

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

In the Matter of the Application of  
Daniel Armaugh Butts ) Case 122195  
for Writ of Habeas Corpus )  
Plaintiff, )  
vs. ) PETITION FOR WRIT OF HABEAS  
Jeff Dickerson, Columbia County Sheriff; ) CORPUS (Conditions of Confinement)  
Andy Moyer, Columbia County )  
Undersheriff and Jail Commander )  
Defendants. )

Jeff Dickerson is the duly appointed, qualified and acting Sheriff of Columbia County, Oregon. The Columbia County Jail is operated and maintained by the Columbia County Sheriff's Office.

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3 Andy Moyer is the duly appointed, qualified and acting Undersheriff and Jail  
Commander of the Columbia County Jail, Columbia County, Oregon.

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6 Plaintiff is currently an inmate in the Columbia County Sheriff's Office jail in St.  
7 Helens, Columbia County, Oregon. A copy of the OJIN printout regarding plaintiff's  
8 original arrest and imprisonment date is attached as Exhibit A.

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11 Under Article 1, section 13 and section 16 of the Oregon Constitution and the Eighth  
12 Amendment of the United States Constitution, Plaintiff is deprived of a constitutional  
13 right that requires immediate judicial attention and for which no other timely remedy is  
14 available to plaintiff.

15 a.) On or about February 9, 2011, forensic and clinical neuropsychologist, Craig  
16 Beavers, PhD, diagnosed Plaintiff as suffering from a psychotic disorder, "most  
17 likely, schizophrenia or schizoaffective disorder."

18 b.) On or about November 14, 2011, forensic and clinical psychiatrist, Jerry Larsen,  
19 M.D., diagnosed Plaintiff "with reasonable medical certainty, Daniel Butts suffers  
20 from a serious mental illness, psychotic in nature, likely schizophrenic in type."

21 c.) On or about January 4, 2012, Plaintiff, while in the custody and care of the  
22 Columbia County Sheriff's Office, stabbed himself in the left temple and cut his

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throat with one or more pencils. Jail staff responded to plaintiff's cell where they observed plaintiff standing near his toilet and plaintiff appeared to be striking himself in the head, neck and face. Deputies ordered him to stop. Deputies entered the cell and plaintiff "immediately ran and slid under his bunk." When plaintiff did not come out from under the bunk he was tasered. During the next several minutes, plaintiff was tasered at least four more times. Deputies were able to gain control of plaintiff and they strapped him in a restraint chair and placed a spit mask on his head. Plaintiff was restrained in the chair for over four hours. Deputies photographed the injuries and plaintiff in the restraint chair. The photos depict face and neck injuries indicating full thickness lacerations and puncture sites appearing several millimeters thick with moderate bleeding.

**EXHIBIT B.**

- d.) On or about January 18, 2012, Jerry Larsen, M.D. wrote an updated report regarding plaintiff and opined that "Daniel Butts should be administered a therapeutic dose of an atypical antipsychotic such as Risperdal 4 to 8 mg daily."
- e.) On February 2, 2012, Columbia County Circuit Court Judge, Ted E. Grove, issued an order stating, in part, "The Court does not understand why Defendant is not being provided the anti-psychotic medication prescribed by Dr. Larsen. I have not been advised as to any harmful effects of such a treatment and would

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1 therefore order that such medication be provided to Defendant [Plaintiff] if  
2 requested by him or his counsel."

3 f.) Plaintiff's counsel contacted CCSO jail medical staff and requested that plaintiff  
4 receive the anti-psychotic medication. Counsel was informed by CCSO jail  
5 medical personnel, Nurse Jennifer, that the prescription should be faxed directly  
6 to her at 503.366.4634.

7 g.) On or about February 29, 2012, Jerry Larsen, M.D., sent a fax to the Columbia  
8 County Jail medical department, "Nurse Jennifer", for two separate prescriptions  
9 for the antipsychotic drug, Risperdal, for Plaintiff. EXHIBIT C.

10 h.) On or about, March 1, 2012, Plaintiff began banging his head against his cell wall  
11 and causing injuries to his left temple area; re-injuring the area he had previously  
12 injured by stabbing himself in the temple with a pencil.

13 i.) On or about, March 7, 2012, plaintiff's counsel met with jail nursing staff and  
14 confirmed that CCSO had received the prescription orders however, plaintiff was  
15 not receiving his medications because CCSO determined the medications were  
16 "expensive" and there was no guarantee that he would "take them" and the jail  
17 medical staff could not and would not attempt to force medicate plaintiff.

18 j.) On or about March 7, 2012 is also when jail nursing staff informed plaintiff's  
19 counsel that plaintiff had been banging his head against the wall and had  
20 reopened the left temple wound. Other inmates had complained about the

1 sounds plaintiff was making when he was banging his head against the wall.

2 Nursing staff observed the impact wounds. Nursing staff had mixed success in  
3 trying to put ointment on the wounds or administer anti-biotic for the resulting  
4 infection. Nurse Jennifer also opined that they would not take plaintiff to a  
5 hospital because he would just refuse treatment there as well.

6 k.) On March 23, 2012, plaintiff was transferred to the Multnomah County Detention  
7 Center (MCDC), in-part, based upon request of plaintiff's counsel because of the  
8 more equipped medical unit at MCDC. During the intake process, jail medical  
9 staff alerted MCDC jail administration that plaintiff's head injuries were serious  
10 and infected. MCDC contacted the Columbia County Sheriff's Office (CCSO) and  
11 informed the CCSO that because of the infected head wounds, CCSO would  
12 need to return to MCDC and retrieve the plaintiff. It is the understanding of  
13 counsel that Plaintiff was returned to the Columbia County jail.  
14

15 l.) A March 23, 2012, MCDC booking photo is attached as EXHIBIT D. Plaintiff's  
16 head wounds and associated infection are visible.

17 m.) Plaintiff has yet to receive his anti-psychotic drugs and to counsel's knowledge,  
18 the CCSO jail has never filled either prescription provided by Dr. Larsen.

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23 The legality of this claim has not been previously adjudged upon any Writ of  
24 Habeas Corpus.

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1 WHEREFORE, Plaintiff prays the court that a writ of habeas corpus be granted,  
2 directed to the defendant, commanding him to have the body of the plaintiff before Your  
3 Honors, or any one of you, at the time and place specified in the writ; to do and receive  
4 what shall then and there be considered by Your Honors, or any one of you, concerning  
5 the plaintiff, together with the time and cause of imprisonment, incarceration and  
6 restraint of the plaintiff, and the writ; and that the plaintiff may be provided immediate  
7 medical care for both his infected injuries and to receive his anti-psychotic medication.  
8 Plaintiff will suffer irreparable and immediate harm if his infected head wounds and lack  
9 of anti-psychotic medications are not addressed now.  
10

11 Dated this 26th day of March, 2012

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14   
15 Dianna J. Gentry, OSB No. 01258  
16 Attorney for Plaintiff  
503.629.2121

17 Authorities

18 ORS 34.310 to 34.730  
19 Bedell v. Schiedler, 307 Or 562 (1989)  
20 Billings v. Gates, 323 Or 167 (1996)  
21 Mueller v. Cupp, 45 Or App 495 (1980)  
22 Voth v. Maass, 120 Or App 574 (1993)  
23 Villarreal v. Thompson, 142 Or App 29 (1996)  
24 Keenan v. Maass, 149 Or App 576 (1997)  
25 Oregon Constitution, Art. 1 Secs. 13,16, and 23  
Constitution of the United States, 8th Amend.

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Case Register..... Columbia County Circuit Court Status Open  
 Case#..... 111002 Oregon State Of/Butts Daniel Armaugh  
 Offense Felony - Aggravated Murder - U/FEL \*

Case Filed Date..... 1/07/11 Starting Instrument.. Information  
 Case Started Date... 1/07/11 Originating From..... Original filing  
 1st Appearance Date. 1/07/11 Originating Agency... Columbia Co District A  
 Ready for Trial..... Originating Agency#..  
 First Setting Date.. Previous Court.....  
 Trial Scheduled Date Previous Court Case#.  
 Trial Start Date.... Previous Decision....  
 Length of Trial..... Master Case Number...  
 Disposition Date.... Relation to Master...  
 Final Order Date.... Termination Stage....  
 Reinstated Date..... Termination Type....  
 Citation in Lieu#... Judgment Type.....  
 District Attorney... 23195 Judgment Status.....  
 Booking#..... Judgment Volume/Page.

ROLE PLAINTIFF ATTORNEY  
 1 Plaintiff Oregon State Of Atchison R Stephen

ROLE DEFENDANT  
 1 Defendant..... Butts Daniel Armaugh Birth Dt.. 9/29/89  
 Sex..... Male Hght/Wght. 511 175  
 Drivers License..... BUTTS DALL 7 WA Hair..... Brown  
 Phone#..... (360) 673-2002 Eyes..... Hazel  
 Control#..... Race..... Caucasian  
 Address.....  
 215 TODD RD  
 KALAMA WA 98625  
 3 Crt Appntd..... Sweeney Patrick John Bar#..... 96120  
 5 Co-Counsel..... Gentry Dianna J Bar#..... 01258

CHARGING INSTRUMENT  
 Indictment Date..... 1/21/11  
 Status..... Date.....

Count..... 1  
 1 COL 163095 Aggravated Murder U/FEL  
 Status..... Active Date.....  
 Incident Date..... 1/05/11  
 Date Charged/Issued. Citation#.  
 Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
 Disposition..... Plate#....

Count..... 2  
 2 COL 163095 Aggravated Murder U/FEL  
 Status..... Active Date.....  
 Incident Date..... 1/05/11  
 Date Charged/Issued. Citation#.  
 Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
 Disposition..... Plate#....

EXHIBIT A  
 PAGE 105

Count..... 3  
3 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 4  
4 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 5  
5 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 6  
6 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 7  
7 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 8  
8 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 9  
9 COL 163095 Aggravated Murder U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.

Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 10  
10 COL 1614052A Attempted Aggrivated Murd U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 11  
11 COL 1614052A Attempted Aggrivated Murd U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 12  
12 COL 1614052A Attempted Aggrivated Murd U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 13  
13 COL 1614052A Attempted Aggrivated Murd U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 14  
14 COL 1614052A Attempted Aggrivated Murd U/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 15  
15 ORS 164415 Robbery-1 A/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 16

EXHIBIT A  
PAGE 3 OF 6

16 ORS 164415 Robbery-1 A/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 17  
17 ORS 164225 Burglary-1 A/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 18  
18 ORS 164225 Burglary-1 A/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 19  
19 ORS 164135 Unauth Use Vehicle C/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 20  
20 ORS 1614052D Attempt C/Fel A/MIS  
ORS 164135 Unauth Use Vehicle C/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 21  
21 ORS 163195 Recklessly Endanger Anoth A/MIS  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 22  
22 ORS 163195 Recklessly Endanger Anoth A/MIS  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.

EXHIBIT A  
PAGE 4 OF 6

Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 23  
23 ORS 163195 Recklessly Endanger Anoth A/MIS  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

Count..... 24  
24 ORS 164055 Theft-1 C/FEL  
Status..... Active Date.....  
Incident Date..... 1/05/11  
Date Charged/Issued. Citation#.  
Current Plea..... 2/08/12 Plea Entry Not Guilty Security..  
Disposition..... Plate#....

