

IN THE SUPREME COURT OF THE STATE OF NEVADA

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TONEY A. WHITE,	)	Electronically Filed
	)	Sep 19 2019 12:27 p.m.
#1214172,	)	Elizabeth A. Brown
	)	Clerk of Supreme Court
Appellant,	)	
	)	
	)	CASE NO.: 78483
	)	D.C. Case No.: C-16-313216-2
vs.	)	
	)	<b>E-FILE</b>
STATE OF NEVADA,	)	
	)	
	)	
Respondent.	)	
	)	

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**APPELLANT'S APPENDIX VOLUME III**

Appeal from the Eighth Judicial District Court  
Clark County, Nevada

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Counsel for Respondent

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## CERTIFICATE OF SERVICE

I hereby certify that I am an assistant to Terrence M. Jackson, Esquire, am a person competent to serve papers and not a party to the above-entitled action and on the 19th day of September, 2019, I served copy of the foregoing: Appellant, Toney A. White's Opening Brief as well as Volumes I - III of the Appendix, as follows:

[X] Via Electronic Service to the Nevada Supreme Court, to the Eighth Judicial District Court, and to the Petitioner/Appellant as well as the Nevada Attorney General by U.S. mail with first class postage affixed as follows:

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1 RTRAN

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3  
4  
5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

7  
8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2  
DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT  
15 JUDGE

16 THURSDAY, FEBRUARY 21, 2019

17 **RECORDER'S TRANSCRIPT OF HEARING:**  
18 **JURY TRIAL — DAY 3**

19 APPEARANCES:

20 For the State:

MICHAEL SCHWARTZER, ESQ.  
VIVIAN LUONG, ESQ.

21  
22 Deputy District Attorneys

23 For the Defendant:

MICHAEL W. SANFT, ESQ.

24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

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Las Vegas, Nevada, Thursday, February 21, 2019

[Hearing began at 11:37 a.m.]

[Outside the presence of the jury]

THE COURT: Okay. The record will reflect that the hearing is taking place outside the presence of the jury panel. We'll let you get your belt. I guess if he's going to plead, we don't need a guilty plea agreement.

MR. SCHWARTZER: No. I mean, the State's not -- I mean I can't stop him from pleading guilty.

THE COURT: Okay.

MR. SANFT: Your Honor, just for the record, Michael Sanft on behalf of Mr. White, who's present in custody. Mr. White asked me this morning to inform the Court that he's intending on pleading to the charges that are contained in the Information that was filed with the Court with regards to this case without the benefit of a negotiation.

THE COURT: Is that what you want to do today?

THE DEFENDANT: Yeah.

THE COURT: Okay, so do you want to plead to all eight counts in the charging document?

THE DEFENDANT: Yeah.

THE COURT: Okay. And you know what they are. Count 1 is Conspiracy to Commit Robbery; Count 2, Burglary While in Possession of a Deadly Weapon; Count 3, First Degree Kidnapping with Use of a Deadly Weapon; Count 4, First Degree Kidnapping with Use of a Deadly Weapon; Count 5, Attempt Robbery with Use of a Deadly

1     Weapon; Count 6, Attempt Robbery with Use of a Deadly Weapon; and  
2     Count 7, Battery with Use of a Deadly Weapon Resulting in Substantial  
3     Bodily Harm; and 8, Impersonation of an Officer. Do you understand  
4     that?

5             THE DEFENDANT: Yeah.

6             THE COURT: Okay. And you want to plead straight up to the  
7     charging document?

8             THE DEFENDANT: Yeah.

9             THE COURT: And you know that you will -- why don't I -- do  
10    we -- can we get a copy of this because I want him to be able to have a  
11    copy of it so he can follow along.

12            THE CLERK: Do the DAs have --

13            MR. SANFT: Your Honor, I do -- I do have a copy, Your  
14    Honor.

15            THE CLERK: I gave them copies.

16            THE COURT: Okay. I just want to make sure that he has a  
17    copy and can follow along with me.

18            MR. SCHWARTZER: I agree.

19            MR. SANFT: Yes, ma'am.

20            Mr. SCHWARTZER: Thank you, Your Honor.

21            THE COURT: And you understand that you would be entering  
22    into this guilty plea without the benefit of any negotiation from the State  
23    of Nevada?

24            THE DEFENDANT: Yeah.

25            THE COURT: And you know what that means?

1 THE DEFENDANT: Yeah.

2 THE COURT: That means that at the time of sentencing, they  
3 could argue for any lawful sentence. They're not bound by any contract.  
4 They're not bound by any agreement.

5 THE DEFENDANT: Yeah.

6 THE COURT: Okay. And that's what you want to do?

7 THE DEFENDANT: Yeah.

8 THE COURT: Here, let me just wait until you get situated and  
9 then I'll --

10 MR. SANFT: Thank you, Your Honor.

11 [Pause in the proceedings]

12 THE COURT: Okay, Mr. White. Are you ready?

13 THE DEFENDANT: Yeah.

14 THE COURT: And you've had a chance to talk to your  
15 attorney? Is that a yes -- I've got to make sure you're paying attention to  
16 me --

17 THE DEFENDANT: Yeah. I am.

18 THE COURT: -- because you've already withdrawn one plea  
19 with me. So, I just want to make sure you're paying attention.  
20 So, you let me know when you are done looking at that document.

