALIFORNIA v. CALIFORNIA DEPARTMENT OF
21 CORRECTIONS AND REHABILITATION and am informed, and do believe, that the matters
22 herein are true. On that ground I allege that the matters stated herein are true. In addition, the facts
23 within paragraph 2, 32 through 39 and 44 through 46 are within my own personal knowledge, and
24 I know them to be true. I declare under penalty of perjury under the laws of the State of California
25 that the foregoing is true and correct.

26 DATED: November 17, 2015

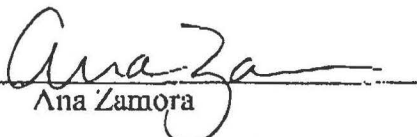
27 
28 Ana Zamora

EXHIBIT A



August 14, 2015

Transmitted by Facsimile to (916) 327-1988 and First-Class Mail

California Department of Corrections and Rehabilitation
PRA Administrators
1515 S Street Suite, 314-S
Sacramento, CA 94283-0001

Re: Request for Records Pursuant to the California Public Records Act

Dear Public Records custodian:

I am writing on behalf of the American Civil Liberties Union of Northern California to request records from the California Department of Corrections and Rehabilitation (CDCR) pursuant to the California Public Records Act, California Government Code sections 6250 to 6270. I seek copies of all records¹ in the CDCR's possession, including but not limited to its sterile compounding facilities located at the California Men's Colony (CMC), High Desert State Prison (HDSP), and California State Prison, Corcoran (CSP-COR) regardless of who wrote them, regarding the following topics:

1. Any and all communications, consultations, and exchange of records between any employee, agent, contractor, receiver, liaison, or representative of the CDCR and the California Attorney General's Office, the California Governor's Office, and/or the Criminal Justice Legal Foundation, relating to the potential or actual acquisition, purchase, procurement, retrieval preparation, or compounding of drug(s) and/or chemical(s) to be used in lethal injection procedures, including the names and/or classes of such drugs or chemicals.
2. Any and all records, contracts, acquisition forms, procurement forms, receipts, bills of sale, or reports concerning the CDCR's potential or actual acquisition, purchase, procurement, retrieval, preparation, or compounding of drug(s) and/or chemicals to be

¹ The term "records" as used in this request is defined as "any writing containing information relating to the conduct of the public's business prepared, owned, used, or retained by any state or local agency regardless of physical form or characteristics." Cal. Gov't Code § 6252, subsection (e). "Writing" is defined as "any handwriting, typewriting, printing, photostating, photographing, photocopying, transmitting by electronic mail or facsimile, and every other means of recording upon any tangible thing any form of communication or representation, including letters, words, pictures, sounds, or symbols, or combinations thereof, and any record thereby created, regardless of the manner in which the record has been stored." Cal. Gov't Code § 6252, subsection (g).

used in lethal injection procedures, including the names and/or classes of such drugs or chemicals.

3. Any and all drugs intended or considered for use in executions.
4. The expiration date and lot numbers, of any and all drugs intended or considered for use in executions, currently in the possession of the CDCR.
5. Any and all drug or inventory logs from May 1, 2013 to the present.
6. Any and all chain of custody documents, including form 2176, relating to drugs intended or considered for use in executions.
7. Any and all activity by CDCR from May 1, 2013 to the present to purchase or acquire any drugs for use in executions, including purchase orders.
8. Any correspondence between CDCR and any party, including pharmacies, manufacturers, distributors, or individuals, from May 1, 2013 to the present regarding drugs intended or considered for use in executions.
9. Any correspondence between CDCR and other state and/or federal agencies from May 1, 2013 to the present regarding drugs intended or considered for use in executions.
10. All controlled substance accountability reports, and documents relating to drugs intended or considered for use in execution from January May 1, 2013 to the present.
11. All lethal injection training materials from May 1, 2013 to the present, including forms 2177, 2179, 2180, 2181, 2183
12. All documents concerning execution team training, including but not limited to lethal injection team lesson plans and training manuals, drafted or utilized from May 1, 2013 to the present.
13. All documentation of execution team training sessions, including but not limited to lethal injection process training files and records of all lethal injection and lethal gas training sessions, including all CDCR forms 2177, 2179, 2180, and 2181, from May 1, 2013 through the present.
14. Any documentation pertaining to employee training submitted by any execution team member, execution team leader, execution team administrator, including training credit

sheets, overtime requests, travel requests and reimbursements from May 1, 2013 to the present.

I look forward to your determination on this request within ten days of your receipt of it as required by section 6253 of the California Government Code, or earlier if you can make that determination without having to review the records in question. To assist with the prompt release of responsive material, I ask that you make records available to me as you locate them, rather than waiting until all responsive records have been collected and copied. Please notify me immediately of any copying fee for these materials so that I may provide payment and ensure prompt delivery of the requested material.

If you determine that any of the information I have requested is exempt and will not be disclosed, please provide me with a signed notification citing the legal authorities upon which you rely. *See* Cal. Gov't Code § 6255. Pursuant to section 6253, please disclose all reasonably segregable non-exempt information from any portions of records you claim are exempt from disclosure.

If I can provide any additional information that will expedite your processing of my request, please do not hesitate to contact me by email at azamora@aclunc.org.

Sincerely,



Ana Zamora
Criminal Justice Policy Director
American Civil Liberties Union of Northern California

EXHIBIT B



September 4, 2015

Transmitted by First-Class mail and by email

California Department of Corrections and Rehabilitation
Public Records Act Unit
1515 S Street, Suite 314-S
Sacramento, CA 94283-0001
Email: PRAadministrators@cdcr.ca.gov

Re: Request for Records Pursuant to the California Public Records Act

Dear PRA Administrators,

I am writing on behalf of the American Civil Liberties Union of Northern California to request records pursuant to the California Public Records Act, California Government Code sections 6250 to 6270 and article 1 section 3(b) of the California Constitution. I seek copies of all records¹ in the agency's possession, regardless of who wrote them, regarding the following:

1. Any records pertaining to the suppliers of any and all drugs intended or considered for use in executions.
2. Any records pertaining to the pharmacies or drug compounding entities intended or considered for use in supplying drugs for executions.
3. Any records pertaining to the qualifications of members of the lethal injection team, including but not limited to the personnel files and supervisory files reviewed. As used herein, "lethal injection team" means any person involved in the training for and/or participation in lethal injection executions, including but not limited to members of the team who set up and/or monitor IV tubing rigging and/or lines, who mix or otherwise handle the drugs used, who obtain IV lines in an inmate, who conduct any check for unconsciousness, and who monitor the progress of executions

¹ The term "records" as used in this request is defined as "any writing containing information relating to the conduct of the public's business prepared, owned, used, or retained by any state or local agency regardless of physical form or characteristics." Cal. Gov't Code § 6252, subsection (e). "Writing" is defined as "any handwriting, typewriting, printing, photostating, photographing, photocopying, transmitting by electronic mail or facsimile, and every other means of recording upon any tangible thing any form of communication or representation, including letters, words, pictures, sounds, or symbols, or combinations thereof, and any record thereby created, regardless of the manner in which the record has been stored." Cal. Gov't Code § 6252, subsection (g).

MICHELLE A. WELSH, CHAIRPERSON | DENNIS McNALLY, AJAY KRISHNAN, FARAH BRELVI, ALLEN ASCH, VICE CHAIRPERSONS | KENNETH J. SUGARMAN, SECRETARY/TREASURER
ABDI SOLTANI, EXECUTIVE DIRECTOR | CHERI BRYANT, DEVELOPMENT DIRECTOR | SHAYNA GELENDER, ORGANIZING & COMMUNITY ENGAGEMENT DIRECTOR
REBECCA FARMER, COMMUNICATIONS DIRECTOR | ALAN SCHLOSSER, LEGAL DIRECTOR | PHYLLIDA BURLINGAME, ALLEN HOPPER, NATASHA MINSKER, NICOLE A. OZER, POLICY DIRECTORS
FRANCISCO LOBACO, LEGISLATIVE DIRECTOR | VALERIE SMALL NAVARRO, SENIOR LEGISLATIVE ADVOCATE | TIFFANY MOK, LEGISLATIVE ADVOCATE | STEPHEN V. BOMSE, GENERAL COUNSEL

such as observing the IV inserted in the inmate, the related tubing, and any monitoring or recording devices such as heart monitors, oxygen measuring devices, and EKGs.

4. Any and all drug or inventory logs pertaining to any and all drugs intended or considered for use in executions from May 1, 2013 to the present.
5. Any records pertaining to any equipment or structures intended for use during lethal injections, including but not limited to supply inventories, purchase orders and requisitions.
6. Any records pertaining to any lethal injection protocols or procedures considered by CDCR from October 25, 2010 to the present, including but not limited to drafts, comments on such drafts and correspondence relating to such drafts.
7. Any records pertaining to any communications with any medical personnel pertaining to drugs to be used or protocols to be employed in the executions of inmates.
8. Any notes, emails, memoranda or reports concerning meetings and/or conferences regarding lethal injection procedures.
9. Any protocols, drafts of protocols, and/or agreements pertaining thereto, concerning lethal injection procedures used in other states.
10. Any communications with representatives of other states regarding lethal injection procedures and/or drugs.
11. Any contracts or agreements between CDCR and any person or entity to conduct studies of lethal injection procedures.
12. All scientific studies consulted in order to determine procedures for lethal injection.

I look forward to your determination on this request within ten days of your receipt of it as required by section 6253 of the California Government Code, or earlier if you can make that determination without having to review the records in question. To assist with the prompt release of responsive material, I ask that you make records available to me as you locate them, rather than waiting until all responsive records have been collected and copied. Please notify me immediately of any copying fee for these materials so that I may provide payment and ensure prompt delivery of the requested material.

If you determine that any of the information I have requested is exempt and will not be disclosed, please provide me with a signed notification citing the legal authorities upon which you rely. *See* Cal. Gov't Code § 6255. Pursuant to section 6253, please disclose all reasonably segregable non-exempt information from any portions of records you claim are exempt from disclosure.

Public Records Act Request
September 4, 2015
Page 2

If I can provide any additional information that will expedite your processing of my request, please do not hesitate to contact me at (415) 293-6321 or by email at azamora@aclunc.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ana Zamora', with a long horizontal flourish extending to the right.

Ana Zamora
Criminal Justice Policy Director

EXHIBIT C

Division of Adult Operations

San Quentin State Prison
San Quentin, CA 94964



September 28, 2015

Ana Zamora
American Civil Liberties Union
Of Northern California
39 Drumm Street
San Francisco, CA 94111

Re: Public Records Act Request dated August 14, 2015

Dear Ms. Zamora:

This is in response to your request for records from the California Department of Corrections and Rehabilitation (CDCR) dated August 14, 2015 and received on September 4, 2015.

We have identified approximately 40 pages which are responsive to your request. The duplication fees for this request are \$7.12 (40 pages at .12 each (\$4.80)) plus postage of \$2.32). The responsive documents will be mailed upon receipt of this payment. Please mail the payment to: B. Ebert, Litigation Coordinator, San Quentin State Prison, San Quentin, CA 94964.

A portion of the records that you requested are exempt from disclosure under the Public Records Act and will not be provided to you. The applicable exemptions, more fully discussed below, include: Government Code §§ 6254 (a), (b), (c), (f) and (k); Business & Professions Code §§ 6068 and 6202; Evidence Code §§ 952, et seq. and Code of Civil Procedure § 2018.030.

Records that are drafts not kept in the ordinary course of business will not be disclosed pursuant to Government Code § 6254 (a).

Documents that are protected by the attorney-client privilege, attorney work product, or were specifically prepared for CDCR's use in pending litigation will not be disclosed pursuant to Government Code §§ 6254 (b) and (k), Business & Professions Code §§ 6068 and 6202; Evidence Code § 952, et seq. and the Code of Civil Procedure § 2018.030.

Disclosure of some documents could compromise the safety and security of the institutions, staff, offenders, and others. These records will not be disclosed pursuant to Government Code §§ 6254 (f) and (k), Evidence Code § 1040, as discussed in *Procunier v. Superior Court of Monterey County* (1973) 35 Cal.App.3d 211.

Ana Zamora

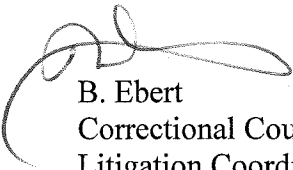
Page 2

Records that would impose an unwarranted invasion of personal privacy, personnel records, or records deemed "protected information" by the Protective Order issued on April 3, 2006 in *Morales v. Woodford, et al.*, U.S. District Court for the Northern District of California case numbers 06 219 and 06 926 (including those indicating names, ranks, job descriptions, and other identifying information of members of the execution team) will be withheld consistent with the Protective Order, pursuant to Government Code §§ 6254 (f) and (k), Evidence Code § 1040, as discussed in *Procunier v. Superior Court of Monterey County* (1973) 35 Cal.App.3d 211, Government Code §§ 6254 (c) and (k), Penal Code §§ 832.7 and 832.8, and Government Code § 6255.