<u>ROLE</u>	<u>OTHER PEOPLE</u>	<u>ATTORNEY</u>
1 Victim	Painter Ralph	
2 Victim	Hoover Marvin	
3 Victim	Buchanan Charles	
4 Victim	Lamp Jerry	
5 Victim	Mccracken Jeff	
6 Victim	Jefferson Shellie	
7 Victim	Peterson Doris	
8 Judge	Judge Reed-Disqualified	
9 Payor	Laboe Barbara	
10 Impartial	Oregonian Publishing Company	Runkles-Pearson P K
11 Payor	Stoel Rives LLP	
12 Payor	Geistlinger Don	
13 Impartial	Dickey Carolyn	

<u>ENTER DT</u>	<u>FILE DT</u>	<u>EVENT/FILING/PROCEEDING</u>	<u>SCHD DT</u>	<u>TIME</u>	<u>ROOM</u>
1 1/07/11	1/07/11	Information			
		DAT 2 Atchison R Stephen			
		1/07/11 Signed			
		1/21/11 RP			
2 1/07/11	3/22/12	Other			
		to karli			
		cf			
3 1/07/11	1/07/11	Arraignment Scheduled	1/07/11	3:00 PM	202
4 1/07/11	1/07/11	Application			
5 1/07/11	1/07/11	Affidavit of Indigency			
6 1/07/11	1/07/11	Notice Advise Appeal Rights			
		DEF 1 Butts Daniel Armaugh			
7 1/07/11	1/07/11	Release			
		Obtain financial information			
		for verification			
		DEF 1 Butts Daniel Armaugh			
8 1/07/11	1/07/11	Affidavit of Probable Cause	DAT 2 Atchison R Stephen		
9 1/07/11	1/07/11	Order Probable Cause			
		Exists			
		No Bail Hold			

EXHIBIT A  
PAGE 5 OF 5



EXHIBIT 8  
PAGE 1 OF 2



EXHIBIT 8  
PAGE 2 OF 2

WILLAMETTE VALLEY FAMILY CENTER, LLC  
JERRY K. LARSEN, M.D.  
PSYCHIATRIST  
610 JEFFERSON STREET  
OREGON CITY, OR 97045  
(503) 657-7295 TEL  
(503) 657-7076 FAX

NAME Janice Kates AGE 11  
ADDRESS 610 Jefferson DATE 3/2/12

REILLEGAL IF NOT SAFETY BLUE BACKGROUND

**R** If ever needs refilled

Suspended Consta 25mg

IM - 9 weeks

# SIC

Refill 10 times

(Signature)

To ensure brand name dispensing, prescriber must write "No Substitution" or "NS" on the prescription.

GLPS0082005

WILLAMETTE VALLEY FAMILY CENTER, LLC

JERRY K. LARSEN, M.D.  
PSYCHIATRIST  
610 JEFFERSON STREET  
OREGON CITY, OR 97045  
DEA #

(503) 657-7295 TEL

(503) 657-7076 FAX

NAME Janice Kates AGE 11

ADDRESS 610 Jefferson DATE 3/2/12

REILLEGAL IF NOT SAFETY BLUE BACKGROUND

**R** Resenthaling CMC

2mg bid x 14 days  
if no significant improvement  
increase to 4mg bid

150 mg BID

2 mg/CC

Refill 10 times

(Signature)

To ensure brand name dispensing, prescriber must write "No Substitution" or "NS" on the prescription.

GLPS0082005

EXHIBIT

C  
PAGE 1 OF 1

**Multnomah County Sheriff's Office**

---

**BUTTS, DANIEL ARMAUGH**

MCL #: MCL1217236

Charge: 001.200 - COUNTY HOLD

DATE: 3/23/2012

Birth Date: 9/22/1989

Sex: M

Race: W

Height: 71

NOT TO BE USED  
FOR  
IDENTIFICATION  
PURPOSES

Weight: 175



3/23/2012

EXHIBIT D

PAGE 1 OF 1

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

In the Matter of the Application of )  
Daniel Armaugh Butts ) Case  
for Writ of Habeas Corpus )  
Plaintiff, )  
vs. ) REPLICATION OF PLAINTIFF DANIEL  
Jeff Dickerson, Columbia County Sheriff; )  
Andy Moyer, Columbia County )  
Undersheriff and Jail Commander )  
Defendants. )

Jeff Dickerson is the duly appointed, qualified and acting Sheriff of Columbia County, Oregon. The Columbia County Jail is operated and maintained by the Columbia County Sheriff's Office.

Page 1 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS

Dianna J. Gentry, LLC  
1906 S.W. Madison Street  
Portland, OR 97205  
Telephone: 503.629.2121 Facsimile 503.221.1908

2.

Andy Moyer is the duly appointed, qualified and acting Undersheriff and Jail Commander of the Columbia County Jail, Columbia County, Oregon.

3.

Plaintiff is currently an inmate in the Columbia County Sheriff's Office Jail in St. Helens, Columbia County, Oregon.

4

Under Article 1, section 13 and section 16 of the Oregon Constitution and the Eighth Amendment of the United States Constitution, Plaintiff is deprived of a constitutional right that requires immediate judicial attention and for which no other timely remedy is available to plaintiff.

5

Plaintiff suffers from a serious medical condition that left untreated will have a serious significant adverse effect on Plaintiff's daily living activities, resulting in substantial and recurring pain or discomfort or would create a significant risk of permanent disability or death.

Plaintiff states the following facts in support of his claim:

a.) On February 4, 2011, Jerry Larsen, M.D., and Associate Clinical Professor of

Psychiatry, Rtd, wrote a letter to Nancy Spencer, NP, Columbia County Jail

indicating that based on multiple reports, Daniel Butts symptoms were consistent

Page 2 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS

Dianna J. Gentry, LLC

1906 S.W. Madison Street

Portland, OR 97205

Telephone: 503.629.2121 Facsimile 503.221.1908

1 with a psychotic disorder. Dr. Larsen recommended administering Risperdal  
2 (Risperidone) starting with 2mg twice daily. If there was no improvement in  
3 manner or demeanor then an increase in dosage to 3mg twice daily was  
4 recommended.

5 b.) On or about February 8, 2011, Daniel Butts was "escorted into the [jail] medical  
6 office in hand/foot restraints, in jail dress, accompanied by three officers. A  
7 confidential medical exam room was provided for the interview and the 3 officers  
8 remained in the room." During the course of the interview Daniel Butts remained  
9 "completely mute." The person conducting the interview stated "there was no  
10 evidence found, upon observation, of any delusionary or psychotic processes.  
11 He did not appear to be responding to internal or external stimuli of a psychotic  
12 nature. He was attentive and alert when addressed. No evidence of delusions, or  
13 psychosis, mute, but cooperative behavior with flat affect. No medications at this  
14 time. Continue officer observations of behavior. Provided opportunity for further  
15 evaluation with this clinician if he desired in the future." [Name and title of  
16 clinician unreadable].

17 c.) On or about February 9, 2011, forensic and clinical neuropsychologist, Craig  
18 Beavers, PhD, diagnosed Plaintiff as suffering from a psychotic disorder, "most  
19 likely, schizophrenia or schizoaffective disorder." [EXHIBIT A – UNDER  
20 PROTECTIVE ORDER].

21 Page 3 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS  
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23  
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28 Dianna J. Gentry, LLC  
29 1906 S.W. Madison Street  
Portland, OR 97205  
Telephone: 503.629.2121 Facsimile 503.221.1908

1 d.) On or about November 14, 2011, forensic and clinical psychiatrist, Jerry Larsen,  
2 M.D., diagnosed Plaintiff "with reasonable medical certainty, Daniel Butts suffers  
3 from a serious mental illness, psychotic in nature, likely schizophrenic in  
4 type."Exhibit B – UNDER PROTECTIVE ORDER].

5 e.) On or about January 4, 2012, Plaintiff, while in the custody and care of the  
6 Columbia County Sheriff's Office, stabbed himself in the left temple and cut his  
7 throat with one or more pencils. Jail staff responded to plaintiff's cell where they  
8 observed plaintiff standing near his toilet and plaintiff appeared to be striking  
9 himself in the head, neck and face. Deputies ordered him to stop. Deputies  
10 entered the cell and plaintiff "immediately ran and slid under his bunk." When  
11 plaintiff did not come out from under the bunk he was tasered. During the next  
12 several minutes, plaintiff was tasered at least four more times. Plaintiff was  
13 moved to the "safety cell" where he began banging his head and face against the  
14 wall. Deputies entered the safety cell and were able to gain control of plaintiff  
15 and they strapped him in a restraint chair and placed a spit mask on his head.  
16 Plaintiff was restrained in the chair for over four hours. Deputies photographed  
17 the injuries and plaintiff in the restraint chair. The photos depict face and neck  
18 injuries indicating full thickness lacerations and puncture sites appearing several  
19 millimeters thick with moderate bleeding. A photo also shows what appears to be  
20 an impact wound to Plaintiff's right check. EXHIBIT C – PHOTOS OF  
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26 Page 4 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS  
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29 Dianna J. Gentry, LLC  
1906 S.W. Madison Street  
Portland, OR 97205  
Telephone: 503.629.2121 Facsimile 503.221.1908

1 PLAINTIFF.

2 f.) On or about January 18, 2012, Jerry Larsen, M.D. wrote an updated report  
3 regarding plaintiff and opined that "Daniel Butts should be administered a  
4 therapeutic dose of an atypical antipsychotic such as Risperdal 4 to 8 mg daily."

5 EXHIBIT D – UNDER PROTECTIVE ORDER.

6 g.) On February 2, 2012, Columbia County Circuit Court Judge, Ted E. Grove,  
7 issued an order stating, in part, "The Court does not understand why Defendant  
8 is not being provided the anti-psychotic medication prescribed by Dr. Larsen. I  
9 have not been advised as to any harmful effects of such a treatment and would  
10 therefore order that such medication be provided to Defendant [Plaintiff] if  
11 requested by him or his counsel."

12 h.) Attorney Patrick Sweeney contacted CCSO jail medical staff and requested that  
13 plaintiff receive the antipsychotic medication. Mr. Sweeney had a conversation  
14 with Nurse Jennifer Lafollette regarding giving Plaintiff the antipsychotic drugs.  
15 Nurse Lafollette stated that a prescription could be faxed directly to her and she  
16 provided the fax number 503.366.4634.

17 i.) On or about February 29, 2012, Jerry Larsen, M.D., sent a fax to the Columbia  
18 County Jail medical department, "Nurse Jennifer", for two separate prescriptions  
19 for the antipsychotic drug, Risperdal, for Plaintiff. EXHIBIT E.

20 j.) On or about, February 23, 2012, jail staff reported to medical staff that Daniel

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23 Page 5 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS  
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1 Butts had "a wound on left forehead temple are I/M has 1cm open area with scab  
2 hanging from area by small section of skin and serosanguinous discharge." Both  
3 edema and discharge indicated the wound was infected. Daniel Butts refused  
4 treatment stating, "God will heal me I'm a smart man."

5 k.) On or about February 24, 2012, Plaintiff refused antibiotic medication stating, "I'll  
6 heel myself with God."

7 l.) On February 27, 1012, nursing staff noted "extreme swelling to left temple;  
8 significant increase in swelling from 2/26/12 check. Left temple swelling from  
9 forehead to cheek bone, dime size head with black crusting. Pod mates reporting  
10 he is hitting head on cell wall at night." Plaintiff would not accept treatment that  
11 was offered and claimed, "it's fine."