21 [Pause in the proceedings]

22 THE DEFENDANT: All right.

23 THE COURT: Okay. Your true and full name for the record?

24 THE DEFENDANT: Toney White.

25 THE COURT: How old are you?

1 THE DEFENDANT: Forty-six.  
2 THE COURT: How far did you go in school?  
3 THE DEFENDANT: A GED.  
4 THE COURT: You do read, write and understand the English  
5 language?  
6 THE DEFENDANT: Yeah.  
7 THE COURT: You've been provided with the Amended  
8 Indictment in this case?  
9 THE DEFENDANT: Yeah.  
10 THE COURT: Okay. And you've had a chance to review it,  
11 correct?  
12 THE DEFENDANT: Yeah.  
13 THE COURT: And I've also read to you what the charges are,  
14 the eight counts. Is that correct?  
15 THE DEFENDANT: Yeah.  
16 THE COURT: And, you want to enter a guilty plea to all eight  
17 counts. Is that correct?  
18 THE DEFENDANT: Yeah.  
19 THE COURT: Okay. How do you plead to the charges in the  
20 Amended Indictment?  
21 THE DEFENDANT: Guilty.  
22 THE COURT: Are you entering into this plea today -- and you  
23 are entering a guilty plea as to all eight counts. Is that correct?  
24 THE DEFENDANT: Yeah.  
25 THE COURT: I'm just, one more time. Count 1, Conspiracy

1 to Commit Robbery; Count 2, Burglary While in Possession of a Deadly  
2 Weapon; Count 3, First Degree Kidnapping with Use of a Deadly  
3 Weapon; Count 4, First Degree Kidnapping with Use of a Deadly  
4 Weapon; Count 5, Attempt Robbery with Use of a Deadly Weapon;  
5 Count 6, Attempt Robbery with Use of a Deadly Weapon; 7, Battery with  
6 Use of a Deadly Weapon Resulting in Substantial Bodily Harm; and  
7 Count 8, Impersonation of an Officer.

8 THE DEFENDANT: Yeah.

9 THE COURT: How do you plead to those charges?

10 THE DEFENDANT: Guilty.

11 THE COURT: Are you entering into this plea today freely and  
12 voluntarily?

13 THE DEFENDANT: Yeah.

14 THE COURT: Did anyone threaten or coerce you into  
15 entering into this plea?

16 THE DEFENDANT: No.

17 THE COURT: So, you're entering into this plea today of your  
18 own free will?

19 THE DEFENDANT: Yeah.

20 THE COURT: Okay. And you had a chance to discuss all this  
21 with Mr. Sanft?

22 THE DEFENDANT: Yeah.

23 THE COURT: And that's what you want to do. Correct?

24 THE DEFENDANT: Yes, ma'am.

25 THE COURT: And you understand what the range of

1 punishment is? Again, I just want to make sure you understand. You  
2 are entering into this guilty plea. No one can stop you from pleading  
3 straight up to the sheet.

4 But you're entering into this guilty plea today without any guilty  
5 plea agreement by the State. They are not bound by any contract. They  
6 are not bound by anything except the range of punishment for each  
7 offense.

8 THE DEFENDANT: Yeah.

9 THE COURT: Do you understand that?

10 THE DEFENDANT: Yeah.

11 THE COURT: So, you understand that they could ask for the  
12 maximum on each count and ask me to run it all consecutive?

13 THE DEFENDANT: Yeah.

14 THE COURT: You understand that, right? Okay, so you  
15 understand as to Count 1, Conspiracy to Commit Robbery, you're facing  
16 one to six years in the Nevada Department of Corrections. Do you  
17 understand that?

18 THE DEFENDANT: Yeah.

19 THE COURT: As to Count 2, Burglary While in Possession of  
20 a Deadly Weapon --

21 Is that at one --

22 MR. SCHWARTZER: It's at two to fifteen, Your Honor.

23 THE COURT: Two to fifteen. You are facing two to fifteen  
24 years in the Nevada Department of Corrections. You understand as to  
25 Count 3 and 4, the First Degree Kidnapping with use of a Deadly



1     Weapon --

2             THE DEFENDANT: Yeah.

3             THE COURT: -- you are facing a term of years of fifteen years  
4     with minimum parole eligibility beginning after a minimum of five years  
5     has been served or life in the Nevada Department of Corrections with  
6     parole eligibility beginning after a minimum of five years has been  
7     served. And you are facing --

8             It's one to fifteen on the deadly weapon?

9             MR. SCHWARTZER: The deadly weapon would be one to  
10    fifteen, Your Honor. That's correct.

11            THE COURT: That's what I --

12            And the deadly weapon is a consecutive one to fifteen. Do you  
13    understand that?

14            THE DEFENDANT: Yeah.

15            THE COURT: So, you understand on Counts 3 and 4, you are  
16    facing a life sentence?

17            THE DEFENDANT: Yeah.

18            THE COURT: Do you understand that?

19            THE DEFENDANT: [No audible answer.]

20            THE COURT: Is that a yes?

21            THE DEFENDANT: Yes.

22            THE COURT: Okay. And you also understand as to Count 5,  
23    the Attempt Robbery with Use of a Deadly Weapon --

24            What is he facing on Count 5?

25            MR. SCHWARTZER: Count 5, Your Honor, would be -- for

1 the Attempt Robbery it would be one to ten for the Robbery and then a  
2 consecutive one to ten for the use of the deadly weapon.