Please note that the California Department of Corrections and Rehabilitation is still reviewing documents that may be responsive to your request, and it is possible that additional documents and/or exemptions will be identified during the review and compilation of these records.

If you have any questions I can be reached at (415) 455-5007.

Sincerely,

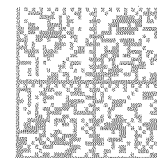


B. Ebert
Correctional Counselor II, Specialist
Litigation Coordinator
San Quentin State Prison



STATE OF CALIFORNIA
DEPARTMENT OF CORRECTIONS AND REHABILITATION
California State Prison – San Quentin
Litigation Coordinator's Office
San Quentin CA 94964

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CA 940
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American Civil Liberties Union of Northern California
ATTN: Ana Zamora
39 Drumm Street
San Francisco, CA 94111

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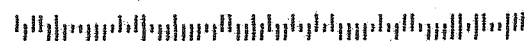


EXHIBIT D

Division of Adult Operations

San Quentin State Prison
San Quentin, CA 94964



October 2, 2015

Ana Zamora
American Civil Liberties Union
Of Northern California
39 Drumm Street
San Francisco, CA 94111

Re: Public Records Act Request dated September 4, 2015

Dear Ms. Zamora:

This is in response to your request for records from the California Department of Corrections and Rehabilitation (CDCR) dated September 4, 2015 and received on September 8, 2015.

We have identified approximately 10 pages which are responsive to your request. The duplication fees for this request are \$2.12 (10 pages at .12 each (\$1.20)) plus postage of \$0.92). The responsive documents will be mailed upon receipt of this payment. Please mail the payment to: B. Ebert, Litigation Coordinator, San Quentin State Prison, San Quentin, CA 94964.

A portion of the records that you requested are exempt from disclosure under the Public Records Act and will not be provided to you. The applicable exemptions, more fully discussed below, include: Government Code §§ 6254 (a), (b), (c), (f) and (k); Business & Professions Code §§ 6068 and 6202; Evidence Code §§ 952, et seq. and Code of Civil Procedure § 2018.030.

Records that are drafts not kept in the ordinary course of business will not be disclosed pursuant to Government Code § 6254 (a).

Documents that are protected by the attorney-client privilege, attorney work product, or were specifically prepared for CDCR's use in pending litigation will not be disclosed pursuant to Government Code §§ 6254 (b) and (k), Business & Professions Code §§ 6068 and 6202; Evidence Code § 952, et seq. and the Code of Civil Procedure § 2018.030.

Disclosure of some documents could compromise the safety and security of the institutions, staff, offenders, and others. These records will not be disclosed pursuant to Government Code §§ 6254 (f) and (k), Evidence Code § 1040, as discussed in *Procunier v. Superior Court of Monterey County* (1973) 35 Cal.App.3d 211.

Ana Zamora

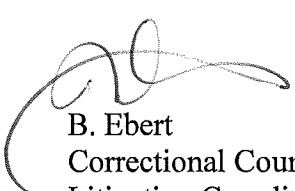
Page 2

Records that would impose an unwarranted invasion of personal privacy, personnel records, or records deemed "protected information" by the Protective Order issued on April 3, 2006 in *Morales v. Woodford, et al.*, U.S. District Court for the Northern District of California case numbers 06 219 and 06 926 (including those indicating names, ranks, job descriptions, and other identifying information of members of the execution team) will be withheld consistent with the Protective Order, pursuant to Government Code §§ 6254 (f) and (k), Evidence Code § 1040, as discussed in *Procunier v. Superior Court of Monterey County* (1973) 35 Cal.App.3d 211, Government Code §§ 6254 (c) and (k), Penal Code §§ 832.7 and 832.8, and Government Code § 6255.

Please note that the California Department of Corrections and Rehabilitation is still reviewing documents that may be responsive to your request, and it is possible that additional documents and/or exemptions will be identified during the review and compilation of these records.

If you have any questions I can be reached at (415) 455-5007.

Sincerely,



B. Ebert
Correctional Counselor II, Specialist
Litigation Coordinator
San Quentin State Prison

EXHIBIT E

State of California

Department of Corrections and Rehabilitation

Memorandum

Date : May 10, 2013

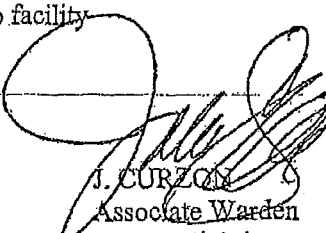
To : KEVIN CHAPPELL
Warden

Subject: MAY 10, 2013 TRAINING AGENDA

Training schedule for Friday, May 10, 2013:

0500-0600	Report to Lethal Injection Facility; conduct inspection of facility and inventory of all equipment, prepare for first execution simulation.
0600-0630	Debrief of previous month's activities.
0630-0715	Lethal Injection Execution Simulation #1: Position/placements and simulated scenario Debrief and simulation discussion.
0715-0730	Morning Break.
0730-0800	Discussion with Sacramento Representative
0800-0845	Lethal Injection Execution Simulation #2: Position/placements and simulated scenario Debrief and simulation discussion.
0845-1030	Deposition training
1030-1130	Lunch Break
1130-1215	Lethal Injection Execution Simulation #3: Position/placements and simulated scenario Debrief and simulation discussion.
1215-1300	Brief discussion and clean up facility

Team Leader #1


J. CURZON
Associate Warden
Team Administrator

SCENARIO # ONE

Date: May 10, 2013

RECORD LOGS __

FINAL REPORTS __

INVENTORY SHEETS __

San Quentin State Prison
Execution Log
Lethal Injection Intravenous Team

#1

Inmate Name	CDCR #	Date of Execution
DOE, J	A12345	5/10/12
Record Team Member Identification #: 7		

Task	Time	Comments
1. IV tubing and needles given final check.		
2. ECG pads are placed on inmate's chest.		
3. ECG leads attached to monitor.	0638 ³⁹	
4. Insert intravenous catheter - Left	0639 ⁵⁵	
5. Left catheter patency confirmed.	0640 ²⁷	
6. Insert intravenous catheter - Right	0642 ⁰⁰	
7. Right catheter patency confirmed.	0642 ³⁶	
8. One Intravenous Team Member exits Holding Cell Area and goes to Infusion Room to record infusion of chemicals on ECG graph paper.	0642 ⁵⁰	
9. One Intravenous Team Member takes position next to inmate to monitor consciousness and Intravenous lines.	0643	
10. Team advised which Intravenous catheter is to be used for execution. (left or right)	0643	
11. Saline drip in primary arm is stopped.	0643	
12. Syringe #A-1 administered; mark ECG graph paper with #A-1. Team Member in Execution Room checks inmate for consciousness.	0644 ²⁷	
13. Syringe #A-2 administered; mark ECG graph paper with #A-2.	0645 ⁰⁷	
14. Syringe #A-3 administered; mark ECG graph paper with #A-3. Team Member in Execution Room checks inmate for consciousness.	0645 ⁴³	
15. Syringe #A-4 administered; mark ECG graph paper with #A-4.	0646 ¹³	
16. Syringe #A-5 administered; mark ECG graph paper with #A-5.		
17. Syringe #A-6 administered; mark ECG graph paper with #A-6.		
18. Syringe #A-7, administered; mark ECG graph paper with #A-7.		
19. Syringe #A-8 administered; mark ECG graph paper with #A-8.		

	Task	Time	Comments
	If chemicals on Tray B are used for repeat of Protocol - backup catheter will be used. Syringes will be injected in same sequence with all 8 syringes on Tray B being administered.		
20.	Syringe #B-1, mark ECG graph paper with #B-1.		
21.	Syringe #B-2, mark ECG graph paper with #B-2.		
22.	Syringe #B-3, mark ECG graph paper with #B-3.		
23.	Syringe #B-4, mark ECG graph paper with #B-4.		
24.	Syringe #B-5, mark ECG graph paper with #B-5.		
25.	Syringe #B-6, mark ECG graph paper with #B-6.		
26.	Syringe #B-7, mark ECG graph paper with #B-7.		
27.	Syringe #B-8, mark ECG graph paper with #B-8.		
28.	Mark ECG graph paper when death is pronounced.	0646 ²⁴	
29.	Prepare final report.		



Lethal Injection Team Administrator

5/10/13
Date

#1

San Quentin State Prison
Execution Log
Lethal Injection Team Administrator/Team Leader

Inmate Name	CDCR #	Date of Execution
Do, J	A12345	5/10/13

Record Team Member Identification #: 18

Task	Start	Comments
1. 3 hours prior: Assemble Team and make assignments.		
Record Keeping Team activated; Execution Logs begin.		
2. The Lethal Injection Team Leader accompanied by the Associate Warden Specialized Housing Division will remove the lethal injection chemicals from the Lethal Injection Facility safe/refrigerator.		
3. The Lethal Injection Team Leader will transfer custody of the lethal injection chemicals to two members of the Lethal Injection Infusion Team and complete the Chain of Custody form.		
4. Meet with the condemned inmate in the Lethal Injection Facility holding cell area. <ul style="list-style-type: none"> Ask if the inmate wishes to write a last statement to be read after the execution. Inform the inmate that a sedative is available. Valium or its equivalent will be administered under the direction and approval of a clinician. 	0628 - 0643.30 - 0643.45 0629	Verbal Statement - started verbal statement - ENDED verbal statement Sedative Requested
5. The Lethal Injection Team Administrator will take position in the Infusion/Control room.		
6. Team Leader takes position in Infusion Room.	0623	
7. Infusion of lethal chemicals is initiated.	0644.27	20 minute count
8. Flat line noted on ECG.	0646.00	
9. Death pronounced.	0646.24	
If chemicals on Tray B are used for repeat of Protocol—backup catheter will be used. All 8 syringes will be administered in the same sequence.		
10. Repeat Protocol.		
11. Flat line noted on ECG.		
12. Death pronounced.		
13. Witnesses notified that inmate has expired.	0647.11	
14. Curtains drawn on viewing windows.	0647.21	
15. Inmate's body prepared for Coronet/Mortuary.		



Lethal Injection Team Administrator

5/10/13
Date

San Quentin State Prison
Execution Log
Lethal Injection Infusion Team

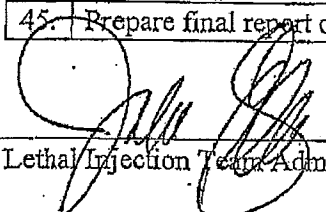
#1

Inmate Name	CDCR#	Date of Execution
J. Doe	A12345	5/10/13

Record Keeping Team Member Identification #: 14

	Task	Time	Comments
1.	Infusion Team Members arrive at the Lethal Injection Facility.		
2.	Transfer of chemicals to Infusion Team; (chain of custody)		
	Tray A		
3.	Mix 1 st 3 kits of Sodium Thiopental for syringe #1 for Tray A.		
4.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in red; A-1 Sodium Thiopental.		
5.	Mix 2 nd 3 kits of Sodium Thiopental for syringe #2.		
6.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in red; A-2 Sodium Thiopental.		
7.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-3 Saline.		
8.	Draw 50 mg of Pancuronium Bromide into one 60cc syringe and label in red; A-4 Pancuronium Bromide.		
9.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-5 Saline.		
10.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in red; A-6 Potassium Chloride.		
11.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in red; A-7 Potassium Chloride.		
12.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-8 Saline.		
	Tray B		
13.	Mix 1 st 3 kits of Sodium Thiopental for syringe #1 for Tray B.		
14.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in blue; B-1 Sodium Thiopental.		
15.	Mix 2 nd 3 kits of Sodium Thiopental for syringe #2.		
16.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in blue; B-2 Sodium Thiopental.		
17.	Draw 50cc of normal saline into a 60cc syringe and label in blue; B-3 Saline.		
18.	Draw 50 mg of Pancuronium Bromide into one 60cc syringe and label in blue; B-4 Pancuronium Bromide.		
19.	Draw 50cc of normal saline into a 60cc syringe and label in blue; B-5 Saline.		
20.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in blue; B-6 Potassium Chloride.		