12 m.) On February 28, 2012, Plaintiff would not allow LN to take temperature or  
13 visually inspect left temple area. "Left eye swollen." The inmate next to Daniel  
14 Butts cell told jail/medical staff that "they hear him hitting his head against  
15 something in his cell."

16 n.) On February 29, 2012, Daniel Butts was "escorted to Medical by Sgt. Cutright  
17 and 3 deputies to access abcess [sic] left upper temple area." Plaintiff ok'd  
18 treatment of the wounded area if he could hear some music. "Music per internet  
19 radio station obtained." Medical staff, "noted large red swollen area left upper  
20 temple area with purulent and serous exudates oozing from open area, area  
21

cleansed with wound cleaner & tx & bandaid applied. Noted left eye swollen also with small slit only for vision. I/M notified that he may have a possible staph infection that if untreated could cause blindness in left eye. Septicemia or infection to brain that possibly could be fatal & that we could start an oral ATB that would heal wound & we could start now. I/M refused.”

o.) On or about March 1, 2012, Plaintiff would not allow his temperature to be taken or the nurse look at his wound. Plaintiff stated, "No thanks, I'm fine." The nurse told Plaintiff that treatment would help with his pain, if he has pain, and prevent future issues such eye damage, facial nerve injury and ear damage. Plaintiff said, "no thanks, I'm fine" then went to "his prayer position."

p.) On or about, March 7, 2012, plaintiff's counsel met with jail nursing staff and confirmed that CCSO had received the prescription orders however, the prescription had not been filled and there had been no attempts to discuss the medication with Plaintiff. Additionally, the nurse opined that the medications were "expensive" and there was no guarantee that Plaintiff would "take them" and the jail medical staff could not and would not attempt to force medicate plaintiff.

q.) On or about March 7, 2012 is also when jail nursing staff informed plaintiff's counsel that plaintiff had been banging his head against the wall and had reopened the left temple wound. Other inmates had complained about the sounds plaintiff was making when he was banging his head against the wall.

Page 7 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS

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1 Nursing staff observed the impact wounds. Nursing staff had mixed success in  
2 trying to put ointment on the wounds or administer antibiotic for the resulting  
3 infection.

4 r.) On March 12, 2012, Nurse Lafollette added a "late entry for 3/9/12" to the jail  
5 medical progress notes. "I/M asked if MH medications had been discussed with  
6 I/M. I/M did not respond. [Nurse Lafollette] explained to I/M that Dr. Larsen is  
7 recommending risperidone to be started. I/M asked if that is something he would  
8 agree to. I/M did not respond. Deputy McDowall asked I/M to respond otherwise  
9 no response would be assumed a refusal. I/M continued to stare and not verbally  
10 respond."

11 s.) On or about March 12, 2012, Plaintiff was observed by jail staff as "bleeding from  
12 his head wound. Plaintiff was "secured by jail staff with handcuffs and ankle  
13 restraints." Nurse Lafollette observed Plaintiff while he was sitting in restraints on  
14 his bunk. The nurse asked to assess the wound and "I/M agreed" but "refused to  
15 allow cleansing of wound." A new open area one inch above the prior wound was  
16 observed. Both old and new wounds were described in nursing notes. Plaintiff  
17 "continued "to refuse." Jail staff escorted Butts to booking to monitor for "safety  
18 reasons." At booking Plaintiff "agreed to allow" Nurse Lafollette to clean and treat  
19 wounds. "Area surrounding wounds has significant edema area swollen along  
20 temple and 2cm into hairline." "Purulent drainage in wound." "1.5 cm tissue  
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26 Page 8 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS  
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1 growing out of wound, easily made to bleed." Both wounds were cleaned and  
2 covered. Plaintiff's temperature was 99.5 degrees. "Risk for injury R/T infection  
3 evidenced by [increased] temp., wound drainage, and inflammation."

4 t.) On or about March 13, 2012 Plaintiff's Counsel phoned jail medical and Nurse  
5 Lafollette answered the phone. Counsel asked the nurse if photos had been  
6 taken of Daniel Butts' head wounds. The nurse confirmed that the wounds had  
7 been photographed. Nurse Lafollette told Counsel that Plaintiff was refusing the  
8 antibiotics and would not let the nurse treat the wounds. Nurse Lafollette stated  
9 that there would be no point in taking Daniel Butts to the hospital because he  
10 could just refuse treatment there as well. Nurse Lafollette then asked Counsel,  
11 "what happened in court today?" Counsel informed the nurse that there had  
12 been a discussion about moving Daniel to a different jail with a more equipped  
13 medical unit and staff. Nurse Lafollette stated that "he can just refuse at another  
14 facility and they won't be able to do any more than we can." Counsel responded,  
15 "but he might respond differently in a different environment." Nurse Lafollette  
16 stated, "well it would be good to find out." Nurse Lafollette thanked Counsel for  
17 the information.

18 u.) On or about March 13, 2012 "I/M taken meds to cell but refused meds." "Multiple  
19 attempts to persuade I/M to take ABX was made by deputies and [Nurse  
20 Lafollette] to which all was "no" or "no thank you." Daniel Butts was videotaped.

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25 Page 9 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS  
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1 v.) On or about March 14, 2012, Plaintiff was "brought down to medical for  
2 evaluation of facial swelling." "He has increasing swelling to left forehead &  
3 brow." "He is minimally responding. Indicates he does not want area tended to.  
4 He has two abscesses developing next to each other firm to palpation. The  
5 lateral acscess has a large scablike lesion that is draining pus." Plaintiff was in  
6 corner of "safety cell and appeared to be praying." Medical encounter  
7 videotaped.

8 w.) On or about March 15, 2012, Nurse "saw I/M in safety cell." This "visit" was done  
9 through the pass through opening. Plaintiff was unresponsive.

10 x.) On or about March 16, 2012, "per video footage noted drainage from large  
11 infected sore on I/M head to be clear to white in appearance."

12 y.) On or about March 19, 2012, "I/M seen in safety cell. Sleeping on his back with  
13 head turned to right. Wound visible. Area still swollen – 2 in. x 1.5 in. in area with  
14 lower would crusted with dried blood. Upper wound crusted. I/M requested water  
15 when asked if he needed pain meds or would like to take antibiotics. 2 cups of  
16 water given. I/M shook head side to side when this LN asked to check vitals. I/M  
17 would not respond when asked to just check temp in order to see how his is  
18 doing."

19 z.) On or about March 20, 2012, Plaintiff was observed in safety cell. Plaintiff "shook  
20 head side to side in response to this LN's question if he'd like meds and how his  
21

is feeling. I/M/ motioned for drink. Water given."

aa.) On or about March 21, 2012, "Refused medication, when offered pain med & wound tx & to take temperature to check for infection. I/M jumped to his feet & faced wall with hands in prayer pose."

bb.) On March 23, 2012, plaintiff was transferred to the Multnomah County Detention Center (MCDC), in-part, based upon request of plaintiff's counsel because of the more equipped medical unit at MCDC.

cc.) On March 23, 2012, during the second step of the MCSO intake process, jail medical staff alerted MCDC jail administration that plaintiff's head injuries were serious and infected. Medical staff would not clear Plaintiff for acceptance into the jail until the medical issue was rectified, including the suggestion that Plaintiff needed a CatScan.

dd.) Plaintiff was transported to OHSU emergency room.

ee.) On March 23, 2012, at the OHSU emergency room the inpatient nurse noted that "pt going back to prison for medical care – refusing care at OHSU ED. MD's, charge nurse informed."

ff.) At 1623 hours on March 23, 2012, Plaintiff was returned to the Columbia County Jail and placed in the "safety cell." Earlier, at 1500 hours, CCS nursing staff notes indicate, "Psych NP Melanie phoned medical to obtain authorization to attempt to force treat I/M based on ED doctor's evaluation. [Nurse Lafollette]

1 attempted to locate county attorney to verify if our county would allow that or not.  
2 Spoke with Sheriff who was unable to locate counsel. I/M returned to CCJ before  
3 answer could be obtained. Wound is still significantly swollen over Rt temple  
4 area, not involving ocular area. Both open areas have what appears to be  
5 excessive granular tissue growing out of them. Both crusted with dark red dried  
6 blood."

7  
8 gg.) A March 23, 2012, MCDC booking photo shows Plaintiff's head wounds  
9 and associated infection. EXHIBIT F.

10 hh.) On or about March 26, 2012, "I/M seen through pass through but unwilling  
11 to comply. Deputies assisted for face to face. I/M shackled and sitting on bunk."  
12 Plaintiff's face described as "drawn and pale." The wound inflammation had gone  
13 down but "still significant." "Both wounds appear to have excess tissue growth  
14 with drainage from upper wound." Nurse opines that inmate continues to refuse  
15 treatment, "sitting very rigid with times of shaking." "Once out of cell I/M hit his  
16 wound and knocked the scab off of the lower would but refused to allow us to  
17 see the wound." Later that day, at 1615 hours Deputy Frasier informed medical  
18 that Plaintiff's "wounds weeping yellow, clear and bloody out of the top wound."  
19  
20 ii.) On or about March 27, 2012, "I/M seen in holding cell." No significant  
21 change in wounds.  
22  
23 jj.) On or about March 28, 2012 swelling from both wounds observed with

1 thick dark drainage present. One writer observed wounds appeared to be  
2 improving however, "I/M appears pale and loosing weight." Not accepting any  
3 treatment including offers of pain medication.

4 kk.) On or about March 30, 2012, nursing staff noted, "lower wound crusted  
5 with dark red upper wound has serosanguinous drainage trailing center of  
6 forehead." Plaintiff nonresponsive to offers of treatment. After being asked  
7 repeatedly and told that he must acknowledge requests to treat otherwise "it is  
8 assumed I/M does not understand. I/M stated loudly 'No, I refuse.'" Inflammation  
9 down but still significant over left temple.  
10  
11

12 II.) Plaintiff has a serious medical condition. The condition remains untreated.

13 Untreated infected head wounds have had and will continue to have a significant  
14 adverse effect on Plaintiff's daily living activities. It is reasonable to assume that  
15 there is significant pain and discomfort associated with the wounds. It is  
16 reasonable to assume, based on the evidence, that the head wounds, left  
17 untreated will create a significant risk of permanent disability or death.  
18

19 mm.) Plaintiff suffers from a serious mental illness. He has been diagnosed by  
20 Jerry Larson, a medical doctor, as suffering "from a serious mental illness,  
21 psychotic in nature, likely schizophrenic in type." Dr. Larsen has recommended  
22 antipsychotic medication for over a year. Dr. Larsen wrote two prescriptions for  
23 antipsychotic medication. Dr. Larsen states Daniel Butts has a serious medical  
24

1 need for the medication, and that if Daniel Butts does not receive the medication,  
2 with reasonable medical certainty, Daniel Butts' mental illness will worsen and  
3 become more resistant to effective treatment. EXHIBIT G – AFFIDAVIT OF  
4 MEDICAL DOCTOR JERRY LARSON.

5 nn.) Plaintiff has never received his antipsychotic drugs. Plaintiff has a serious  
6 medical mental health need that has been treated in a timely and proper manner.

7 oo.) Plaintiff is not receiving antibiotics for infected head wounds. Plaintiff has  
8 a serious infection that has not been treated in a timely and proper manner.