	Task	Time	Comments
21.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in blue; B-7 Potassium Chloride.		
22.	Draw 50cc of normal saline into a 60cc syringe and labeled in blue; B-8 Saline.		
23.	Infusion Team Members cross check Tray A and Tray B.		
24.	Intravenous lines checked		
	Infusion		
25.	Inject syringe #A-1 Sodium Thiopental. Conscious check.	0644.27	
	Begin 10 minute count:	0644.27	CV 0644.50
26.	Inject syringe #A-2 Sodium Thiopental	0645.07	
27.	Inject syringe #A-3 the Saline Flush. Conscious check.	0645.43	
	Inmate conscious discontinue Tray A and start Tray B in back-up intravenous catheter. Inmate unconscious continue with Tray A.		
28.	Inject syringe # A-4 Pancuronium Bromide.	0646.13	(F) 0646.35
29.	Inject syringe #A-5 the Saline Flush.		
30.	Inject syringe # A-6 Potassium Chloride.		
31.	Inject syringe # A-7 Potassium Chloride		
32.	Inject syringe # A-8 Saline Flush.		
33.	Cardiac monitor (ECG) "flat line."	+ 0646.00	
34.	Physician pronounces death.	* 0646.24	
	If all 8 syringes from Tray A have been infused, 10 minutes has elapsed and death has not been determined, notify Associate Warden and Team Leader. Warden may authorize repeat of protocol with Tray B, backup catheter.		
35.	Inject syringe # B-1 Sodium Thiopental.		
36.	Inject syringe # B-2 Sodium Thiopental.		
37.	Inject syringe # B-3 Saline flush.		
38.	Inject syringe # B-4 Pancuronium Bromide.		
39.	Inject syringe # B-5 Saline flush.		
40.	Inject syringe # B-6 Potassium Chloride.		
41.	Inject syringe # B-7 Potassium Chloride.		
42.	Inject syringe # B-8 Saline Flush.		
43.	Cardiac monitor (ECG) "flat line."		
44.	Physician pronounces cessation of life.		
45.	Prepare final report of execution.		



Lethal Injection Team Administrator

5/10/13

Date

San Quentin State Prison
Execution Log
Lethal Injection Security Team

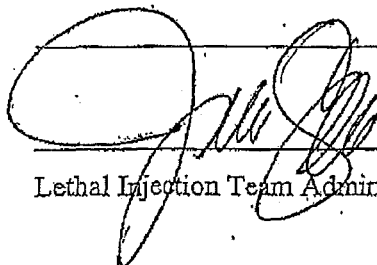
①

Inmate Name	CDCR#	Date of Execution
J DOE	A12345	5/10/13

Record Team Member Identification #: 17

TASKS	Time	Comments
Inmate searched placed in restraints (handcuffs, Martin chain, and leg irons) and removed from the holding cell.	0630	
Preparation/Execution Room		
Inmate staged in Preparation Room to allow Intravenous Team to attach ECG leads.	0631	
Escorted inmate to Execution Room.	0634	
Inmate secured to gurney.	0638	
Security Team exits Execution Room.	0639	
Team Leader takes position in Infusion/Control Room.	0644	
Post Execution		
Security Team re-entered Execution Room after the Lethal Injection process has been completed and all witnesses have been escorted out of the Lethal Injection Facility.		
Post mortem identification and photographs completed.		
Inmate's remains prepared for release to Coroner/Mortuary.		
Released inmate's remains to the Coroner/Mortuary.		
Completed all reports relative to Lethal Injection process.		
Clean Lethal Injection Facility.		

Notes:


Lethal Injection Team Administrator

5/10/13
Date

SCENARIO # TWO

Date: May 10, 2013

RECORD LOGS __

FINAL REPORTS __

INVENTORY SHEETS __

San Quentin State Prison
Execution Log
Lethal Injection Security Team

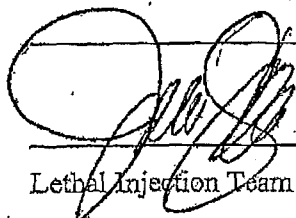
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Inmate Name	CDCR#	Date of Execution
J. DUB	A12345	5/10/13

Record Team Member Identification #: 17

TASKS	Time	Comments
Inmate searched placed in restraints (handcuffs, Martin chain, and leg irons) and removed from the holding cell.	0810	
Preparation/Execution Room		
Inmate staged in Preparation Room to allow Intravenous Team to attach ECG leads.	0812	
Escorted inmate to Execution Room.	0813	
Inmate secured to gurney.	0816	
Security Team exits Execution Room.	0817	
Team Leader takes position in Infusion/Control Room.	0820	
Post Execution		
Security Team re-entered Execution Room after the Lethal Injection process has been completed and all witnesses have been escorted out of the Lethal Injection Facility.		
Post mortem identification and photographs completed.		
Inmate's remains prepared for release to Coroner/Mortuary.		
Released inmate's remains to the Coroner/Mortuary.		
Completed all reports relative to Lethal Injection process.		
Clean Lethal Injection Facility.		

Notes:



Lethal Injection Team Administrator

5/10/13
Date

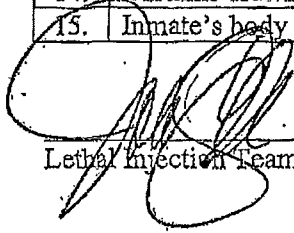
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San Quentin State Prison
Execution Log
Lethal Injection Team Administrator/Team Leader

Inmate Name	CDCR #	Date of Execution
Doe, J	A12345	5/10/13

Record Team Member Identification #: 18

Task	Start	Comments
1. 3 hours prior: Assemble Team and make assignments.		
Record Keeping Team activated; Execution Logs begin.		
2. The Lethal Injection Team Leader accompanied by the Associate Warden Specialized Housing Division will remove the lethal injection chemicals from the Lethal Injection Facility safe/refrigerator.		
3. The Lethal Injection Team Leader will transfer custody of the lethal injection chemicals to two members of the Lethal Injection Infusion Team and complete the Chain of Custody form.		
4. Meet with the condemned inmate in the Lethal Injection Facility holding cell area. <ul style="list-style-type: none"> Ask if the inmate wishes to write a last statement to be read after the execution. Inform the inmate that a sedative is available. Valium or its equivalent will be administered under the direction and approval of a clinician. 	0808 0810	No statement No 100, then statement sedative requested
5. The Lethal Injection Team Administrator will take position in the Infusion/Control room.		
6. Team Leader takes position in Infusion Room.	0825.45	
7. Infusion of lethal chemicals is initiated.	0827.00	10 minute count
8. Flat line noted on ECG.	0828.23	
9. Death pronounced.	0828.53	
If chemicals on Tray B are used for repeat of Protocol - backup catheter will be used. All 8 syringes will be administered in the same sequence.		
10. Repeat Protocol.		
11. Flat line noted on ECG.		
12. Death pronounced.		
13. Witnesses notified that inmate has expired.	0829.42	
14. Curtains drawn on viewing windows.	0829.49	
15. Inmate's body prepared for Coroner/Mortuary.	0830.50	



Lethal Injection Team Administrator

5/10/13
Date

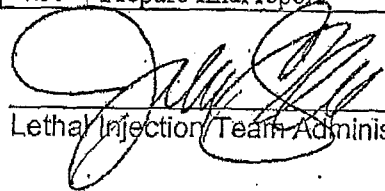
**San Quentin State Prison
Execution Log
Lethal Injection Intravenous Team**

Inmate Name	CDCR #	Date of Execution
DOE, J	A12345	5/10/17

Record Team Member Identification #: 7

Task	Time	Comments
1. IV tubing and needles given final check.		
2. ECG pads are placed on inmate's chest.		
3. ECG leads attached to monitor.	0818 ²⁰	
4. Insert intravenous catheter - Left	0819 ³⁹	
5. Left catheter patency confirmed.	0820 ²⁵ 20/0821 ¹⁰ 0821 ⁴⁹	
6. Insert intravenous catheter - Right	0822 ⁴⁰ 20/0824 ²⁰	
7. Right catheter patency confirmed.	0825 ²⁵	
8. One Intravenous Team Member exits Holding Cell Area and goes to Infusion Room to record infusion of chemicals on ECG graph paper.	0825	
9. One Intravenous Team Member takes position next to inmate to monitor consciousness and Intravenous lines.	0825	
10. Team advised which Intravenous catheter is to be used for execution. (left or right)	0825	
11. Saline drip in primary arm is stopped.	0825	
12. Syringe #A-1 administered; mark ECG graph paper with #A-1. Team Member in Execution Room checks inmate for consciousness.	0827 ⁰⁰	
13. Syringe #A-2 administered; mark ECG graph paper with #A-2.	0827 ⁴⁷	
14. Syringe #A-3 administered; mark ECG graph paper with #A-3. Team Member in Execution Room checks inmate for consciousness.	0828 ¹⁵	
15. Syringe #A-4 administered; mark ECG graph paper with #A-4.	0828 ⁴⁵	
16. Syringe #A-5 administered; mark ECG graph paper with #A-5.		
17. Syringe #A-6 administered; mark ECG graph paper with #A-6.		
18. Syringe #A-7 administered; mark ECG graph paper with #A-7.		
19. Syringe #A-8 administered; mark ECG graph paper with #A-8.		

	Task	Time	Comments
	If chemicals on Tray B are used for repeat of Protocol - backup catheter will be used. Syringes will be injected in same sequence with all 8 syringes on Tray B being administered.		
20.	Syringe #B-1, mark ECG graph paper with #B-1.		
21.	Syringe #B-2, mark ECG graph paper with #B-2.		
22.	Syringe #B-3, mark ECG graph paper with #B-3.		
23.	Syringe #B-4, mark ECG graph paper with #B-4.		
24.	Syringe #B-5, mark ECG graph paper with #B-5.		
25.	Syringe #B-6, mark ECG graph paper with #B-6.		
26.	Syringe #B-7, mark ECG graph paper with #B-7.		
27.	Syringe #B-8, mark ECG graph paper with #B-8.		
28.	Mark ECG graph paper when death is pronounced.	0828 ⁵³	
29.	Prepare final report		



Lethal Injection Team Administrator

5/10/13

Date

San Quentin State Prison
Execution Log
Lethal Injection Infusion Team

42

Inmate Name	CDCR#	Date of Execution
J. Doe	A12345	5/10/13

Record Keeping Team Member Identification #: 14

	Task	Time	Comments
1.	Infusion Team Members arrive at the Lethal Injection Facility.		
2.	Transfer of chemicals to Infusion Team; (chain of custody)		
	Tray A		
3.	Mix 1 st 3 kits of Sodium Thiopental for syringe #1 for Tray A.		
4.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in red; A-1 Sodium Thiopental.		
5.	Mix 2 nd 3 kits of Sodium Thiopental for syringe #2.		
6.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in red; A-2 Sodium Thiopental.		
7.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-3 Saline.		
8.	Draw 50 mg of Pancuronium Bromide into one 60cc syringe and label in red; A-4 Pancuronium Bromide.		
9.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-5 Saline.		
10.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in red; A-6 Potassium Chloride.		
11.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in red; A-7 Potassium Chloride.		
12.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-8 Saline.		
	Tray B		
13.	Mix 1 st 3 kits of Sodium Thiopental for syringe #1 for Tray B.		
14.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in blue; B-1 Sodium Thiopental.		
15.	Mix 2 nd 3 kits of Sodium Thiopental for syringe #2.		
16.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in blue; B-2 Sodium Thiopental.		
17.	Draw 50cc of normal saline into a 60cc syringe and label in blue; B-3 Saline.		
18.	Draw 50 mg of Pancuronium Bromide into one 60cc syringe and label in blue; B-4 Pancuronium Bromide.		
19.	Draw 50cc of normal saline into a 60cc syringe and label in blue; B-5 Saline.		
20.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in blue; B-6 Potassium Chloride.		

	Task	Time	Comments
21.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in blue; B-7 Potassium Chloride.		
22.	Draw 50cc of normal saline into a 60cc syringe and labeled in blue; B-8 Saline.		
23.	Infusion Team Members cross check Tray A and Tray B.		
24.	Intravenous lines checked		
	Infusion		
25.	Inject syringe #A-1 Sodium Thiopental. Conscious check.	0827.0	CV 0827.33
	Begin 10 minute count:	0827.00	
26.	Inject syringe #A-2 Sodium Thiopental	0827.47	
27.	Inject syringe #A-3 the Saline Flush. Conscious check.	0828.15	
	Inmate conscious discontinue Tray A and start Tray B in back-up intravenous catheter. Inmate unconscious continue with Tray A.		
28.	Inject syringe # A-4 Pancuronium Bromide.	0828.45	(F) 0829.11
29.	Inject syringe #A-5 the Saline Flush.		
30.	Inject syringe # A-6 Potassium Chloride.		
31.	Inject syringe # A-7 Potassium Chloride		
32.	Inject syringe # A-8 Saline Flush.		
33.	Cardiac monitor (ECG) "flat line."	+ 0828.23	
34.	Physician pronounces death.	* 0828.53	
	If all 8 syringes from Tray A have been infused, 10 minutes has elapsed and death has not been determined, notify Associate Warden and Team Leader. Warden may authorize repeat of protocol with Tray B, backup catheter.		
35.	Inject syringe # B-1 Sodium Thiopental.		
36.	Inject syringe # B-2 Sodium Thiopental.		
37.	Inject syringe # B-3 Saline flush.		
38.	Inject syringe # B-4 Pancuronium Bromide.		
39.	Inject syringe # B-5 Saline flush.		
40.	Inject syringe # B-6 Potassium Chloride.		
41.	Inject syringe # B-7 Potassium Chloride.		
42.	Inject syringe # B-8 Saline Flush.		
43.	Cardiac monitor (ECG) "flat line."		
44.	Physician pronounces cessation of life.		
45.	Prepare final report of execution.		



Lethal Injection Team Administrator

5/10/14

Date

SCENARIO # THREE

Date: May 10, 2013

RECORD LOGS __

FINAL REPORTS __

INVENTORY SHEETS __

San Quentin State Prison
Execution Log
Lethal Injection Security Team

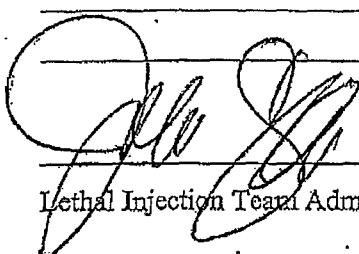
3

Inmate Name	CDCR#	Date of Execution
J. DOE	A12345	5/10/13

Record Team Member Identification #: 17

TASKS	Time	Comments
Inmate searched placed in restraints (handcuffs, Martin chain, and leg irons) and removed from the holding cell.	1155	
Preparation/Execution Room		
Inmate staged in Preparation Room to allow Intravenous Team to attach ECG leads.	1156	
Escorted inmate to Execution Room.	1157	
Inmate secured to gurney.	1202	
Security Team exits Execution Room.	1203	
Team Leader takes position in Infusion/Control Room.	1209	
Post Execution		
Security Team re-entered Execution Room after the Lethal Injection process has been completed and all witnesses have been escorted out of the Lethal Injection Facility.		
Post mortem identification and photographs completed.		
Inmate's remains prepared for release to Coroner/Mortuary.		
Released inmate's remains to the Coroner/Mortuary.		
Completed all reports relative to Lethal Injection process.		
Clean Lethal Injection Facility.		

Notes:


Lethal Injection Team Administrator

5/10/13
Date

San Quentin State Prison
Execution Log
Lethal Injection Team Administrator/Team Leader

#3

Inmate Name	CDCR #	Date of Execution
Doe, J	A12345	5/10/13

Record Team Member Identification #: 16

Task	Start	Comments
1. 3 hours prior: Assemble Team and make assignments.		
Record Keeping Team activated; Execution Logs begin.		
2. The Lethal Injection Team Leader accompanied by the Associate Warden Specialized Housing Division will remove the lethal injection chemicals from the Lethal Injection Facility safe/refrigerator.		
3. The Lethal Injection Team Leader will transfer custody of the lethal injection chemicals to two members of the Lethal Injection Infusion Team and complete the Chain of Custody form.		
4. Meet with the condemned inmate in the Lethal Injection Facility holding cell area. <ul style="list-style-type: none"> Ask if the inmate wishes to write a last statement to be read after the execution. Inform the inmate that a sedative is available. Valium or its equivalent will be administered under the direction and approval of a clinician. 	1154 1156	No Statement. Sedative Requested.
5. The Lethal Injection Team Administrator will take position in the Infusion/Control room.	1159	
6. Team Leader takes position in Infusion Room.	1208.27	
7. Infusion of lethal chemicals is initiated.	1209.36	10 Minute Count
8. Flat line noted on ECG.	1211.19	
9. Death pronounced.	1212.01	
If chemicals on Tray B are used for repeat of Protocol -- backup catheter will be used. All 8 syringes will be administered in the same sequence.		
10. Repeat Protocol.		
11. Flat line noted on ECG.		
12. Death pronounced.		
13. Witnesses notified that inmate has expired.	1212.51	
14. Curtains drawn on viewing windows.	1213.03	
15. Inmate's body prepared for Coroner/Mortuary.		



Lethal Injection Team Administrator

Date

5/10/13

San Quentin State Prison
Execution Log
Lethal Injection Infusion Team

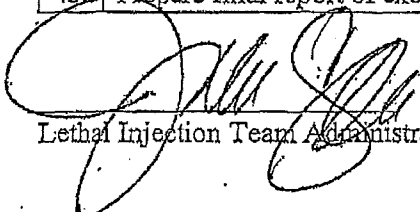
#3

Inmate Name	CDCR#	Date of Execution
J. Doe	A12345	5/10/13

Record Keeping Team Member Identification #: 14

	Task	Time	Comments
1.	Infusion Team Members arrive at the Lethal Injection Facility.		
2.	Transfer of chemicals to Infusion Team; (chain of custody)		
	Tray A		
3.	Mix 1 st 3 kits of Sodium Thiopental for syringe #1 for Tray A.		
4.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in red; A-1 Sodium Thiopental.		
5.	Mix 2 nd 3 kits of Sodium Thiopental for syringe #2.		
6.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in red; A-2 Sodium Thiopental.		
7.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-3 Saline.		
8.	Draw 50 mg of Pancuronium Bromide into one 60cc syringe and label in red; A-4 Pancuronium Bromide.		
9.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-5 Saline.		
10.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in red; A-6 Potassium Chloride.		
11.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in red; A-7 Potassium Chloride.		
12.	Draw 50cc of normal saline into a 60cc syringe and label in red; A-8 Saline.		
	Tray B		
13.	Mix 1 st 3 kits of Sodium Thiopental for syringe #1 for Tray B.		
14.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in blue; B-1 Sodium Thiopental.		
15.	Mix 2 nd 3 kits of Sodium Thiopental for syringe #2.		
16.	Draw 1.5 g of Sodium Thiopental into 60cc syringe and label this syringe in blue; B-2 Sodium Thiopental.		
17.	Draw 50cc of normal saline into a 60cc syringe and label in blue; B-3 Saline.		
18.	Draw 50 mg of Pancuronium Bromide into one 60cc syringe and label in blue; B-4 Pancuronium Bromide.		
19.	Draw 50cc of normal saline into a 60cc syringe and label in blue; B-5 Saline.		
20.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in blue; B-6 Potassium Chloride.		

	Task	Time	Comments
21.	Draw 100 mEq of Potassium Chloride into 60cc syringe and label in blue; B-7 Potassium Chloride.		
22.	Draw 50cc of normal saline into a 60cc syringe and labeled in blue; B-8 Saline.		
23.	Infusion Team Members cross check Tray A and Tray B.		
24.	Intravenous lines checked		
	Infusion		
25.	Inject syringe #A-1 Sodium Thiopental. Conscious check.	12.09.36	12.10.11 CV 12.10.11
	Begin 10 minute count:	12.09.36	
26.	Inject syringe #A-2 Sodium Thiopental	12.10.29	
27.	Inject syringe #A-3 the Saline Flush. Conscious check.	12.11.04	
	Inmate conscious discontinue Tray A and start Tray B in back-up intravenous catheter. Inmate unconscious continue with Tray A.		
28.	Inject syringe # A-4 Pancuronium Bromide.	12.11.48	(F) 12.12.73
29.	Inject syringe #A-5 the Saline Flush.		
30.	Inject syringe # A-6 Potassium Chloride.		
31.	Inject syringe # A-7 Potassium Chloride		
32.	Inject syringe # A-8 Saline Flush.		
33.	Cardiac monitor (ECG) "flat line."	+ 12.11.19	
34.	Physician pronounces death.	X 12.12.01	
	If all 8 syringes from Tray A have been infused, 10 minutes has elapsed and death has not been determined, notify Associate Warden and Team Leader. Warden may authorize repeat of protocol with Tray B, backup catheter.		
35.	Inject syringe # B-1 Sodium Thiopental.		
36.	Inject syringe # B-2 Sodium Thiopental.		
37.	Inject syringe # B-3 Saline flush.		
38.	Inject syringe # B-4 Pancuronium Bromide.		
39.	Inject syringe # B-5 Saline flush.		
40.	Inject syringe # B-6 Potassium Chloride.		
41.	Inject syringe # B-7 Potassium Chloride.		
42.	Inject syringe # B-8 Saline Flush.		
43.	Cardiac monitor (ECG) "flat line."		
44.	Physician pronounces cessation of life.		
45.	Prepare final report of execution.		


 Lethal Injection Team Administrator

 5/10/13
 Date

#3

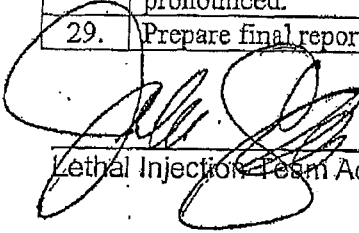
**San Quentin State Prison
Execution Log
Lethal Injection Intravenous Team**

Inmate Name	CDCR #	Date of Execution
DOE, J	A12345	5/10/13

Record Team Member Identification #: 7

Task	Time	Comments
1. IV tubing and needles given final check.		
2. ECG pads are placed on inmate's chest.		
3. ECG leads attached to monitor.	1202 ⁵⁶	
4. Insert intravenous catheter - Left	1204 ¹⁰	
5. Left catheter patency confirmed.	1204 ⁵¹	
6. Insert intravenous catheter - Right	1206 ²⁶	1207 ⁰⁵ 1207 ⁴¹
7. Right catheter patency confirmed.	1208 ⁰⁵	
8. One Intravenous Team Member exits Holding Cell Area and goes to Infusion Room to record infusion of chemicals on ECG graph paper.	1208	
9. One Intravenous Team Member takes position next to inmate to monitor consciousness and Intravenous lines.	1208	
10. Team advised which Intravenous catheter is to be used for execution. (left or right)	1208	
11. Saline drip in primary arm is stopped.	1208	
12. Syringe #A-1 administered; mark ECG graph paper with #A-1. Team Member in Execution Room checks inmate for consciousness.	1209 ²⁶	
13. Syringe #A-2 administered; mark ECG graph paper with #A-2.	1210 ²⁹	
14. Syringe #A-3 administered; mark ECG graph paper with #A-3. Team Member in Execution Room checks inmate for consciousness.	1211 ⁰⁴	
15. Syringe #A-4 administered; mark ECG graph paper with #A-4.	1211 ⁴⁸	
16. Syringe #A-5 administered; mark ECG graph paper with #A-5.		
17. Syringe #A-6 administered; mark ECG graph paper with #A-6.		
18. Syringe #A-7, administered; mark ECG graph paper with #A-7.		
19. Syringe #A-8 administered; mark ECG graph paper with #A-8.		

	Task	Time	Comments
	If chemicals on Tray B are used for repeat of Protocol - backup catheter will be used. Syringes will be injected in same sequence with all 8 syringes on Tray B being administered.		
20.	Syringe #B-1, mark ECG graph paper with #B-1.		
21.	Syringe #B-2, mark ECG graph paper with #B-2.		
22.	Syringe #B-3, mark ECG graph paper with #B-3.		
23.	Syringe #B-4, mark ECG graph paper with #B-4.		
24.	Syringe #B-5, mark ECG graph paper with #B-5.		
25.	Syringe #B-6, mark ECG graph paper with #B-6.		
26.	Syringe #B-7, mark ECG graph paper with #B-7.		
27.	Syringe #B-8, mark ECG graph paper with #B-8.		
28.	Mark ECG graph paper when death is pronounced.	1212 ⁰¹	
29.	Prepare final report.		