9 pp.) Columbia County Sheriff's officials have been deliberately indifferent to  
10 Daniel Butts' serious medical needs by failing to insure that Daniel Butts is  
11 administered the necessary medication. Defendant is deliberately indifferent  
12 because, in part, Defendant believes they are assisting in the prosecution of  
13 Daniel Butts; including their belief that they are helping to disprove any claim of  
14 mental incompetence. EXHIBIT H – Columbia County Sheriff's Office 2011  
15 Annual Report.

16 qq.) Defendant believes that Daniel Butts is "gaming the system with his often  
17 bizarre and self-destructive behavior." Defendant believes Plaintiff does not  
18 suffer from a mental illness and that what is going on is that the Plaintiff's  
19 attorneys are "building a case for insanity." Defendant opines to the media that  
20 "it's got to be a defense strategy. The big headache is not Butts, it's his

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25 Page 14 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS  
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1 attorneys." EXHIBIT I – South County Spotlight Newspaper Article, April 4, 2012.  
2

3 rr.) Inability to provide adequate medical treatment both for infection of head  
4 wounds and administration of antipsychotic medication is a failure by Defendant  
5 which significantly affects Daniel Butts daily living. Plaintiff will suffer irreparable  
6 and immediate harm if his infected head wounds and lack of antipsychotic  
7 medications are not addressed immediately.

8 5.

9 The legality of this claim has not been previously adjudged upon any Writ of  
10 Habeas Corpus.

11 WHEREFORE, Plaintiff prays for a judgment granting appropriate habeas corpus  
12 relief and that he may be provided immediate medical care for both his infected injuries  
13 and to receive his antipsychotic medication.

14 Dated this 5th day of April, 2012

15   
16 Dianna J. Gentry, OSB No. 01258  
17 Attorney for Plaintiff  
18 503.629.2121

19 Authorities

20 ORS 34.310 to 34.730  
21 Bedell v. Schiedler, 307 Or 562 (1989)  
22 Billings v. Gates, 323 Or 167 (1996)  
23 Mueller v. Cupp, 45 Or App 495 (1980)  
24 Voth v. Maass, 120 Or App 574 (1993)  
25 Villarreal v. Thompson, 142 Or App 29 (1996)  
Keenan v. Maass, 149 Or App 576 (1997)  
Oregon Constitution, Art. 1 Secs. 13,16, and 23  
Constitution of the United States, 8th Amend.

26 Page 15 – REPLICATION OF PLAINTIFF DANIEL ARMAUGH BUTTS

**Craig W. Beaver, Ph.D., ABPP - CN**  
Licensed Psychologist

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February 9, 2011

W. Keith Goody, Attorney at Law  
P.O. Box 23  
Cougar, WA 98616

RE: Preliminary Evaluation of Daniel Butts

Dear Mr. Goody,

On January 20, 2011 I had the opportunity to interview and observe Daniel Butts in the local county jail where he is currently being held. At that time, Mr. Butts was alert but restless and, at times, mildly agitated. During my interview he was able to follow the course of our conversation. However, he often was tangential or abruptly changed topics when responding to my questions.

During my interview, he described experiencing auditory hallucinations that were largely critical of him. Additionally, he expressed concern that his mind was racing and that he had too many thoughts in his brain. He expressed being overwhelmed with his current situation.

The auditory hallucinations and racing thoughts are described as being present for many months, well before the shooting incident in which he was arrested.

Mr. Butts also appeared unable to grasp the situation that he finds himself in legally. His odd and illogical thought processes seem to interfere with his full recognition of the difficult legal situation he is currently in.

Daniel Butts also discussed ideas of reference. He reports that, even before the shooting incident, people frequently talked about him. He describes being able to go into a room and hear all of the various conversations going on in the room at once. He describes those conversations as being about him. He also describes himself as having special powers. This includes being able to accurately predict other persons' behaviors and thoughts. He also believes that he can change some life events but was vague in this discussion.

On February 2, 2011 I had a phone interview with Della Bartley, Daniel's biological mother. She indicates that Daniel appeared to do okay with things until the last several months. She reports an abrupt change in his demeanor and interactions with others in the months immediately before the shooting incident. Ms. Bartley noted that Daniel Butts' older brothers have all been diagnosed as

RE: Preliminary Evaluation of Daniel Butts

February 9, 2011

Page 2

schizophrenic and/or bipolar. She describes the changes in Daniel as being very similar to how his older brothers changed with the onset of their psychiatric illness.

When I examined Daniel Butts, I also administered the MFAST. This is a structured interview designed to evaluate whether or not a defendant is exaggerating or malingering psychiatric symptoms. Daniel Butts had a low score on the MFAST. There was no evidence he was exaggerating or malingering his psychiatric issues.

Based upon my limited interview of Daniel Butts and the historical information about psychiatric difficulties in his family obtained from Della Bartley, it is my opinion that Daniel Butts has a severe mental illness - most likely, schizophrenia or schizoaffective disorder. I am very concerned that Daniel Butts is experiencing his first full psychotic episode related to this illness. Consequently, I have significant concerns about his ability to proceed at this point with his legal case and feel that he needs to be psychiatrically treated before he deteriorates further.

Sincerely,



Craig W. Beaver, Ph.D., ABPP  
Diplomate in Clinical Neuropsychology

CWB:mb

EXHIBIT A  
PAGE 2 OF 2



## WILLAMETTE VALLEY FAMILY CENTER, LLC

610 Jefferson Street • Oregon City, Oregon 97045

Phone: (503) 657-7235 • Fax: (503) 657-7676

JERRY K. LARSEN, MD

610 Jefferson Street

Oregon City, OR 97045

November 14, 2011

Patrick John Sweeney  
Attorney at Law  
4315 SE 30<sup>th</sup> Ave  
Portland, OR 97202  
Fax (503) 244-2084

Dianna J. Gentry  
Attorney at Law  
1906 SW Madison Ct  
Portland, OR 97205

Dear Mr. Sweeney;

At your kind request I have attempted to conduct four evaluations of Daniel Butts, in the Columbia County Detention Facility. In preparation for that evaluation, I reviewed records including, but not limited to:

- Allstar Staffing and Sunlight Supply, Inc. employment records signed by Daniel Butts on 10-18-10.
- CICS Criminal Check indicated Malicious Mischief in the 3<sup>rd</sup> Degree, dismissed 1-29-10, Reckless Driving 11-12-08 not guilty, DWLS amended to No Valid Operating License, committed, DUI amended to Negligent Driving 1<sup>st</sup> Degree Bail Forfeiture 12-28-06, Reckless Driving 12-26-06 dismissed. Federal Search, clear. Patriot Act Search, clear. Sex Offender Search, clear.
- Daniel Butts' OHSU pediatric medical records noting by Dr. Joseph Gilhooly, MD. Daniel Butts 34 weeks gestation age in the intermediate neonatal care nursery, a preterm infant who was drug exposed, has a history of bradycardial spells.
- St. John's Medical Center records, motor vehicle accident 9-20-08, indicating minor head injury with tinnitus, entered by Dr. Liberatore, MD.
- St. Helen's Police Department Special Report, interview Dr. Jeremy Hep, who interviews Daniel Butts' father, Michael Butts. Michael Butts indicated that his son had an IQ of 151, that he does smoke "weed", has been drinking alcohol and uses no other drugs, to his knowledge. He has seen "acting kind of off the wall", and acting "goofy", dated 1-5-11 at 1053.

- Interview of Della Bartley, Daniel's mother and Melissa Gavin, Daniel's maternal aunt, reported by Det. Aaron Jackson.
- Oregon State Police Incident Reports by Officer Sudalsar, including statements by Officer Doug Kazinski, Officer McQuiddy, and Officer Hoover.
- Special Report St. Helen's Police Department, by Det. Leonard Olson, including statements by Officer Kazinski and Officer Terry Reece.
- Cowlitz County Sheriff's Office Supplemental Report Narrative, Deputy Shelton.
- Statements Felicia Dunbar, Officer Huffine, Sergeant Joseph Reiss, Sergeant Cruser.
- Xerox Copies of Crime Photos
- St. Helen's Police Department Special Report, Det. Leonard Olson
- Oregon State Police Incident Report by Det. Aaron Jackson
- Det. Stump Interview and Report
- Oregon State Police Department Incident Report by Det. Rhoades
- Interview of Deputy Shelton
- Washington State Patrol Narrative Report
- Reports by Sergeant Smith, Trooper Street, Trooper Cassey, Trooper Wabel
- Synopsis of Events
- Trooper Chapman's Interview Transcribed of Andrew Martinson and Jerry Lamp
- Facebook entries Daniel Butts
- Portland Police Bureau Special Reports Officer Hunt Dated 1-5-11
- Reports by Officers Kent, Cas, and Helgin
- Special Report St. Helen's Police Department by Det. Castille JA
- Daniel Butts' School Records, noting 9th grade a lot of grades predominately As with an occasional B. 10<sup>th</sup> grade his performance decreases with an occasional A, Bs, Cs and Ds.
- Daniel Butts' Additional School Records, Loowit High School, Kelso, Washington, noting entered 9-4-01, withdrawn 11-1-07. Enterd by Debbie King, Secretary/Registrar.
- Columbia County Sheriff's Office Jail Records, several hundred pages
- Preliminary Evaluation of Daniel Butts, authored by Craig W. Beeber, Ph.D. dated 2-9-11. He administered an M-FAST stating there was no evidence of exaggerating or malingering his psychotic issues. Dr. Beeber opined that "Daniel Butts is experiencing his first full psychotic episode related to this illness. Consequently I have significant concerns about his ability to proceed at this point with his legal case and feel that he needs to be psychiatrically treated before he deteriorates further. Again dated 2-9-11 based on an evaluation on 1-20-11.
- Criminal Background LEDS of Daniel Butts, 24 Count Indictment alleging Aggravated Murder with a Firearm. Affadavit of Probable Cause for issuance of a search warrant by Det. Sundisar, Oregon State Police.
- Order for Aid and Assist evaluation Oregon State Hospital, dated 6-29-11 signed by Circuit Court Judge Ted Grove.

- Daniel Butts' video dated 1-5-11 by Patti Rhoades
- (Mikal) Butts' Interview by Hepp Haebe
- Daniel Butts' arraignment video KATU, dated 1-26-11
- Autopsy photos DVD, dated 8-31-11
- Digital crime scene photos DVD, Daniel Butts, dated 8-31-11
- Coroner's photos DVD, dated 8-27-11
- Hospital Staff chart notes, observations and notations from the some three week stay at the Oregon State Hospital ForensicUnit
- Additional sources of information—
  - Observation interaction between Mr. Butts and Attorney Gentry
  - Interview with Mr. Butts' mother, Della Bartley
  - Interview with Mr. Butts' father Mikel Butts
  - Interview of Daniel Butts' sister
  - Conversations with Columbia County Jail Staff and Medical Staff
  - Review of medical records, including those of Scott Reichlin, M.D. and Stephanie Lopez, M.D., and Genevieve Grady, PsyD at the Oregon State Hospital
  - Records St. John Medical Center
  - Records Dr. Johnson, Pediatric Unit, U of O Health Sciences Center
  - Recordings January 9, 2011
  - Order Aid and Assist February 11, 2011
  - Review of Indictment and Charges
  - St. Helen's Police Department Records, Detective Hepp
  - State Police Department Incident Reports, including Grand Jury Indictment
  - Probable Cause for Search Warrant
  - Statements by Officer Kazensky and Office Reece
  - Cowlitz County Sheriff's Office Reports
  - St. Helen's Police Department Continuation Reports
  - Reports from Deputy Stumph
  - Interview Statements Deputy Shelton
  - Review Investigation Washington State Patrol/Photographs Crime Scene, Chevrolet, Weapons
  - Facebook Activities
  - Portland Police Bureau Reports
  - Detective Castilleja Reports
  - School Records Kalama Middle, and High School
  - Loowit High School Records
  - Written Correspondence from Sergeant Cutright to Kathleen Forrest
  - Review of Butts' Arraignment
  - Review of Preliminary Evaluation, and Raw Test Data
  - Records Oregon Patient Resident Care System
  - Law Enforcement Data System
- A 36 page evaluation authored by Brooke Howard, Ph.D. Psychologist, Forensic Evaluation Services, Oregon State Hospital dated 8-29-11. Dr.