Lethal Injection Team Administrator

5/10/12

Date

**LETHAL INJECTION FACILITY
SECURITY TEAM SUPPLY INVENTORY
CABINET #1**

Item	Quantity	Start
Modified Cuffs	1	1
Leg restraints	2	2
Handcuffs	2	2
Handcuff Key (black)	6	6
Handcuff Key (silver)	8	8
Cut Down Tool	1	1
Martin Chain	3	3
Straight Baton	1	1
Leather Belts (extra)	4	4
Expandable Baton	4	4
Mk-4 (OC)	1	1
Waist Restraints	2	2
Metal Detector (wand)	1	1
Heavy Duty Locks	3	3
Transportation Set	1	1

8

Security Team Members

1

Execution Team Leader

5-10-13

Date

5/10/13

Date

**LETHAL INJECTION FACILITY
SECURITY TEAM SUPPLY INVENTORY
CABINET #2**

Item	Quantity	Start
Disaster Pouch	4	4
Cut Down Tool	1	1
Res-Q-Flo	1	1
Tape (box)	2	2
Lanterns	2	2
Video Camera (charger/film)	1(1/2)	1 1/2
Polaroid Camera(film)	1(2)	1 (2)
Wrap	1	1
Digital Camera	1	1
Ankle Straps	3	3
Wrist Straps	4	4

8
Security Team Members

1
Execution Team Leader

5-10-13

Date

5/10/13

Date

**LETHAL INJECTION FACILITY
SECURITY TEAM SUPPLY INVENTORY
CABINET #4**

Item	Quantity	Start
Helmets	5	5
Leather Gloves	5	5
Knee Pads	5	5
Elbow Pads	5	5
Shin Guards	5	5
PPE Kits	25	25
Gas Masks	6	6
Lanterns	3	3
Shield	2	2
Stokes Liter	1	1

Security Team Members ^{# 8}

Execution Team Leader ^{# 1}

Date

Date

I.V. TEAM SECURED STORAGE				
START	END	QUANTITY	AREA	ITEAM
9		10 - bx		GLOVES NON-POWDER, Small
16		10 - bx		GLOVES NON-POWDER, Med
5		10 - bx		GLOVES NON-POWDER, Lg
9		10 - bx		GLOVES NON-POWDER, XLg
39		100 - ea		ANGIOCATH - 16 GA 1"
1020		100 - ea		ANGIOCATH - 18 GA 1"
1100		100 - ea		ANGIOCATH - 20 GA 1"
95		100 - ea		ANGIOCATH - 22 GA 1"
32		50 - ea		PRESSURE TUBING - 72"
106		25 - ea		SECONDARY IV - 40"
92		50 - ea		IV SET 15 DROP - 85"
63		50 - ea		SAFEPORT INJECTOR (3 Way stop)
39		50 - ea		IV START KIT
61		50 - ea		NORMAL SALINE - 1,000cc 0.9%
4		4 - bx		SURGICAL MASK
12		5 - bx		ALCOHOL PREP PADS
7		3 - bx		TAPE 1"
18		3 - bx		TAPE 2"
22		4 - pkg		NON-STERILE GUAZE 2x2
79		50 - ea		SHARP CONTAINER-SMALL
14		10 - ea		SHARP CONTAINER-LARGE
96		50 - ea		DISPOSABLE RAZOR
5		5 - ea		FACE SHIELD
15		20 - pkg		MONITORING ELECTRODE (RED DOT)
2		2 - ea		ECG HEART MONITOR
71		20 - rolls		ECG PAPER
2		2 - ea		STETHOSCOPE
130		50 - ea		OXYGEN SENSOR
2		2 - ea		VENOSCOPE
4		2 - ea		MICRO HEAD LANTERN
2		2 - ea		SCISSORS
3		2 - ea		BLOOD SPILL KIT
186		5 - bx		INTIMA 22 GAUGE
6		2 - ea		HAZARDUS WASTE BUCKET
100				Intima 18 gauge
200				Intima - 20 gauge
INFUSION TEAM-COUNTER				
		100		SYRINGE - 20 CC LUER LOCK
		100		SYRINGE - 60 CC LUER LOCK

#5

5/10/13

Signature of IV/Infusion Team Member

Date

Signature of Team Leader

Date

Lethal Injection Facility Sanitation Inspection Checklist

Date
5/10/13

Search Area	Comments
Sallyport Corridor	NORMAL
Sallyport Storage Room	NORMAL
Staging Area	NORMAL
Secure Holding Cell Area	NORMAL
Officer Security Area	NORMAL
Prep Room	NORMAL
Break Room	NORMAL
Rest Rooms	NORMAL
Prep Storage Room	NORMAL
Infusion/Control Room	NORMAL
Execution Room	NORMAL
Electrical Room	NORMAL
Storage Room	NORMAL
Victim Family Viewing Room	NORMAL
Press Viewing Room	NORMAL
Inmate Family Viewing Room	NORMAL
All Doors & Gates Functioning	NORMAL

Lethal Injection Facility Safe Secure	Secure
Light and Appliances Functioning	Functioning
Tool Inventory	complete
Refrigerator Temperature Indicate Temperature	Temperature <u>40.5° F</u>
Equipment Inventory Attach to Form	ATTACHED

A4
Security Team Members

#1
Execution Team Leader

5/10/13
Date

5/10/13
Date

MAINT INVENTORY SHEET

AREA	ITEM	TYPE	SIZE	QUANT	INVENTORY	MAKE	MODLE
Gas Chamber	Hammer	Ball Peen		1			
Gas Chamber	Wrench	Crescent	12"	1			
Gas Chamber	Wrench	Combo Set 6 pc.	7/8" - 1 1/4"	1			
Gas Chamber	Socket	1/2" Drive 18 pc.	7/16" - 1 1/4"	1			
Gas Chamber	Screwdriver	Phillips	#1 X 3"	2			
Gas Chamber	Screwdriver	Phillips	#2 X 4 1/4"	1			
Gas Chamber	Screwdriver	Slotted	1/4" X 3 1/2"	1			
Gas Chamber	Screwdriver	Slotted	1/4" X 6"	1			
Gas Chamber	Pliers	Channel Lock	12"	1			
Gas Chamber	Pliers	Slip Joint	8"	1			
Gas Chamber	Level	Torpedo		1			
Gas Chamber	Stripper	Wire		1			
Gas Chamber	Wrench	Pipe	14"	2			
Gas Chamber	Allen	Hex, 7 Pc. Set	Small	1			
Gas Chamber	Allen	Hex, 8 Pc. Set	Large	1			
Gas Chamber	Socket	1/4" Drive 14 pc.		1			
Gas Chamber	Tester	Voltage, Wiggy		1			
Gas Chamber	Knife	Putty	2"	2			
Gas Chamber	Wrench	No Hub		1			
Gas Chamber	Nutdriver	Nut	5/16"	1			
Gas Chamber	Screwdriver	Slotted	1/4" X 9 1/2"	1			
Gas Chamber	Tape Measure		25'	1			
Gas Chamber	Knife	Utility		1			
Gas Chamber	Wrench	ComboSet 7 pc.	3/8 - 3/4"	1			
Gas Chamber	Pliers	Vise Grip	7"	2			
Gas Chamber	Wire Cutters	Diagonal	8"	1			
Gas Chamber	Wire Brush			2			
Gas Chamber	Driver	Security 7Pc.		1			



SAGENT™

July 29, 2014

State of California
California Department of Corrections and Rehabilitation
Attn: Jeffrey A. Beard, Ph.D.
1515 S Street
Sacramento, CA 95811

Dear Secretary Beard,

Sagent Pharmaceuticals, Inc. sources, manufactures, markets and sells throughout the United States a wide range of drug products. Sagent is aware that some of the drug products it sells, including Propofol, Midazolam, Vecuronium Bromide and various other drugs might be used by your department in connection with capital punishment activities, including lethal injection.

All of Sagent's products, like all drug products approved for distribution in the United States by the FDA, are to be used only according to each product's approved indications. Sagent does not approve any "off-label" use of its drug products, and specifically objects to any use of its drug products in connection with any capital punishment activities, including lethal injection, by your department or by any governmental entity.

Therefore, any procurement or use by your department of any Sagent drug product in connection with any capital punishment activity, including lethal injection, or any other use not approved by the FDA and indicated on the product's label, is prohibited.

To the extent any Sagent product is of a type that may be used in connection with any capital punishment activity but is required by your department for the treatment of patients in accordance with such product's approved indications, we would make such product available only with your department's assurances that the product would not be used for any capital punishment activity.

We are available to discuss this matter further to ensure that none of Sagent's products are used by your department in connection with capital punishment activities. Please contact me at mlogerfo@sagentpharma.com or by telephone at 847-908-1608 as necessary at your convenience.

Very truly yours,

Michael Logerfo
Executive Vice President
Chief Legal Officer

Discover. Measureable. Excellence.

PATIENT INFORMATION LEAFLET

THIOPENTAL INJECTION BP

The active ingredient in thiopental injection, thiopental sodium, is also known as thiopentone sodium.

Please read this leaflet carefully before you receive your medicine. Do not throw it away as you may want to read it again. This leaflet provides a summary of the information available on your medicine. If you have any questions, or are not sure about anything, ask your doctor, nurse or pharmacist.

WHAT IS IN MY MEDICINE?

Each vial of this product contains 500 milligrams of thiopental sodium as a powder for solution for injection, and is presented in packs of 25 vials. It is a dry powder which needs to be dissolved in water for injections.

WHAT IS THIOPENTAL?

Thiopental sodium is an anaesthetic agent which is usually given by intravenous injection.

MARKETING AUTHORISATION HOLDER AND MANUFACTURER

The Marketing Authorisation Holder is Link Pharmaceuticals Limited, Bishopsgate House, Alton Way, Horsham, West Sussex, RH12 1AH, UK.

Thiopental Injection is manufactured by Sandoz GmbH, A-6230 Kufstein-Schraftenegg, Tyrol, Austria.

WHAT IS THIOPENTAL USED FOR?

Thiopental may be used for any of the following reasons:

- i) as a general anaesthetic, or to make you sleepy before using another anaesthetic agent, or before using agents for preventing pain or to relax muscles;
- ii) to control fits.

IS THIOPENTAL SAFE FOR EVERYBODY?

You should not normally receive thiopental if any of the following apply to you:

- You have an obstruction in your lungs or in the tubes leading to them.
- You are having an acute asthma attack.
- You are in severe shock.
- You have the condition known as myotonic dystrophy.
- You have the condition known as porphyria.

People with these last two conditions will know if they have them.

You should tell your doctor, nurse or pharmacist if any of these apply to you. They will usually decide to use another medicine instead.

PRECAUTIONS

Although you can still receive thiopental, your doctor may decide to use another medicine in the following circumstances:

- If you have diseases of the heart or circulation as these can suddenly be made more severe by thiopental injection.
- If you have cranial hypertension (high pressure inside your head) or endocrine gland insufficiency, low blood pressure, severe bleeding, burns, muscle weakness or degeneration (associated with conditions such as myasthenia gravis or muscular dystrophies), malnutrition or wasting. Your doctor will need to take extra precautions while treating you with thiopental injection.
- If thiopental is accidentally injected into an artery instead of a vein, it can cause damage to your tissues but your doctor may be able to treat these effects (a similar problem can occur if thiopental leaks from the vein into surrounding tissues). If you feel severe pain near where the drug was injected say so immediately so that treatment can be started quickly.
- Thiopental injection has been used safely during pregnancy but if you are pregnant, or think you could be, you should make sure that your doctor knows about this. They can then discuss any possible risks with you before treatment starts. If you intend breast-feeding a baby after having thiopental injection you should discuss the safety of doing so with your doctor.
- You may not be fit to drive (or operate other machinery) after receiving thiopental injection. Although the effect will wear off quite quickly, you must be certain that you are able to drive safely before you try. During this time, even a small amount of alcohol can have a very strong effect on you making

THIOPENTAL INJECTION BP

PRECAUTIONS (Contd.)

- Other medicines which can interact with thiopental injection include medicines called beta-blockers or calcium antagonists which are used to decrease your blood pressure, or any medicines prescribed to you for anxiety, or which are used to alter your mood (called antipsychotics).

If you are in doubt about the kind of medicine you are taking please contact your doctor or pharmacist.

Reduced doses may be needed if you have any of the following:

- Liver disease (including jaundice), shock, dehydration, severe anaemia, high blood level of potassium, infection in your blood. Elderly patients and people who suffer from metabolic disorders may also need smaller doses. An example of this type of disease is myxoedema (a condition caused by an underactive thyroid gland).
- People who have received morphine or similar medicines before they are given thiopental injection often need lower doses. If you have received a medicine called sulfolutazole please tell your doctor. He or she may need to give you smaller doses of thiopental and give these more frequently than usual.

Increased doses if you are a heavy and frequent drinker of alcohol or if you regularly take non-prescribed drugs, the dose of thiopental may need to be increased or given with another medicine to increase its effect.

You should tell your doctor, nurse or pharmacist if any of these apply to you.

HOW IS THIOPENTAL GIVEN?

Thiopental injection is first made into a solution usually containing 25mg in 1ml. Sometimes a higher strength may be used.

A needle will have been placed into a vein in advance. Thiopental injection can be injected directly through this needle or it may be put into a drip which runs through it.

Dosages used for convulsions (fitting) are 7.5mg to 12.5mg given as soon as possible after the convulsion begins. Further doses may be required and your doctor will decide the best dose to give you.

The normal anaesthetic dose for adults is 100mg to 150mg, injected over 10 to 15 seconds, although smaller doses may be used for elderly patients. The dose for a child depends on their weight (usually between 2mg to 7mg for every kg of body weight). You will normally feel the effects within 30 seconds and be asleep within one minute. Further small doses will be given to you as necessary (you will normally be asleep during this process).

ARE THERE ANY SIDE EFFECTS?

The effects which have been seen with thiopental injection are listed below.

Thiopental injection can cause coughing, sneezing or spasm of the airways in your throat when it is injected. It can cause skin rashes and other allergic reactions, such as itching.

Your body's automatic breathing control may be affected causing spasm of the airways and difficulty breathing, and the pumping action of the heart can be reduced or irregular heartbeats may occur.

Thiopental injection can cause headaches.

When injected thiopental can cause severe pain at the site of injection. If this happens inform your doctor immediately.

If you experience any of the above side effects or any other side effects please tell your doctor, nurse or pharmacist.

MORE INFORMATION ABOUT THIOPENTAL INJECTION

Do not use thiopental after the expiry date printed on the pack and on each vial. The vials should not be stored above 25°C and should be kept in the outer carton.