Howard offers a diagnosis of Axis I Methamphetamine abuse, in early full remission in a controlled environment; cannabis abuse, provisional, in early full remission in a controlled environment. Axis II is deferred. Axis III Bilateral lower leg adema, prior history, recent gunshot wound to lower back, with a Global Assessment GAF of 60. The doctor opines "Mr. Butts does not currently meet the diagnostic criteria for a mental illness or a cognitive disorder." Dr. Howard reports that a letter dated 2-9-11 from Dr. Beeber to attorney Mr. Goody that Mr. Butts generally was able to "follow the course of the conversation, but at times was tangential or abruptly changed topics". Mr. Butts described experiencing auditory hallucinations that were largely critical of him, that his mind was racing. He noted ideas of reference. Mr. Butts also reported he had special powers, being able to accurately predict other persons' behaviors and thoughts. The M-FAST was administered suggesting Mr. Butts was not over-reporting or feigning psychiatric symptoms. Dr. Beeber opined that Mr. Butts "has a severe mental illness, most likely schizophrenia or schizoaffective disorder". The doctor reported that OP\RCS as indicated Mr. Butts has not been involved in the outpatient or inpatient treatment services in Oregon. Della Bartley, Daniel Butts' mother, reports that her father was diagnosed with schizophrenia and her sons, Jacob Frye Joseph Butts, reportedly experienced psychotic episodes and had addictive personalities. Ms. Bartley was diagnosed with manic depression (bipolar disorder 1988). Mikel Butts (the biological father) physically abused Daniel Butts and psychically abused Ms. Bartley and the other son, Brian, in the past. He was reportedly court-ordered to participate in domestic violence classes. In the days leading to Mr. Butts' arrest, the family observed atypical behaviors characterized as he became withdrawn and depressed, he had difficulty obtaining employment and stating "Things were going right. The tempo was off." He needed a reminder to bathe. He would lie on the couch wide eyed for days, not responding well to others. He was noted to be laughing inappropriately and intermittently crying. He struck the family dog on the top of the head with a splitting maul. He reportedly was using drugs, methamphetamine. Ms. Butts describes her son, prior to the arrest as disoriented and "appeared to be under the influence (of drugs)". She reports an episode where he dropped his pants and masturbated in front of her. He appeared depressed, worried about financial and economic problems. He quit his job after being refused a raise, but tried to save money to purchase a motorcycle. He was seen on one occasion driving erratically. Mr. Fowler reported that he had been asking "goofy questions". After the alleged defense he had been shot, but reportedly articulately responded to questions. His responses were organized and focused. He engaged with officers and medics in a polite and respectful manner. In his hospitalization at Emanuel he was alert and responsive to questioning and to discussion. He was reportedly polite and cooperative. It appears that the day after the arraignment on January 27, 2011, he became noncompliant, was tasered. Although requesting meetings with his attorney, he declined. In February he wanted to be on a hunger strike protocol. With low blood sugar of 54 he was transported to

Good Samaritan Hospital and then transferred to Adventist Hospital. He was described as "pretending to be out of it". He was later noted to be cooperative, bathing, tending to his grooming. He was attentive, alert and engaged. He was later able to accurately, legibly write commissary slips, with itemized requests. He later refused to accept the commissary that he ordered. In March 2011 he often slid or kicked any mail that he received under his cell door, unopened. He occasionally refused meals. He was noted to be shadow boxing, naked. The doctor reports that upon admission he was at times compliant, but at other times, noncompliant. He would enter the shower and walk out nude. He stood on the sink. He threw items out of his room. He would stand for periods as if he were in prayer. At times he took correction and at other times, did not. Generally he was nude. He generally ate his meals. Mr. Butts did not participate in recommended psychological testing, nor did he participate in legal skills education. He remained nude, often seen with his hands as if he were in prayer. The doctor noted consistent behaviors of brushing his teeth and dressing himself without verbal direction. He spent most of his time alone in his room. He responded to verbal cues. He walked around with his eyes shut, occasionally bumping into items. She wrote "During the hospitalization Mr. Butts never showed any clear signs or symptoms of catatonia such as posturing, inflexibility or negativism. He never appeared to be attending to internal stimuli. He never displayed any symptoms of mania such as decreased need for sleep, hypersexuality or increase in goal-directed activity. He was found to have a slightly elevated blood lead level at 14...His critical presentation and mutism, hands in prayer and keeping his eyes closed" were noted. He was diagnosed with marijuana abuse, methamphetamine abuse, a deferred personality disorder. He received no psychotropic medications. Current mental functioning as reported by Dr. Howard was reviewed and the doctor opined that he did not suffer from a major mental disease or defect and that he was able to aid and assist in his own defense.

I have attempted to examine Daniel Butts on four occasions. I was escorted to his cell by uniformed officers. I again introduced myself through the opening in the door. Daniel Butts was lying prone on his bunk, obviously disheveled and unshaven, holding his hands over his eyes, remaining motionless and mute. After several attempts to engage him in a conversation, it became obvious that he would not cooperate. I left the cell and met his attorney, Diana Gentry, and the psychologist Dr. Guyton. We returned to the cell and I observed Diana Gentry attempting to interview Daniel Butts. He was again lying prone on his bunk, eyes closed, displaying no body movement. He did not respond in any fashion to his attorney's questions or statements. She eventually described the need to again meet privately to discuss legal issues, and again he did not respond in any fashion. I then observed Dr. Guyton attempting to interview and discuss issues and again he remained totally verbally unresponsive.

On 10-4-11 I conducted a lengthy interview with Della, Daniel Butts' mother, at her home in a rural area west of Rainier, Oregon. Della resides in a house without running

water, indoor toilet facility, with no apparent heat source. Upon arrival, her property was strewn with a variety of vehicles, including an apparent abandoned school bus covered dirt and green with algae. Opposite the bus was a fiberglass boat, inboard/outboard, which appeared to have not moved for perhaps years. It was dirty and covered with weeds. Further into the property were abandoned, rusted vehicles, abandoned dilapidated buildings and the property was strewn with discarded items of various types with no apparent value. As I approached the house there appears to be a turret type structure, dilapidated with fractured windows. Approaching the house you climb a slight inclined ramp to which are nailed occasional corrugated singles. Entering the home is a pathway passing a sofa covered with a 1940s bedspread. On the deck next to the glass entry door were containers of bottled water. In the home were two desks littered with books, papers and various articles. Della cleared one of the desks briefly where I conducted the interview while she stood through most of the questioning, chain smoking, pacing about the room. In the one room were books, magazines, a variety of articles piled floor to ceiling, leaving only a U-shaped path through the room, with articles piled such that it appeared one could not approach the kitchen sink or cooking facilities. Circling to one's right the path continues to a single chair where one might sit and watch a small colored television which remained functioning through part of the interview and was then turned off. Della was adequately dressed, somewhat disheveled on a very cold day. She described a difficult pregnancy with her son, Daniel, who was born premature at "four pounds six ounces". He remained in the hospital for some three weeks. He was born exposed in utero to marijuana. Della is unaware if he met expected developmental milestones, but describes her son as a "genius". In grade school he was an excellent student, passing from grade to grade. He fit well with his peers. He was never a behavioral problem and was never expelled nor suspended. She goes to great lengths describing her disappointment as he had a scholarship which he did not accept. She then digresses talking about her own health problems when she was struck in the side of the head and face with a large rock while employed by a construction company. She claims that she would not accept responsibility and rather than taking her to a hospital, they took her to the fire department. She was later taken to the hospital and says "You know I had my face cracked." She claims to have experienced a "post concussion syndrome for six years". She reported memory impairment, at times confusion, a loss of vision and continuing neck pain. She was rambling, tangential and displayed obvious rapid mood swings. In moments she would switch from conversant and attentive to depression near tears, to loud demanding in-your-face statements. She was frequently tangential; however, she could be redirected. She then stated that her son was always the center of attention. He was talkative. He had friends. He took pride in his grooming and his dress. She states that it all changed when he was perhaps 16 or 17. He became moody, and depressed. His grooming declined. He began wearing sloppy clothes. She describes him as "sloppy and not crisp". Two days before the shooting, Daniel Butts arrived unexpectedly at her home, unannounced. He was disheveled, poorly groomed and inappropriate. She describes his talk as paranoid and his behavior as bizarre. He walked into her bedroom without invitation, took his clothes off, laid down on the bed and began to as she put it "beat off", and said "Mom, you want some of this?" The words that she used to describe him during this period were depressed, rude, demanding and the behavior was totally out of character. She then digresses telling me about her son, Jacob,

Daniel's maternal half brother who was diagnosed with schizophrenia, experienced hallucinations, delusions, self neglect. He also was rude, paranoid and inappropriate. Her son Joseph also experienced depression, mood swings, paranoia and reportedly was placed in a group home while Jacob was confined to the Western States Psychiatric Hospital in Washington. Redirecting her to Daniel she me that in her opinion the two days before the shooting he was "crazy". He states "He was someone else." She states that later she called Daniel to see if he was okay, as he also apparently wanted money. She said "I called his father." Therefore, she is describing a young man who was, through much of his life, well groomed, bright, well dressed, liked by others, social, verbal and then she watched his deterioration over at least a two year period and describes depression, delusional thinking and bizarre behavior.

When I ask Della about her health she tells me she's been diagnosed with "bipolar, autistic, manic depressive, paranoid" and then when I ask her if she agrees she says "Well, I'm autistic you know. I'm not good at some stuff and I'm really good at other stuff." She was once treated with Risperadol, an atypical antipsychotic which she says "didn't help". She now self medicates with marijuana, which she smokes on a regular basis and she does have a marijuana card. She was at times very pressured telling another in the room to "Be quiet, don't interrupt" in a loud, demanding, directive manner. Built into the interview, I attempted a brief mental status examination. When I asked her the meaning of "a bird in the hand is worth two in a bush" she came immediately to the desk, leaned over and states "It's the burning bush and it's what God wroughts." She then became angry that I would ask her "adages". Interestingly, an adage is an often short, memorable saying that holds some important fact and held to be true by many people. Della is a highly religious individual who makes reference to the Bible and God and told me that we should not ask adages. We should let the person tell them the adage and the meaning. When I asked her to do so, she became more agitated and I changed the subject. Interestingly, she then wanted me to read a book which she handed to me. She, in a loud, long, torturous statement told me that her son was being neglected. He was not treated kindly, nor was he receiving appropriate care, and tells me it is illegal. She handed me a 1961 red-spine Oregon law book titled Negligence to Pleading. She firmly believed that the negligence in the title addresses the illegal treatment of her son, now in custody. She became increasingly demanding, upset and as examples stated that when she saw her son on Channel 8, they had "zapped him". She then rambled into a discussion about genealogy and how no one is attending to the genealogy of her son who has to be mentally ill. She goes on to state that she had six boys and then one girl, and says "Do you realize that the chances of, of having a girl after uh, after six boys is, is like one in a thousand?"

After the shooting Della told investigators that "He must be on drugs." She had no other explanation as to his bizarre, unexpected, uncharacteristic behavior. It must be noted that he was later tested for drugs with blood and urine, both of which proved negative. This is the only reference I find to possible methamphetamine, which again was not found in any of his bodily fluids.

I then interviewed his sister, Suzanne, in the town of Kalama. Suzanne reports that for many months, perhaps 18 months, her brother, with whom she was very close, had become increasingly moody. She describes mood swings, hopelessness, depression. She describes episodes where he would sit and stare. She also describes periods when he would lie on a couch, facing the back of the couch, with his eyes wide open for hours and hours. He was always helpful, helping Suzanne in any way. If she had a flat tire he would not assist her. When she had a school project, he begrudgingly helped. She describes the electronic display as haphazard, poorly constructed, contrary to Daniel's past history of being a perfectionist, being neat, being tidy and being exact. She describes not only depression but paranoia. He was distrustful of everyone. When she told him she loved him, he replied "No you don't." He confided in her his dreams which he had in the past, which in turn came true. He also believed he therefore could see into the future as his current dreams would foretell the future. She describes episodes when he would sit and out of the corner of his mouth, would mumble. He told her that he heard voices. She goes on to state that the entire family recognized that there was something wrong many, many months before the shooting. They encouraged him to get help. They wanted to take him to the mental health clinic, but then he briefly improved. He did not agree to attend a mental health clinic. He did confide in her that "something is wrong" holding his head.

I then interviewed his father, Mikal, in Kalama, Washington. He describes his son as smart, with an IQ of 151. He was verbal. He socially fit well with his peers. He was well dressed. He was well groomed. Six months before the shooting, he became increasingly depressed, isolate, sitting for long periods, staring. He had been extremely helpful with his father. He then refused to help in any way. He would sit on the couch and stare. Father describes a blank appearance and Daniel told his father "I need help." His father describes his son as being depressed, distrustful and highly paranoid. Mikal recognized that "He was not right." He also wanted Daniel to get help through the mental health clinic, but Daniel refused. He would sit there, stare for hours, and occasionally "spit on the floor". He was fearful. In the early days of the incarceration he visited his son. Since that time, his son will not see him and refuses to talk to him on the telephone. Mikal expresses concern that his son is being mistreated and "treated like he's guilty". Mikal describes episodes where he saw his son talking to himself and Mikal would have to direct him to "take a shower and change his clothes". He describes episodes where it appeared as though Daniel was talking to an imaginary person. Mikal believes that "He heard voices inside his own head." Daniel told him "Something's not right inside." He describes an episode when he heard the dog, Honey, howling. When he ran out to check on the dog, he found Daniel with a splitting mawl in his hand. He admitted to striking Honey in the head. Daniel said something to the effect that "She was looking at me." Again, the father describes depression, paranoid delusions, apparent auditory hallucinations with his son mumbling and talking to an imaginary person, sitting for long periods staring, not bathing, not attending to his basic hygiene. Mikal looked and me and said "Well, you know, I don't do much of that and it takes a lot for me to have to tell my son to go shower and change his clothes." Again, he told his father "I need help." Mikal describes him as being depressed and paranoid.

Psychosis in the medical nomenclature is a disorganization of thought containing delusions or hallucinations with the absence of insight into their pathological nature. Other symptoms included under this definition may include disorganized speech, grossly disorganized or catatonic behavior a disorder or impairment that grossly interferes with the capacity to meet ordinary demands of life.<sup>1</sup>

Schizophrenia is a psychotic disorder including symptoms of delusions, hallucinations, disorganized speech, grossly disorganized or catatonic behavior and negative symptoms such as affective flattening, coupled with significant decrease in social and occupational functioning where two of the above five symptoms have been present for one month or longer.<sup>2</sup>

Schizophrenia affects approximately one percent of the population with the first signs and symptoms occurring before the age of 25. They persist throughout life and affect persons of all social classes. In the United States, the National Institute of Mental Health reports a lifetime prevalence of .6 to 1.9%. It is equally prevalent in men and women with the onset earlier in men, often occurring in the late teens and early twenties. The onset of schizophrenia before the age of 10 and after the age 60 is extremely rare. Studies suggest that men are more likely to be impaired by negative symptoms, with the prevalence of schizophrenia higher in Northeastern and Western United States. Current studies suggest abnormalities in the frontal lobe, the amygdala, the hippocampus, parahippocampal gyrus and cerebellum. We know that there is a genetic predisposition to this illness with a much higher incidence in families where a first degree relative suffers from schizophrenia. The symptoms develop over time and as described are characterized by confusion, disorganized thinking, hallucinations, delusions, affectual flattening or inappropriate affect, negative symptoms, social isolation and a dramatic decline in an individual's ability to care for himself and participate in activities of daily living.<sup>3</sup>

Negative symptoms of schizophrenia include blunted affect, emotional withdrawal, poor rapport, passivity, social withdrawal, difficulty in abstract thinking, lack of spontaneity, stereotype thinking, alogia-restrictions in fluency and productivity of thoughts and speech, avolition: restrictions in initiation of goal directed behavior, and anhedonia; lack of pleasure and attentional impairment. Positive symptoms as previously described includes delusions, hallucinations, distortions in language and communication, disorganized speech, disorganized behavior, withdrawal, catatonic behavior and at times agitation.<sup>4</sup>

Therefore, it is evident that Daniel Butts for perhaps 18 months prior to the shooting displayed the signs and symptoms of depression, social isolation, withdrawal, paranoid delusions, auditory hallucinations, affectual inappropriateness, the near total uninvolvement with people and recreational

<sup>1</sup> DSM-IV TR Francis, MD, Pinkous, MD 1<sup>st</sup> MD page 297

<sup>2</sup> DSM-IV TR page 312

<sup>3</sup> Caplan and Saddock Synopsis of Psychiatry 9<sup>th</sup> Edition, 2003, Chapter 13, page 471-475

<sup>4</sup> Stultz Essential Pharmacology 3<sup>rd</sup> Edition, 2009, Chapter 9, pages 251-253

activities, signs and symptoms consistent with a psychotic disorder, likely schizophrenic in type. Daniel Butts has for many months spoken to no one. It is frankly, extremely unlikely that such an individual incarcerated for these many months, could successfully and continually feign such symptoms. The deterioration is clearly documented. The behavior has remained consistent during the incarceration and it is certainly not related to methamphetamine, for which there is no evidence of such use. Should Daniel Butts, or other individuals, develop a psychotic disorder secondary to methamphetamine abuse, when the substance is withdrawn the psychotic symptoms certainly would clear over a matter of days, or at the most weeks. That has not been true in this case. Therefore, it is extremely unlikely that the use or abuse of illicit substances could account for this clinical picture.

In my medical psychiatric opinion, with reasonable medical certainty, Daniel Butts suffers from a serious mental illness, psychotic in nature, likely schizophrenic in type. I've had the opportunity to observe his interaction with his attorney and his psychologist. He remains nonverbal, showing no recognition of individuals including myself, the psychologist and his attorneys. He is generally unresponsive to staff. Therefore in my medical psychiatric opinion he is currently unable to aid and assist in his own defense.

Sincerely,

Jerry K. Larsen, MD  
Associate Clinical Professor of Psychiatry  
Oregon Health Sciences University, RTD



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PAGE 1 OF 3.



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EXHIBIT C  
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**WILLAMETTE VALLEY FAMILY CENTER, LLC**  
610 Jefferson Street • Oregon City, Oregon 97045  
Phone: (503) 657-7235 • Fax: (503) 657-7676

January 18, 2012

**COPY**

Diana Gentry  
Attorney at Law

Patrick Sweeney  
Attorney at Law  
1906 SW Madison St  
Portland, OR 97205

RE: Daniel Butts

Dear Ms. Gentry and Mr. Sweeney:

On 1-13-12 I again attempted to interview Daniel Butts in the Columbia County Detention Facility. In preparation for the evaluation I reviewed records including, but not limited to:

\*State of Oregon vs. Daniel Arnaugh Butts, Clackamas County Case #11-1002, Investigative Reports Columbia County Sheriff's Office. Officer Tony Weaver reported that on 1-4-12 at 2335 hours he was in the control center when he was notified that Inmate Butts might be hurting himself. When observed it appeared that Inmate Butts was standing near his toilet and appeared to be striking himself in the head, neck and face. Officers ordered him to stop. They noticed what appeared to be blood. When deputies approached Butts "he immediately ran and slid under his bunk". When Butts did not come out from under the bunk, he was tasered. Officers fell on what appeared to be a "slicked up floor". Inmate Butts reportedly kicked at the deputies. The officers ordered him to stop fighting. He was again stunned, then cuffed and stunned a third time. He was "dry stunned" again. Butts refused to stand up. He was lifted to his feet by deputies. He continued to resist. He was placed in the restraint chair. Again he remained noncompliant. When restrained in the chair, deputies found and photographed "three pencils stained with what appeared to be blood, several drops and smears of what appeared to be blood, a Bible with handwritten notes on the pages, an Inmate Request Form with the adding visitors portion completed and a request to see his attorney in the comments portion".

\*Columbia County Jail Inmate Request Form, reportedly completed by Daniel Butts on 1-8-11 (received by jail staff 1-4-12 at 2200) stating "I need to talk to all my attorneys and get out of here. I have to have my full const processed and next

I have to have my full court process and next court date. Make sure then everybody knows I need a jury and a court date and everything (unreadable). He requested attorney Kevin Vibbert (an unknown individual).

\*Special Report Use of Force Inmate Butts, Daniel by Officer Kyles. He relieved Deputy Weaver from control while he, Deputy Lautt and Deputy Weaver went to BL4 to check on Inmate Butts. Officer said he could hear them yelling commands.

\*Special Report Officer Lautt described the interaction with Daniel Butts. Tasers and restraint measures required. The officer reports "As soon as we closed the door Mr. Butts started to bang his head on the wall and floor. At that time we opened the door. We being Sgt. Cutwright, Deputy Weaver and myself, brought Mr. Butts out of the safety cell so we could place him in the black restraint chair. A spit hood was placed over his head by Sgt. Cutwright.

\*Special Report Officer Cutwright who also described the action to restrain Daniel Butts, who put the spit mask on Inmate Butts to be sure that he would not spit or fling blood around at any of the deputies. At 12:15 on January 5<sup>th</sup> members of the Columbia River Fire and Rescue arrived to assist potential injuries to Inmate Butts. Medics observed the self inflicted injuries to his neck and head. After the medics looked Inmate Butts over they stated that all of his wounds appeared to be superficial, and did not appear to need any medical attention. At 12:45 January 5<sup>th</sup> Inmate Butts complained his wrists were hurting. The officer told Inmate Butts that he would remove restraints from behind his back and restrain them on each side of the chair and that he would hold his chin while disconnecting the restraints. Inmate Butts stated "I understand." Butts remained in the chair from 23:55 to 11:00 (4+ hours).