The injection solution is quite strongly alkaline, to stop the thiopental from "going off". Because of this it cannot be mixed with other injections that are acidic. The solution should be kept cool (between 2°C and 8°C) after making it up and normally should be used within seven hours. If the solution is discoloured it should not be used.

This leaflet was written in September 2003.

PL0304

Drug Enforcement Administration Practitioner's Manual

OMB Approval No. 1117-0007	U.S. Department of Justice / Drug Enforcement Administration REGISTRANTS INVENTORY OF DRUGS SURRENDERED	PACKAGE NO. 11/12
-------------------------------	---	----------------------

The following schedule is an inventory of controlled substances which for proper disposition.

FROM: (Include Name, Street, City, State and ZIP Code in space provided below.)

San Quentin State Prison
 Medical Injection Facility
 San Quentin, CA
 94964

Registrant's DEA Number
 Registrant's Telephone Number
 415-455-5002

NOTE: CERTIFIED MAIL (which Receipt is required) IS REQUIRED FOR SHIPMENTS OF DRUGS VIA U.S. POSTAL SERVICE. See instructions on reverse (page 2) of form.

NAME OF DRUG OR PREPARATION <i>Place name within in columns 1, 2, and 3 ONLY.</i>	Number of Containers	CONTENTS (Number of grams, mg, etc., or other units per container)	Con- solid Sub- stances Cont. in each Unit	FOR DEA USE ONLY		
				DISPOSITION	QUANTITY	
					GRMS	MG
1						
2 Sodium Thiopental	997	498.5g	1g/498.5mg			
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						

Nothing follows
 Exp 05 2014
 Lot # AW 6007
 Total grams 498.5g

FORM DEA-11 (Rev. 11-01)

Previous edition dated 4-06 is obsolete.

See instructions on reverse (page 2) of form.

DEA-44-167906-2

NAME OF DRUG OR PREPARATION	Number of Containers	CONTENTS (Number of pills, capsules, ampules, or other units per container)	CONTAINED SUBSTANCE (Each Unit)	FOR DEA USE ONLY	
				DISPOSITION	QUANTITY Gross Nets
Regulations will fill in Columns 2, 3, and 4 ONLY.					
17	2	2	4	5	
18					
19					
20					
21					
22					
23					
24					

The consigned substances were handled in accordance with Title 21 of the Code of Federal Regulations, Section 130.21, have been received in _____ packages purporting to contain the drugs listed on this inventory and have been: (1) Forwarded to postal or private carrier; (2) Transported by individual and the remainder forwarded to a sealed container; (3) Forwarded to a sealed container; (4) Forwarded to a sealed container.

DATE 5/5/2019

DEPT 301

* Strong: our friends are responsible.

WITNESSED:

INSTRUCTION

1. List the dates and the drugs in column 1, the number of containers in column 2, the size of each container in column 3, and in column 4 the name and telephone number of each unit responsible in column 5 (e.g., MacPherson Unit, 101-103, 103-104, 103-105, 103-106, 103-107, 103-108, 103-109, 103-110, 103-111, 103-112, 103-113, 103-114, 103-115, 103-116, 103-117, 103-118, 103-119, 103-120, 103-121, 103-122, 103-123, 103-124, 103-125, 103-126, 103-127, 103-128, 103-129, 103-130, 103-131, 103-132, 103-133, 103-134, 103-135, 103-136, 103-137, 103-138, 103-139, 103-140, 103-141, 103-142, 103-143, 103-144, 103-145, 103-146, 103-147, 103-148, 103-149, 103-150, 103-151, 103-152, 103-153, 103-154, 103-155, 103-156, 103-157, 103-158, 103-159, 103-160, 103-161, 103-162, 103-163, 103-164, 103-165, 103-166, 103-167, 103-168, 103-169, 103-170, 103-171, 103-172, 103-173, 103-174, 103-175, 103-176, 103-177, 103-178, 103-179, 103-180, 103-181, 103-182, 103-183, 103-184, 103-185, 103-186, 103-187, 103-188, 103-189, 103-190, 103-191, 103-192, 103-193, 103-194, 103-195, 103-196, 103-197, 103-198, 103-199, 103-200, 103-201, 103-202, 103-203, 103-204, 103-205, 103-206, 103-207, 103-208, 103-209, 103-210, 103-211, 103-212, 103-213, 103-214, 103-215, 103-216, 103-217, 103-218, 103-219, 103-220, 103-221, 103-222, 103-223, 103-224, 103-225, 103-226, 103-227, 103-228, 103-229, 103-230, 103-231, 103-232, 103-233, 103-234, 103-235, 103-236, 103-237, 103-238, 103-239, 103-240, 103-241, 103-242, 103-243, 103-244, 103-245, 103-246, 103-247, 103-248, 103-249, 103-250, 103-251, 103-252, 103-253, 103-254, 103-255, 103-256, 103-257, 103-258, 103-259, 103-260, 103-261, 103-262, 103-263, 103-264, 103-265, 103-266, 103-267, 103-268, 103-269, 103-270, 103-271, 103-272, 103-273, 103-274, 103-275, 103-276, 103-277, 103-278, 103-279, 103-280, 103-281, 103-282, 103-283, 103-284, 103-285, 103-286, 103-287, 103-288, 103-289, 103-290, 103-291, 103-292, 103-293, 103-294, 103-295, 103-296, 103-297, 103-298, 103-299, 103-300, 103-301, 103-302, 103-303, 103-304, 103-305, 103-306, 103-307, 103-308, 103-309, 103-310, 103-311, 103-312, 103-313, 103-314, 103-315, 103-316, 103-317, 103-318, 103-319, 103-320, 103-321, 103-322, 103-323, 103-324, 103-325, 103-326, 103-327, 103-328, 103-329, 103-330, 103-331, 103-332, 103-333, 103-334, 103-335, 103-336, 103-337, 103-338, 103-339, 103-340, 103-341, 103-342, 103-343, 103-344, 103-345, 103-346, 103-347, 103-348, 103-349, 103-350, 103-351, 103-352, 103-353, 103-354, 103-355, 103-356, 103-357, 103-358, 103-359, 103-360, 103-361, 103-362, 103-363, 103-364, 103-365, 103-366, 103-367, 103-368, 103-369, 103-370, 103-371, 103-372, 103-373, 103-374, 103-375, 103-376, 103-377, 103-378, 103-379, 103-380, 103-381, 103-382, 103-383, 103-384, 103-385, 103-386, 103-387, 103-388, 103-389, 103-390, 103-391, 103-392, 103-393, 103-394, 103-395, 103-396, 103-397, 103-398, 103-399, 103-400, 103-401, 103-402, 103-403, 103-404, 103-405, 103-406, 103-407, 103-408, 103-409, 103-410, 103-411, 103-412, 103-413, 103-414, 103-415, 103-416, 103-417, 103-418, 103-419, 103-420, 103-421, 103-422, 103-423, 103-424, 103-425, 103-426, 103-427, 103-428, 103-429, 103-430, 103-431, 103-432, 103-433, 103-434, 103-435, 103-436, 103-437, 103-438, 103-439, 103-440, 103-441, 103-442, 103-443, 103-444, 103-445, 103-446, 103-447, 103-448, 103-449, 103-450, 103-451, 103-452, 103-453, 103-454, 103-455, 103-456, 103-457, 103-458, 103-459, 103-460, 103-461, 103-462, 103-463, 103-464, 103-465, 103-466, 103-467, 103-468, 103-469, 103-470, 103-471, 103-472, 103-473, 103-474, 103-475, 103-476, 103-477, 103-478, 103-479, 103-480, 103-481, 103-482, 103-483, 103-484, 103-485, 103-486, 103-487, 103-488, 103-489, 103-490, 103-491, 103-492, 103-493, 103-494, 103-495, 103-496, 103-497, 103-498, 103-499, 103-500, 103-501, 103-502, 103-503, 103-504, 103-505, 103-506, 103-507, 103-508, 103-509, 103-510, 103-511, 103-512, 103-513, 103-514, 103-515, 103-516, 103-517, 103-518, 103-519, 103-520, 103-521, 103-522, 103-523, 103-524, 103-525, 103-526, 103-527, 103-528, 103-529, 103-530, 103-531, 103-532, 103-533, 103-534, 103-535, 103-536, 103-537, 103-538, 103-539, 103-540, 103-541, 103-542, 103-543, 103-544, 103-545, 103-546, 103-547, 103-548, 103-549, 1

PRIVACY ACT INFORMATION

AUTHORITY: Section 307 of the Controlled Substances Act of 1970 [PL 91-619],
purposes to regulate the manufacture and distribution of substances which have been forwarded by the Secretary of State as
PURPOSES: The purpose of the proposed rule is to establish a system for the control of certain controlled substances, to provide
NOTICE OF RIGHTS: The notice required by Federal Regulations shall be provided or delivered. Controlled Substances, Distribution,
determination with the system.
A. Other Federal law enforcement and regulatory purposes.
B. State and local law enforcement and regulatory purposes.
EFFECT: Failure to obtain the substance of unapproved Controlled Substances may result in prosecution for violation of the
Controlled Substances Act.

[illegible]

INVENTORY OF SODIUM THIOPENTAL

DATE	TIME	# OF CONTAINERS	# OF GRAMS, OUNCES OR UNITS	CONTENT OF EACH UNIT	LOT NUMBER	SIGNATURE	SIGNATURE
5/5/14	0815	Box #3	22 VIALS	500 MG	AW6002		
		Box #4	25 VIALS	500 MG	AW6002		
		Box #5	25 VIALS	500 MG	AW6002		
		Box #6	25 VIALS	500 MG	AW6002		
		Box #7	25 VIALS	500 MG	AW6002		
		Box #8	25 VIALS	500 MG	AW6002		
		Box #9	25 VIALS	500 MG	AW6002		
		Box #10	25 VIALS	500 MG	AW6002		
		Box #11	25 VIALS	500 MG	AW6002		
		Box #12	25 VIALS	500 MG	AW6002		
		Box #13	25 VIALS	500 MG	AW6002		
		Box #14	25 VIALS	500 MG	AW6002		
		Box #15	25 VIALS	500 MG	AW6002		
		Box #16	25 VIALS	500 MG	AW6002		
		Box #17	25 VIALS	500 MG	AW6002		
		Box #18	25 VIALS	500 MG	AW6002		
		Box #19	25 VIALS	500 MG	AW6002		
		Box #20	25 VIALS	500 MG	AW6002		
		Box #21	25 VIALS	500 MG	AW6002		
		Box #22	25 VIALS	500 MG	AW6002		
		Box #23	25 VIALS	500 MG	AW6002		
		Box #24	25 VIALS	500 MG	AW6002		
		Box #25	25 VIALS	500 MG	AW6002		
		Box #26	25 VIALS	500 MG	AW6002		
		Box #27	25 VIALS	500 MG	AW6002		
		Box #28	25 VIALS	500 MG	AW6002		
		Box #29	25 VIALS	500 MG	AW6002		
		Box #30	25 VIALS	500 MG	AW6002		
		Box #31	25 VIALS	500 MG	AW6002		

All records related to controlled substances must be maintained and available for inspection for a minimum of two years. After an initial inventory is taken, a new inventory of all controlled substances on hand must be taken at least every two years. (Drug Enforcement Administration's Practitioner's Manual; Section IV; Recordkeeping Requirements; Inventory: page 16.)

5/5/14
0815

INVENTORY OF SODIUM THIOPENTAL

[illegible]

All records related to controlled substances must be maintained and available for inspection for a minimum of two years. After an initial inventory is taken, a new inventory of all controlled substances on hand must be taken at least every two years. (Drug Enforcement Administration Practitioner's Manual, Section IV; Recordkeeping Requirements; Inventory; page 16.)



IN CASE OF EMERGENCY CONTACT CHEMTREC 1-800-424-9300

MEDICAL WASTE TRACKING FORM NUMBER
STANDARD MANIFEST 001-1004 STD

Route # 151 - 0

CUSTOMER NO. 21132

MDSMOD/01/01

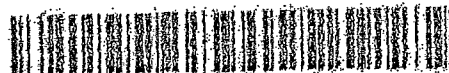
1. Generator's Name, Address and Telephone Number

ATTN: [REDACTED]

CA ST PRISON SAN QUENTIN (SQ)

1 MAIN ST

SAN QUENTIN, CA 94964-1000



KRB TB-Bio TT-Incineration Rr-Incineration TP-Pall TY-Chemo SH-14, 21, 24-Chemo SH-01, 02, 11-2

CUSTOMER NUMBER

6111048-015

GENERATOR'S REGISTRATION #

2A. DESCRIPTION OF WASTE

2B.