\*Special Report Use of Force Daniel Butts, reported by Office Randy Bonds who took photographs of Mr. Butts injuries and in a sealed plastic evidence bag placed two Bibles and three small pencils.

\*Property evidence receipt dated 1-5-12 reviewed.

\*The Unit History Time Responses were reviewed.

\*DVD reproduced photographs of face and neck injuries indicating full thickness lacerations and puncture sites appearing several millimeters thick with moderate bleeding.

\*Special Report Officer Randy Bonds states on January 4<sup>th</sup> at 11:48 p.m. Daniel Butts was out of control causing a disturbance in the Columbia County Jail. He injured himself with pencils. Officer states he could see Mr. Butts through the cell door window and he was hitting the left side of his head on the wall. The officer took photographs of Mr. Butts' injuries. He told Mr. Butts medics were coming to check his injuries and they would tell them if he needed to go to the hospital. The officer states "He looked at me and said, okay." Photographs were taken of the blood smear on the hallway wall.

\*Jail Incident Report 12-15-11, Inmate Butts' dad arrived for a visit. Officer informed Sgt. Rigdon and Deputy Fraser that Butts had a visitor and he said he wants to go. After his visit Butts allegedly asked for time out and then made his way to the shower, staying for 15 minutes. He had some rec time and was out for

25 minutes. Butts then stayed behind the glass and watched TV until his time was over at 2200.

\*Sexual misconduct while serving breakfast reported by Officer Michelle Ritchie, who states that Inmate Butts had his penis exposed and was sticking it right in the pass-thru and "almost threw it towards me".

\*Jail Incident Report, Inmate Butts sitting on the sink with his feet in the sink. When officers inquired, he said "shower".

\*Incident Report, Officer heard a conversation in a faint voice saying "drugs". Officer then heard Inmate Osenwengle say "No man. I ain't got no drugs, man." Reported by Officer Brandon Yon.

\*Officer's Report on 12-18-11 at 8:35 after an attorney visit, Butts stated "You guys can split my commissary money if you give me more out time", reported by Officer Sean Moore.

\*Jail Incident Report, Butts allegedly said "You guys can split my commissary money if you give me more out time." reported by Officer Kernutt.

\*Incident Report 12-17, outdoor rec, by Officer Brandon Yon. Butts allegedly said that he was "nickin". He allegedly asked for a cigarette, asked for a chew, asked a second time for a cigarette. No further incident reported.

\*Write Up Form 12-19-11. Officer Tony Weaver states "I adjudicated Inmate Butts. Inmate Butts refused to participate, however, he laughed every time I said sexual misconduct, hands down his pants, or penis."

\*Noncompliance Report 12-20-1, Daniel Butts refused to sign (bandit) electronic mobilization system defendant notification form, reported by Officer Tony Weaver.

\*Jail Incident Report 10-28-11, Officer John Kernutt was on 10-28-11 at 10:40 a.m. asked to escort a doctor hired by Inmate Butts' attorney to visit Inmate Butts. While escorting the doctor from booking he asked how inmate was doing and "if I thought he was normal or not. I explained to the doctor that when Inmate Butts first arrived at the jail he would talk to deputies and that it was not until after he was appointed counsel did he stop talking or did his behavior change. I escorted the doctor into B Special to BL1 so he could visit with Inmate Butts. I opened the food door so that the doctor could talk with Inmate Butts. When the doctor started to talk to him, Inmate Butts stood up on his bunk and turned into the corner of the wall, held his hands together palm to palm like he was praying. The doctor asked me if that was how Inmate Butts was acting. I told him yes. The doctor then concluded the visit and I escorted him out of the facility."

\*Jail Incident Reports 12-24-11, 12-25-11, 12-28-11 were reviewed.

\*Memo comments were reviewed on 1-4-12 when Butts was tasered and placed in the restraint chair.

\*Notation DVD Daniel Butts photos at CCSO 1-4-12. Photos were not provided, as reported by Officer Tony Weaver.

\*Inmate Request Form as previously described was again reviewed 1-9-12 Nurse Jennifer gave Butts Tylenol. He took one and placed one on the floor. He was told that he had to take them both and he then complied.

\*Incident Report 1-9-12 when asked if Butts wanted to move back to his cell in B Pod, he said he wanted to and he wanted normal clothes. "I asked him if he

wanted to hurt himself and he told me no, I'm safe, I'll be safe." When officer told him he was concerned about using the Taser, Butts said "That will not be necessary. I'll be good." He asked if he could get his time up when he goes back and if he can watch TV. When officers told him that he would not be able to watch TV and could not have pencils in his cell, the officer states "Inmate Butts said he understood."

\*Incident Report 1-9-12, visited by attorney Diana Gentry. Officers told both attorney and Inmate Butts that he could be taken to the attorney visiting area, but he would have to be shackled. Mr. Butts then said "No. You are going to take me back to my pod and you (Gentry) and you are going to visit me there. That is how it's going to be."

I again attempted to interview Daniel Butts in the attorney visiting room in the Columbia County Detention Facility on 1-3-12. He was escorted into the room by two uniformed officers. He was shackled hand and foot, wearing jail clothing and a gray sweatshirt. He was, as before, markedly disheveled, with what appeared to be abrasions or lesions on the face, which I simply could not examine because of the safety glass. He was affectually flat, stared at me for a few moments, got up and walked to the corner of the room and stood with is back to me. When I asked repeatedly for him to return as I had a number of questions, he eventually did turn, walked back part way, uttered one word which I could not understand, stared at me, remaining affectually flat throughout the entire interview. He then turned away from me, walked to the exit door, appeared to jiggle the door several times, and looked out through the window into the exit hall. He appeared to manipulate the intercom or door. He then leaned his forehead into the exit door and stood there between five and ten minutes. When he would not respond, I terminated the interview and exited the conference room.

In summary, based upon the current attempt at an evaluation, review of current jail records, previous observations, interview with family, and attempts to interview Mr. Butts, the following is evident.

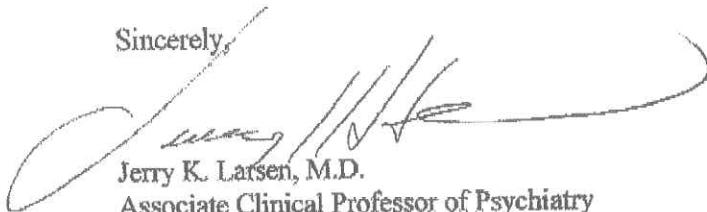
1. Prior to his arrest, he displayed signs and symptoms characterized by paranoid ideation, reported hallucinations, social isolation, affectual flatness or inappropriate presentation, all consistent with positive symptoms associated with a psychotic illness such as schizophrenia.
2. His behavior prior to the arrest deteriorated in areas of self care, socialization, work, and observed inappropriate behavior.
3. His subsequent behavior while incarcerated is certainly bizarre, inappropriate and uncooperative.
4. His disorganized behavior has been manifested by unpredictable agitation, associated with some difficulty in performing activities of daily living. He has become markedly disheveled, poorly groomed, and certainly displayed inappropriate sexual behavior, signs and symptoms consistent with a schizophrenic illness as clearly outlined in the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> Edition, Text Revision.
5. We certainly see prodromal symptoms as described above, and deteriorating functioning in interpersonal relations and self care. His history suggests an

interruption in his educational and work progress, the inability to hold a job, signs and symptoms sometimes referred to as a "downward drift". Individuals with these disorders tend to have limited social contacts and generally do not marry. These are signs and symptoms that, under criterion C, are present for six months or longer, certainly true in this case. Individuals with such disorders display poor insight, are noncompliant with treatment or other interventions. Suicide is an important factor with schizophrenic illnesses, as 10% of individuals so diagnosed commit suicide. Between 20 and 40% make at least one attempt over the course of their illness. Specific risk factors include male gender, under 45 years of age, depressive symptoms, feelings of hopelessness, and the suicide risk is elevated during post psychotic periods. Therefore the report of self mutilation is of significant concern. Individuals with schizophrenic illness have a higher incident of assault and violent behavior. Higher incidents are seen in the male gender, younger age and past history of violence, noncompliance and substance abuse. It must be noted that there is no objective evidence to suggest Daniel Butts' problem is in any way related to amphetamine or other psychoactive substance abuse.

6. Daniel Butts should be administered a therapeutic dose of an atypical antipsychotic such as Risperdal 4 to 8 mg daily. If he is truly psychotic then we should see improvement in his presentation, self grooming, cooperative stance and verbalization. If we see no improvement and simply more social isolation or sedation then we will have more evidence to suggest that he possibly is malingering.

I thank you for the referral. If you have any further questions, do not hesitate to contact me.

Sincerely,



Jerry K. Larsen, M.D.  
Associate Clinical Professor of Psychiatry  
Oregon Health Sciences University, RTD

## WILLAMETTE VALLEY FAMILY CENTER, LLC

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# Fax

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To: D. Bentley / Nurse From: D. Hansen MD  
Agency: Jennifer Pages: (including cover sheet)  
Fax: 503-321-1908 Date: 3/2/12  
Re: 503-366-4634 Daniel Butts

Urgent  For Review  Hard Copy to Follow  Please Comment  Please Reply

Comments:

WILLAMETTE VALLEY FAMILY CENTER, LLC  
JERRY K. LARSEN, M.D.  
PSYCHIATRIST  
810 JEFFERSON STREET  
OREGON CITY, OR 97045  
DEA #

(503) 657-7299 TEL  
(503) 657-7676 FAX

NAME Donald Buff AGE 71  
ADDRESS Cell 601 1/2 year DATE 2/27/12

RE: ILLEGAL IF NOT SAFETY BLUE BACKGROUND

**R** If oral meds refused

Risperdal Consta 25mg

IM- q 2 wks

# Soc

Refill 10 times

Jerry K. Larsen

(Signature)

To ensure brand name dispensing, prescriber must write 'No Substitution' or 'NS' on the prescription.

GLP90082805

WILLAMETTE VALLEY FAMILY CENTER, LLC

JERRY K. LARSEN, M.D.

PSYCHIATRIST

810 JEFFERSON STREET

OREGON CITY, OR 97045

DEA #

(503) 657-7299 TEL

(503) 657-7676 FAX

NAME Donald Buff AGE 71  
ADDRESS Cell 601 1/2 year DATE 2/27/12

RE: ILLEGAL IF NOT SAFETY BLUE BACKGROUND

**R** Risperdal Consta

25mg bid x 14 days

if no significant improvement  
increase to 40mg bid

Also 250cc

1 mg per /cc

Refill 10 times

Jerry K. Larsen

(Signature)

To ensure brand name dispensing, prescriber must write 'No Substitution' or 'NS' on the prescription.

GLP90082805

EXHIBIT E  
PAGE 2 OF 2

**Multnomah County Sheriff's Office**

**BUTTS, DANIEL ARMAUGH**



MCL #:	MCL1217236
Charge:	001.200 - COUNTY HOLD
DATE:	3/23/2012
Birth Date:	9/22/1989
Sex:	M
Race:	W
Height:	71
Weight:	175

**NOT TO BE USED  
FOR  
IDENTIFICATION  
PURPOSES**

3/23/2012

EXHIBIT F  
AGE / OF /

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF COLUMBIA

In the Matter of the Application of  
Daniel Armaugh Butts ) No. 12-2195  
for Writ of Habeas Corpus )  
Plaintiff, )  
vs. ) AFFIDAVIT OF JERRY LASEN, M.D.  
Jeff Dickerson, Columbia County Sheriff; )  
Andy Moyer, Columbia County )  
Undersheriff and Jail Commander )  
Defendants. )  
STATE OF OREGON )  
 ) ss.  
COUNTY OF CLACKAMAS )

I, Jerry Larsen, on behalf of Plaintiff, being first duly sworn, depose and say:

1. I am a licensed medical doctor. I have an active practice and specialize in psychiatric medicine.
2. I am familiar with Daniel Butts and his psychiatric medical condition.
3. In my medical psychiatric opinion, with reasonable medical certainty, Daniel Butts suffers from a serious mental illness, psychotic in nature, likely schizophrenic in type.

4. On February 4, 2011, I wrote a letter to Nancy Spencer, NP at the Columbia County Jail, recommending that inmate Daniel Butts receive Risperdal (Risperidone), an antipsychotic medication.

Page 1 – AFFIDAVIT OF JERRY LASEN, M.D.

Dianna J. Gentry, LLC  
1906 S.W. Madison Street  
Portland, OR 97205  
Telephone: 503.629.2121 Facsimile 503.221.1908

EXHIBIT G  
PAGE 1 OF 2

5. On February 29, 2012, I wrote two prescriptions for Daniel Butts. Both prescriptions were for Risperdal: one in tablet form and the second in liquid, injectable form. I prescribed the injectable form in the event that the oral meds were refused.

6. It is my understanding from Plaintiff's Counsel that Daniel Butts remains untreated and has never received his antipsychotic medication(s).

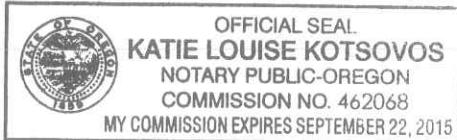
7. The longer a psychotic person goes without receiving treatment; the worse the condition becomes and the more resistant the illness becomes to medication.

8        8. For over a year I have recommended antipsychotic medications for Daniel  
9        Butts. I have prescribed antipsychotic medication for Daniel Butts. Daniel Butts has a  
10      serious medical need for the medication. If Daniel Butts does not receive an appropriate  
11      antipsychotic medication; with reasonable medical certainty, his mental illness will  
12      worsen and become more resistant to effective treatment.

Jerry Larsen, M.D., P.C.  
Associate Clinical Professor of Psychiatry  
Oregon Health Sciences University, Rtd.

SUBSCRIBED AND SWORN TO before me this 9 day of April,  
2012.

Patti Vitam  
Notary Public for Oregon  
My commission expires:



Page 2 – AFFIDAVIT OF JERRY LASEN, M.D.

Dianna J. Gentry, LLC  
1906 S.W. Madison Street  
Portland, OR 97205  
Telephone: 503.629.2121      Facsimile 503.221.1908

EXHIBIT G  
PAGE 2 OF 2

# News Notes

## Rainier Police Chief Slain January 5, 2011

The Sheriff's Office, with the assistance of our local and state law enforcement partners, investigated the murder of Rainier Police Chief Ralph Painter. Daniel Butts of Kelso, Wash. was arrested and indicted for the killing, and is currently awaiting trial in the Columbia County Jail. Corrections Deputies aided in the investigation in the case, closely documenting Mr. Butts' activities and actions. Their reports were eventually instrumental in disproving the defense's claim that Mr. Butts was unable to aid in his own defense.

## Vernonia Suspect Arrested After Shot Fired February 7, 2011

Deputies took a Vernonia man into custody at the scene of a domestic violence incident after at least one shot was fired from a gun during the incident. The County Critical Incident Response Team—made up of officers and deputies from around the county—assisted with taking the suspect into custody.

## 24-year-old Male Charged with Forcible Rape of 15- year-old Female Victim March 19, 2011

Sheriff's Deputies charged a 24-year old in the forcible rape of a 15-year-old girl in his home near Vernonia. The man was later convicted of Rape in Circuit Court.



## Vernonia Man arrested on 29 Counts of Sex Crimes Involving Children

**March 25, 2011**

Sheriff's Deputies and Federal Agents collaborated on a 10-month investigation involving this subject. The victims were two members of the suspect's family and a neighborhood child.

## Columbia River Patrol Rescues Capsized Boaters

When two men operating a canoe on the Columbia River in May had their craft overturn, people on the shoreline in the evening hours could hear their cries for help coming from the river. An off-duty CCSO Marine Patrol Unit sprang into action and found the men alive, saving them from certain death.

## Long Time Jail Leader Retires June 30, 2011

Jim Carpenter retired from the Sheriff's Office after 22 years serving Columbia County in the jail. He left as the commander of the jail.



## Vernonia-Area Woman Arrested for Attempted Murder

**August 22, 2011**

Deputies responded to shots fired outside of Vernonia and arrested a 57-year-old woman reported to have been shooting at a relative and others nearby.

## Violent Brawl in Deer Island Lands Three in Jail October 4, 2011

One man was stabbed, and three people were arrested in a violent family dispute in Deer Island. A 22-year-old man was in custody for Assault; his mother for a warrant, and another relative for menacing after she

brought a gun and pointed it at others during the dispute.

## Sheriff's Investigators Crack I.D. Theft Ring October 19, 2011

Three major players and several minor participants were arrested following a two-week investigation of burglaries occurring in the county. The thieves were stealing jewelry, other valuables, and identification documents from residents throughout south county and beyond.

## Sworn staff Re-shuffled To Address Staffing Shortages October 20, 2011

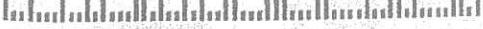
Patrol deputies were reduced again from 5 to 4 to make room for a new detective position. The detective has been assigned to focus on major crime investigations and child abuse cases.

## Jail Capacity Management Plan December, 2011

Due to reduced jail operational capacity because of budget cuts, the Sheriff authorized a new capacity management plan to help manage population emergencies in the jail.

## Sheriff's Office Search & Rescue Finds Missing Deer Island Teen Six Weeks after Fatal crash December 17, 2011

The body of a 19-year-old woman reported missing to the Sheriff's Office in November was found by Search and Rescue team members. after hundreds of hours of searching and investigating what had happened to her, Sheriff Dickerson commented: "We kept looking for her until we found her."

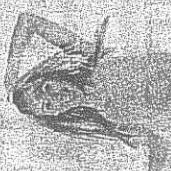


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## Winning looks

Underwood uses growing fame to top 'hottest' poll  
— See A9



## Big swing

Scappoose baseball adds two wins on E. Oregon swing  
— See B1

*South County*

**SPOTLIGHT**

WEDNESDAY, APRIL 4, 2012

ONLINE AT [WWW.SPOTLIGHTNEWS.NET](http://WWW.SPOTLIGHTNEWS.NET)

50 CENTS

# Butts' attorneys claim jail mistreatment

**Sheriff Dickerson answers allegations of harm as murder suspect's infection remains untreated**

BY STOVER E. HARGER III  
*The Spotlight*

Attorneys for accused murderer Daniel Butts are arguing their client is not receiving proper care in the Columbia County Jail of an untreated infection that came after Butts repeatedly stabbed himself in the head with a pencil in January. In a court hearing last week,

Butts' attorneys did not return a call for comment by press time.

Dickerson said his staff is documenting each time Butts refuses

treatment. The sheriff said he plans to order jail staff to treat Butts to show this evidence in court to counteract the defense's allegations of mistreatment. "If he is going to say, 'I don't want medical care,' we are not going to force him," Dickerson said. Butts was temporarily transported to the Multnomah County Jail on March 23, but after seeing his wound, staff decided against holding the prisoner unless his injury was treated. Butts again reportedly refused care when he was taken to a hospital on March 28. "He refused to take the drugs," Dickerson said.

See BUTTS / Page A5

This Multnomah County booking photo from March 23 shows a head wound on murder suspect Daniel Butts' forehead.

Multnomah County refused to house Butts unless he agreed to treatment for an infection.



County closes in  
on 1 shot

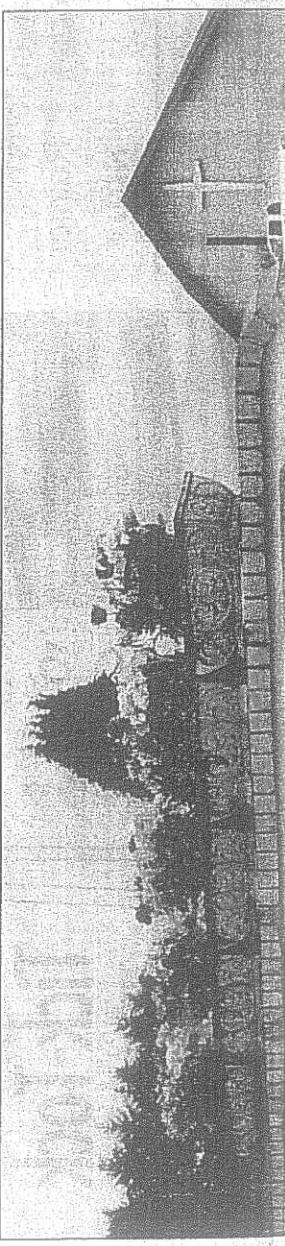


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## Butts: 'Big headache' is attorneys

From page 1

Chief Ralph Painter on Jan. 5, 2011, at a car stereo store. One year later, on the eve of the anniversary of Painter's death, jail staff said they had to use a Taser on and restrain Butts because the suspect was stabbing himself repeatedly in the head (see March 28 Spotlight edition, "Lingering pencil wound infects Butts' head"). The 22-year-old Kalama, Wash., man is accused of shooting and killing Rainier Police

Dickerson agrees with Judge Grove's previous declaration that Butts is "gaming the system" with his often bizarre and self-destructive behavior. He said he believes the defense is building a case for insanity since there are so many eyewitness accounts of Butts' crimes. "It's got to be a defense strategy," Dickerson said. "The big headache is not Butts, it's his attorneys."

## Range: 'When the weeds b<sub>1</sub> grow, we take our inmates c

From page 1

Hyde said he is "working groups on ways a portion used for public shooting, original vision, for the property to the range, is possible, with chemical commitment with security concern federal presence at the federal public is prohibited. An alternative access method, Hyde said, though \$300,000 to develop "We just have to figure, road in," he said.

County ownership of the range would restore the original vision, said County Commissioner Tony Hyde, who participated in early negotiations with Morse Bros. and said it wasn't clear from the outset how Knife River Corporation would manage legal aspects of the initial arrangement. "I don't blame [Knife River] for being overly expensive, but now they can release some of those encumbrances that could allow much uses," Hyde said. "It's been a long slogan to point any fingers."

Dickerson said he raised concerns about when he ran for office in 2008, citing problems about running public operations such as police training on privately owned

## Race Against Child Abuse returns

The 4th annual Race Against Child Abuse will be held May 5, giving residents a chance to raise money to combat abuse through their athletic prowess.

Each year, participants sign up to run or walk through Columbia County to raise money

check-in begins at 8 a.m. The race route will work through St. Helens with a 10k course taking racers through part of McCormick Park.

Learn more at: [uberthons.com/raceagainstchildabuse](http://uberthons.com/raceagainstchildabuse)

Problems with scheduling the range have also curtailed the FBI's interest in the property because the FBI financed construction of few amenities, such as course, it has claimed, p

said Dickerson, whose schedules. In the case of the Sea at the time, the FBI had been

**New Patients Welcome!**

EXHIBIT E  
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