CONTAINER TYPE

2C. NO. OF CONTAINERS

2D. VOLUME

UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII

TB14 TP14 TH14 TY14 44 GAL TUB (5.8 CU FT)

1

Cu

UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII

TB21 TP15 TY15 20 GAL TUB (2.7 CU FT)

1

Cu

UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII

TB49 TY49 TH49 TP49 37 GAL TUB (4.9 CU FT)

1

4.9 Cu

UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII

KRB - Biohazardous Cardboard Box (1.2 CU FT)

1

Cu

UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII

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UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII

KRB - Biohazardous Cardboard Box (1.2 CU FT)

1

Cu

3. Generator's Certification: "I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations."

TOTALS

11

51.7 Cu

X Printed/Typed Name

Signature

Date

4. TRANSPORTER 1 ADDRESS

Stericycle, Inc.
30642 San Antonio Street
Hayward, CA 94544

Phone #

(865) 703-7422

Applicable Permit Numbers



This is a Through Shipment

Hauler Reg # 3400

TRANSPORTER CERTIFICATION: Receipt of medical waste as described above.

Print/Type Name

Signature

Date

5. INTERMEDIATE HANDLER 2 / TRANSPORTER 2 ADDRESS

INTERMEDIATE HANDLER / TRANSPORTER CERTIFICATION: Receipt of medical waste as described above.

Print/Type Name

Signature

Date

6. INTERMEDIATE HANDLER 3 / TRANSPORTER 3 ADDRESS

INTERMEDIATE HANDLER / TRANSPORTER CERTIFICATION: Receipt of medical waste as described above.

Print/Type Name

Signature

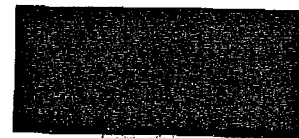
Date

7. DISCREPANCY INDICATION

☒ 8A. Designated Facility:☐ 8B. Alternate Facility:☐ 8C. Alternate Facility:☐ 8D. Alternate Facility:Stericycle, Inc.
1601 Singleton Drive
Wentzville, MO 63385
(660) 783-7422
TS/OST-83Stericycle, Inc.
3149 N 7th Street
Kenosha, WI 53140
(414) 321-1044
H1564Stericycle, Inc.
5700 W. Brown Ave.
Fremont, CA 94722
(510) 783-7422
TS/OST-22Stericycle, Inc.
900 N. Foxboro Drive
North Salt Lake, UT 8
(801) 783-7422
SA-445-2A-36

TREATMENT FACILITY: I certify that I have been authorized by the applicable state agency to accept untreated medical wastes and that I have

Generator Signature
Transporter Certification: [REDACTED]



Transporter Signature

EXC THIS IS A THROUGH EQUIPMENT.

EXC LOCAL TRANSPORT
Sterisuga-Hammond, GA

DESTINATION FACILITY:

Inmate Only
Sterisuga-Kansas City, KS
#1554
Dental Master,
Sterisuga-Fresno, CA

Pharmaceutical
Sterisuga-North Salt Lake, UT
30-440-1A-36
Standard
Sterisuga-Hollister, CA

DATE OF RECEIPT BY

RECEIPT FACILITY:

DELIVERY DOCUMENT # POSN000000

TOTAL DELIVERED ITEMS: 7

ITEM

QTY

1014 44-001 Yob (1014) 01-12-10

7

DRIVER: [REDACTED]
FREQUENCY: Weekly
NEXT PICKUP: 5-22-14
CUSTOMER SERVICE:
Thank you for choosing Sterisuga.

HAZARDOUS MATERIAL SHIPPING DOCUMENT

TRANSPORTER: Stericycle, Inc.
30542 San Antonio Street
Hayward, CA 94544
(866) 789-7422

For Stericycle Customer Care:
Call 1-866-789-7422
Stericycle Customer Care 1-811-0410
Rite 1-615

DE: By Prison San Quentin (901)
1 Main St.
San Quentin, CA 94561-0001
REGULATORY ID:
Phone #: (415) 464-1450
Contact: [REDACTED]

SERVICE DATE: 5-5-11 8:34:43 AM

SHIPPING DOCUMENT #: HNSH000001



UN3291, REGULATED MEDICAL WASTE, A-D-S,
E-Z, PCII

For OUI HAZMAT Emergency Response Call:
CHEMTREC 1-800-424-9300

Customer No: 21132
TOTAL CONTAINERS COLLECTED: 12
TOTAL VOLUME COLLECTED: 51.700 CU FT

QUANTITY (Cont. Type)	QTY	VOL
RX03 3 Gal (Pharm)	2	0.500
RX12 12 Gal (Pharm)	1	1.500
RX33 25 Gal (Pharm)	1	3.300
TY14 44 Gal Tub (Bio): CT 12-7	1	41.300
TY49 37 Gal Chem Tub (CT): 1	1	4.900

DOAG0001 RX03 DOAG0001 RX03 DOAG0001 RX12
DOAG0001 RX33 DOAG0001 TY14 DOAG0001 TY14
DOAG0001 TY14 DOAG0001 TY14 DOAG0001 TY14
DOAG0001 TY49 DOAG0001 TY49 DOAG0001 TY49

I hereby declare that the contents of this
consignment are fully and accurately
described above by the proper shipping
name, and are classified, packaged, marked
and labelled/placarded, and are in all
respects in proper condition for transport
according to applicable international and
national governmental regulations.

GENERATOR (PRINT NAME)

EXHIBIT F



SAGENT™

July 29, 2014

State of California
California Department of Corrections and Rehabilitation
Attn: Jeffrey A. Beard, Ph.D.
1515 S Street
Sacramento, CA 95811

Dear Secretary Beard,

Sagent Pharmaceuticals, Inc. sources, manufactures, markets and sells throughout the United States a wide range of drug products. Sagent is aware that some of the drug products it sells, including Propofol, Midazolam, Vecuronium Bromide and various other drugs might be used by your department in connection with capital punishment activities, including lethal injection.

All of Sagent's products, like all drug products approved for distribution in the United States by the FDA, are to be used only according to each products' approved indications. Sagent does not approve any "off-label" use of its drug products, and specifically objects to any use of its drug products in connection with any capital punishment activities, including lethal injection, by your department or by any governmental entity.

Therefore, any procurement or use by your department of any Sagent drug product in connection with any capital punishment activity, including lethal injection, or any other use not approved by the FDA and indicated on the product's label, is prohibited.

To the extent any Sagent product is of a type that may be used in connection with any capital punishment activity but is required by your department for the treatment of patients in accordance with such product's approved indications, we would make such product available only with your department's assurances that the product would not be used for any capital punishment activity.

We are available to discuss this matter further to ensure that none of Sagent's products are used by your department in connection with capital punishment activities. Please contact me at mlogerfo@sagentpharma.com or by telephone at 847-908-1608 as necessary at your convenience.

Very truly yours,

Michael Logerfo
Executive Vice President
Chief Legal Officer

PATIENT INFORMATION LEAFLET

THIOPENTAL INJECTION BP

The active ingredient in thiopental injection, thiopental sodium, is also known as thiopentone sodium.

Please read this leaflet carefully before you receive your medicine. Do not throw it away as you may want to read it again. This leaflet provides a summary of the information available on your medicine. If you have any questions, or are not sure about anything, ask your doctor, nurse or pharmacist.

WHAT IS IN MY MEDICINE?

Each vial of this product contains 500 milligrams of thiopental sodium as a powder for solution for injection, and is presented in packs of 25 vials. It is a dry powder which needs to be dissolved in Water for Injections.

WHAT IS THIOPENTAL?

Thiopental sodium is an anaesthetic agent which is usually given by intravenous injection.

MARKETING AUTHORISATION HOLDER AND MANUFACTURER

The Marketing Authorisation Holder is Link Pharmaceuticals Limited, Bishops Weald House, Albion Way, Horsham, West Sussex, RH12 1AH, UK.

Thiopental injection is manufactured by Sandoz GmbH, A-6336 Kufstein Schafftenau, Tyrol, Austria.

WHAT IS THIOPENTAL USED FOR?

Thiopental may be used for any of the following reasons:

- i) as a general anaesthetic, or to make you sleepy before using another anaesthetic agent, or before using agents to prevent pain or to relax muscles.
- ii) to control fits.

IS THIOPENTAL SAFE FOR EVERYBODY?

You should not normally receive thiopental if any of the following apply to you:

- You have an obstruction in your lungs or in the tubes leading to them.
- You are having an acute asthma attack.
- You are in severe shock.
- You have the condition known as myotonic dystrophy.
- You have the condition known as porphyria.

People with these last two conditions will know if they have them.

You should tell your doctor, nurse or pharmacist if any of these apply to you. They will usually decide to use another medicine instead.

PRECAUTIONS

Although you can still receive thiopental, your doctor may decide to use another medicine in the following circumstances:

- If you have diseases of the heart or circulation as these can suddenly be made more severe by thiopental injection.
- If you have cranial hypertension (high pressure inside your head) or adrenocortical insufficiency, low blood pressure, severe bleeding, burns, muscle weakness or degeneration (associated with conditions such as myasthenia gravis or muscular dystrophies), malnutrition or wasting. Your doctor will need to take extra precautions while treating you with thiopental injection.
- If thiopental is accidentally injected into an artery instead of a vein, it can cause damage to your tissues but your doctors may be able to treat these effects (a similar problem can occur if thiopental leaks from the vein into surrounding tissue). If you feel severe pain near where the drug was injected say so immediately so that treatment can be started quickly.
- Thiopental injection has been used safely during pregnancy but if you are pregnant, or think you could be, you should make sure that your doctors know about this. They can then discuss any possible risks with you before treatment starts. If you intend breast-feeding a baby after having thiopental injection you should discuss the safety of doing so with your doctor.
- You may not be fit to drive (or operate other machinery) after receiving thiopental injection. Although this effect will wear off quite quickly, you must be certain that you are able to drive safely before you try. During this time, even a small amount of alcohol can have a very strong effect on you, making driving very dangerous. Other medicines that cause drowsiness can have a similar effect. Make sure

THIOPENTAL INJECTION BP

PRECAUTIONS (Contd.)

- Other medicines which can interact with thiopental injection include medicines called beta-blockers or calcium antagonists which are used to decrease your blood pressure, or any medicines prescribed to you for anxiety, or which are used to alter your mood (called antipsychotics).

If you are in doubt about the kind of medicine you are taking please contact your doctor or pharmacist.

Reduced doses may be needed if you have any of the following:

- Liver disease (including jaundice), shock, dehydration, severe anaemia, high blood level of potassium, infection in your blood. Elderly patients and people who suffer from metabolic disorders may also need smaller doses. An example of this type of disease is myxoedema (a condition caused by an underactive thyroid gland).
- People who have received morphine or similar medicines before they are given thiopental injection often need lower doses. If you have received a medicine called sulfafurazole please tell your doctor. He or she may need to give you smaller doses of thiopental and give these more frequently than usual.

Increased doses: if you are a heavy and frequent drinker of alcohol, or if you regularly take non-prescribed drugs, the dose of thiopental may need to be increased or given with another medicine to increase its effect.

You should tell your doctor, nurse or pharmacist if any of these apply to you.

HOW IS THIOPENTAL GIVEN?

Thiopental injection is first made into a solution usually containing 25mg in 1ml. Sometimes a higher strength may be used.

A needle will have been placed into a vein in advance. Thiopental injection can be injected directly through this needle or it may be put into a drip which runs through it.

Dosages used for convulsions (fitting) are 75mg to 125mg given as soon as possible after the convulsion begins. Further doses may be required and your doctor will decide the best dose to give you.

The normal anaesthetic dose for adults is 100mg to 150mg, injected over 10 to 15 seconds, although smaller doses may be used for elderly patients. The dose for a child depends on their weight (usually between 2mg to 7mg for every kg of body-weight). You will normally feel the effects within 30 seconds and be asleep within one minute. Further small doses will be given to you as necessary (you will normally be asleep during this process).

ARE THERE ANY SIDE EFFECTS?

The effects which have been seen with thiopental injection are listed below.

Thiopental injection can cause coughing, sneezing or spasm of the airways in your throat when it is injected. It can cause skin rashes and other allergic reactions, such as itching.

Your body's automatic breathing control may be affected causing spasm of the airways and difficulty breathing, and the pumping action of the heart can be reduced or irregular heartbeats may occur.

Thiopental injection can cause headaches.

When injected thiopental can cause severe pain at the site of injection. If this happens inform your doctor immediately.

If you experience any of the above side effects or any other side effects please tell your doctor, nurse or pharmacist.

MORE INFORMATION ABOUT THIOPENTAL INJECTION

Do not use thiopental after the expiry date printed on the pack and on each vial. The vials should not be stored above 25°C and should be kept in the outer carton.

The injection solution is quite strongly alkaline, to stop the thiopental from "going off". Because of this it cannot be mixed with other injections that are acidic. The solution should be kept cool (between 2°C and 8°C) after making it up and normally should be used within seven hours. If the solution is discoloured it should not be used.

This leaflet was written in September 2003.

Drug Enforcement Administration
Practitioner's Manual

OMB Approval No. 1117-0007	U.S. Department of Justice / Drug Enforcement Administration REGISTRANTS INVENTORY OF DRUGS SURRENDERED	PACKAGE NO. N/A
-------------------------------	---	--------------------

The following schedule is an inventory of controlled substances which for proper disposition.

FROM: (include Name, Street, City, State and ZIP Code in space provided below.)

*San Quentin State Prison
Lethal Injection Facility
San Quentin, CA
94964*

Registrant's DEA Number

Registrant's Telephone Number
415-455-5000

NOTE: CERTIFIED MAIL (Return Receipt Requested) IS REQUIRED FOR SHIPMENTS OF DRUGS VIA U.S. POSTAL SERVICE. See instructions on reverse (page 2) of form.

NAME OF DRUG OR PREPARATION <i>Registrants will fill in Columns 1, 2, 3, and 4 ONLY.</i>	Number of Containers	CONTENTS (Number of grams, bottles, ampules or other units per container)	Controlled Substance Cont. (Each Unit)	FOR DEA USE ONLY		
				DISPOSITION	QUANTITY	
					GMS.	MGS.
1	2	3	4	5	6	7
2 Sodium Thiopental	997	498.5	500 mg			
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

Nothing Follows

*Exp 05 2014
Lot # AW 6022
Total grams 498.5g*

FORM DEA-41 (5-01)

Previous edition dated 6-86 is usable.

See instructions on reverse (page 2) of form.

Drug Enforcement Administration Practitioner's Manual

DEA-41 (6/7/96) Pg. 2

NAME OF DRUG OR PREPARATION <small>Registrants will fill in Columns 1, 2, 3, and 4 ONLY.</small>	Number of Con- tainers	CONTENTS (Number of pills, tablets, capsules or other units per container)	Controlled Sub- stances Con- tained (Each Unit)	FOR DEA USE ONLY		
				DISPOSITION	QUANTITY	
					GMS.	MGS.
1	2	3	4	5	6	7
17						
18						
19						
20						
21						
22						
23						
24						

The controlled substances surrendered in accordance with Title 21 of the Code of Federal Regulations, Section 1307.21, have been received in _____ packages purporting to contain the drugs listed on the inventory and have been: (1) Forwarded tape-sealed without opening; (2) Destroyed as indicated and the remainder forwarded tape-sealed after verifying contents; (3) Forwarded tape-sealed after verifying contents.

DATE 5/5/2014

DESTROYED BY

** Strike out lines not applicable.

WITNESSED BY

INSTRUCTIONS

1. Fill in the name of the drug in column 1, the number of containers in column 2, the date of each container in column 3, and in column 4 the controlled substance content of each unit described in column 3; e.g., morphine sulfate tabs., 3 pills., 100 tabs., 1/4 gr. (16 mg.) or morphine sulfate tabs., 1 pill., 63 tabs., 1/2 gr. (32mg.), etc.
2. All packages included on a single line should be identical in name, content and controlled substance strength.
3. Prepare this form in quadruplicate. Mail one (1) copy of this form to the Special Agent in Charge, under separate cover. Enclose one additional copy in the shipment with the drugs. Retain one copy for your records. One copy will be returned to you as a receipt. No further receipt will be furnished to you unless specifically requested. Any further inquiries concerning these drugs should be addressed to the DEA District Office which serves your area.
4. There is no provision for payment for drugs surrendered. This is merely a service rendered to registrants enabling them to clear their stocks and records of surrendered items.
5. Drugs should be shipped tape-sealed via prepaid express or certified mail (return receipt requested) to Special Agent in Charge, Drug Enforcement Administration, of the DEA District Office which serves your area.

PRIVACY ACT INFORMATION

AUTHORITY: Section 307 of the Controlled Substances Act of 1970 (PL 91-513).
PURPOSE: To document the surrender of controlled substances which have been forwarded by registrants to DEA for disposal.
ROUTINE USES: This form is required by Federal Regulations for the surrender of unwanted Controlled Substances. Disclosures of information from this system are made to the following categories of users for the purposes stated:
 A. Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.
 B. State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.
EFFECT: Failure to document the surrender of unwanted Controlled Substances may result in prosecution for violation of the Controlled Substances Act.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Drug Enforcement Administration, FOI and Records Management Section, Washington, D.C. 20537, and to the Office of Management and Budget, Paperwork Reduction Project no. 1117-0007, Washington, D.C. 20503.

INVENTORY OF SODIUM THIOFENTAL

DATE	TIME	# OF CONTAINERS	# OF GRAMS, OUNCES OR UNITS	CONTENT OF EACH UNIT	LOT NUMBER	SIGNATURE	SIGNATURE
5/5/14	0815	Box #3	22 VIALS	500mg	AW6022		
		Box #4	25 VIALS	500mg	AW6002		
		Box #5	25 VIALS	500mg	AW6002		
		Box #6	25 VIALS	500mg	AW6002		
		Box #7	25 VIALS	500mg	AW6002		
		Box #8	25 VIALS	500mg	AW6002		
		Box #9	25 VIALS	500mg	AW6002		
		Box #10	25 VIALS	500mg	AW6002		
		Box #11	25 VIALS	500mg	AW6002		
		Box #12	25 VIALS	500mg	AW6002		
		Box #13	25 VIALS	500mg	AW6002		
		Box #14	25 VIALS	500mg	AW6002		
		Box #15	25 VIALS	500mg	AW6002		
		Box #16	25 VIALS	500mg	AW6002		
		Box #17	25 VIALS	500mg	AW6002		
		Box #18	25 VIALS	500mg	AW6002		
		Box #19	25 VIALS	500mg	AW6002		
		Box #20	25 VIALS	500mg	AW6002		
		Box #21	25 VIALS	500mg	AW6002		
		Box #22	25 VIALS	500mg	AW6002		
		Box #23	25 VIALS	500mg	AW6002		
		Box #24	25 VIALS	500mg	AW6002		
		Box #25	25 VIALS	500mg	AW6002		
		Box #26	25 VIALS	500mg	AW6002		
		Box #27	25 VIALS	500mg	AW6002		
		Box #28	25 VIALS	500mg	AW6002		
		Box #29	25 VIALS	500mg	AW6002		
		Box #30	25 VIALS	500mg	AW6002		
		Box #31	25 VIALS	500mg	AW6002		

All records related to controlled substances must be maintained and available for inspection for a minimum of two years. After an initial inventory is taken, a new inventory of all controlled substances on hand must be taken at least every two years. (Drug Enforcement Administrations Practitioner's Manual; Section IV; Recordkeeping Requirements; Inventory: page 16.)

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IN CASE OF EMERGENCY CONTACT: CHEMTREC 1-800-424-9300

MEDICAL WASTE TRACKING FORM NUMBER

STANDARD MANIFEST 001-10-06-STD

Route # 161 - 0

CUSTOMER NO. 21132 21132

MDSN010RM1.

1. Generator's Name, Address and Telephone Number			
ATTN: [REDACTED] CA ST PRISON SAN QUENTIN (SQ) 1 MAIN ST SAN QUENTIN, CA 94964-1000			
KRB TB-Bio H-Incineration Kx-Incineration TP-Path: TY-Chemo SR-14, 22, 24-Chemo SH-02, 06, 11-4 1415 454-1480 5/6/92			
CUSTOMER NUMBER 6111048-015		GENERATOR'S REGISTRATION #	
2A. DESCRIPTION OF WASTE	2B. CONTAINER TYPE	2C. NO. OF CONTAINERS	2D. VOLUME
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII	TR14 TP14 TR14 TY14 44 Gal Tub (5.5 cu ft)		Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII	TR21 TP15 TY15 1.20 Gal Tub (2.7 cu ft)		Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII	TR49 TY49 TR49 TP49 37 Gal Tub (4.9 cu ft)	1	4.9 Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII	KRB - Biosystems Cardboard Box (4.2 CUFT)		Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII		2	6 Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII	R433 25 GAL SHARP CONT 3.3 CUFT	1	3.3 Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII			Cu
UN3291, Regulated Medical Waste, n.o.s., 6.2, PGII	12 GAL OF SHARPS SHARP CONT. 1.5 CU FT		Cu
3. Generator's Certification: "I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations."		TOTALS	11 51.7 Cu
X Printed/Typed Name		Signature	Date
4. TRANSPORTER 1 ADDRESS: Stericycle, Inc. 30542 San Antonio Street Hayward, CA 94544		Phone # (866) 783-7422 Applicable Permit Numbers:	
TRANSPORTER CERTIFICATION: Receipt of medical waste as described above.		This is a Through Shipment Hauler Reg# 3400	
Print/Type Name		Signature	Date
5. INTERMEDIATE HANDLER 2 / TRANSPORTER 2 ADDRESS:		Phone # Applicable Permit Numbers:	
INTERMEDIATE HANDLER / TRANSPORTER CERTIFICATION: Receipt of medical waste as described above.			
Print/Type Name		Signature	Date
6. INTERMEDIATE HANDLER 3 / TRANSPORTER 3 ADDRESS:		Phone # Applicable Permit Numbers:	
INTERMEDIATE HANDLER / TRANSPORTER CERTIFICATION: Receipt of medical waste as described above.			
Print/Type Name		Signature	Date
7. DISCREPANCY INDICATION			
<input type="checkbox"/> 8A. Designated Facility: Stericycle, Inc. 1551 Shelton Drive Hickman, CA 95322 (555) 783-7422 TS/OST-63			
<input type="checkbox"/> 8B. Alternate Facility: Stericycle, Inc. 3140 N 7th Street Kansas City, KS 66115 (816) 321-1534 H1564			
<input type="checkbox"/> 8C. Alternate Facility: Stericycle, Inc. 4126 W. Swift Ave Fresno, CA 93722 (555) 783-7422 TS/OST-22			
<input type="checkbox"/> 8D. Alternate Facility: Stericycle, Inc. 90 N. Foxboro Drive North Salt Lake, UT 84403 (866) 783-7422 3A-448-JA-35			
TREATMENT FACILITY: I certify that I have been authorized by the applicable state agency to accept untreated medical wastes and that I have:			

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Generator Signature
Transporter Certification: [REDACTED]

[REDACTED]
Transporter Signature

(X) THIS IS A THROUGH SHIPMENT.

(X) LOCAL TRANS. CENTER
Stericycle-Hayward, CA

DESTINATION FACILITY:

Incinerate Only
X Stericycle-Kansas City, KS
W1564
Dental Waste
Stericycle-Fresno, CA

Pharmaceutical
X Stericycle-North Salt Lake, UT
3A-440/JA-36
Standard
X Stericycle-Hollister, CA

DATE OF RECEIPT: [REDACTED]

TREATMENT FACILITY: [REDACTED]

DELIVERY DOCUMENT #: POSN0000HL

TOTAL DELIVERED ITEMS: 7

ITEM	QTY
TB14 44 Gal Tub(Bin), CT 12-7 1b	7

DRIVER: [REDACTED]

FREQUENCY: Weekly

NEXT PICKUP: 5-12-14

CUSTOMER SERVICE:

Thank you for choosing Stericycle

HAZARDOUS MATERIAL SHIPPING DOCUMENT

TRANSPORTER: Stericycle, Inc.
30542 San Antonio Street
Hayward, CA 94544
(866) 783-7422

For Stericycle Customer Care
Call 1-866-783-7422
Stericycle Customer # 6111048
Site # 015

CA St Prison San Quentin (SQ)
1 Main St
San Quentin, CA 949641000
REGULATORY #:
Phone #: (415) 454-1450
Contact: [REDACTED]

SERVICE DATE: 5-5-14 8:34:43 AM

SHIPPING DOCUMENT #: H03H0008H



UN3291, REGULATED MEDICAL WASTE, W.O.S.,
6.2, PC11

For DOT HAZMAT Emergency Response Call:
CHEMTREC 1-800-424-9300

Customer No. 21132

TOTAL CONTAINERS COLLECTED: 12

TOTAL VOLUME COLLECTED: 51.700 CU FT

SUMMARY (Cont. Type)	QTY	UOL CF
RX03 3 Gal (Pharm)	2	0.600
RX12 12 Gal (Pharm)	1	1.600
RX33 25 Gal (Pharm)	1	3.300
TB14 44 Gal Tub (Bio), CT 12-7	7	41.300
TV49 37 Gal Chemo Tub (CT)	1	4.900

00A000H RX03 00A000V RX03 00A000X RX12
00A000P RX33 00A0010 TB14 00A000P TB14
00A0000 TB14 00A000R TB14 00A000S TB14
00A000T TB14 00A000U TB14 00A0000 TV49

I hereby declare that the contents of this
consignment are fully and accurately
described above by the proper shipping
name, and are classified, packaged, marked
and labelled/placarded, and are in all
respects in proper condition for transport
according to applicable international and
national governmental regulations.

GENERATOR PRINT NAME