3 THE COURT: Okay. So, the Attempt Robbery you are facing  
4 one to ten years in the Nevada Department of Corrections, plus a  
5 consecutive one to ten years for the deadly weapon enhancement. Do  
6 you understand that?

7 THE DEFENDANT: Yes.

8 THE COURT: And you understand that I am required by law  
9 to impose that deadly weapon enhancement consecutive to the original  
10 sentence. Do you understand that?

11 THE DEFENDANT: Yeah.

12 THE COURT: Okay. And you understand Count 6, the  
13 Attempt Robbery with Use of a Deadly Weapon, it's the same thing.  
14 You're facing one to ten, plus a consecutive one to ten for the deadly  
15 weapon enhancement?

16 THE DEFENDANT: Yeah.

17 THE COURT: Do you understand that?

18 THE DEFENDANT: Yeah.

19 THE COURT: And then the Battery with Use of a Deadly  
20 Weapon Resulting in Substantial Bodily Harm, it's a two to fifteen.

21 MR. SCHWARTZER: That's correct.

22 THE COURT: You're facing two to fifteen years in the Nevada  
23 Department of Corrections. And then as to Count 8, Impersonation of  
24 Officer, that was --

25 MR. SANFT: It's a gross misdemeanor, Your Honor.

1 MR. SCHWARTZER: It's a gross misdemeanor.  
2 THE COURT: Okay.  
3 MR. SCHWARTZER: So, it would be up to 364 days.  
4 THE COURT: – 364 days in the Clark County Detention  
5 Center. Do you understand all that?  
6 THE DEFENDANT: Yeah.  
7 THE COURT: And you understand the range of punishment  
8 on each offense?  
9 THE DEFENDANT: Yeah.  
10 THE COURT: And you understand that the State is not bound  
11 by any agreement that they have entered into with you?  
12 THE DEFENDANT: Yeah.  
13 THE COURT: So, again, I just want to make sure you  
14 understand; I mean you're facing a life sentence on the First Degree  
15 Kidnapping. Do you understand that?  
16 THE DEFENDANT: Yeah.  
17 MR. SCHWARTZER: Your Honor, also, could we have him  
18 canvassed? Since we did file a notice of habitual, he needs to be  
19 canvassed on it.  
20 THE COURT: That's right.  
21 MR. SCHWARTZER: So, he's facing with -- he's facing if  
22 adjudicated under a smaller habitual the five to twenty-year range. If  
23 he's adjudicated as large habitual he's eligible for another ten to life or  
24 life without.  
25 THE COURT: And, so the State, you filed a notice, so at the

1 time of sentencing you will be seeking habitual treatment?

2 MR. SCHWARTZER: I will, Your Honor.

3 THE COURT: Okay. So, I just want to make sure you  
4 understand that, Mr. White. The State has indicated they have filed a  
5 notice to seek habitual treatment. At the time of sentencing they're  
6 going to ask the Court to treat this under the habitual statute.

7 If you are treated under the small habitual, you're facing five  
8 to twenty years in the Nevada Department of Corrections; you are  
9 eligible under the large habitual statute. If they ask me to habitualize  
10 you under the large, you're facing life without the possibility of parole or  
11 life with the possibility of parole beginning after a minimum of ten years  
12 has been served.

13 MR. SCHWARTZER: And there's also – I apologize. There's  
14 also the ten to twenty-five years I failed to mention that.

15 THE COURT: Okay. Or, a term of years of twenty-five years  
16 with parole eligibility beginning after a minimum of ten years has been  
17 served. Do you understand that?

18 THE DEFENDANT: Yeah.

19 THE COURT: Do you have any questions about that?

20 THE DEFENDANT: No.

21 THE COURT: Because that's pretty important; because the  
22 District Attorney has stated to you in open court that he will be seeking  
23 to treat this under the large habitual statute; well actually, he said just  
24 the habitual. I apologize. He said he he'd be seeking to habitualize you.

25 So, I just want to make sure that you understand that the

1 worst possible scenario is you could be sentenced to life without the  
2 possibility of parole on these offenses.

3 THE DEFENDANT: Yeah.

4 THE COURT: Do you understand that?

5 THE DEFENDANT: Yeah.

6 THE COURT: Do you have any questions about that?

7 THE DEFENDANT: No.

8 THE COURT: And you understand that sentencing is  
9 completely within the discretion of the Court, that no one can make you  
10 any promises regarding what will happen at the time of sentencing. Do  
11 you understand that?

12 THE DEFENDANT: Yeah.

13 THE COURT: Has anyone made you any promises?

14 THE DEFENDANT: No.

15 THE COURT: You also understand you are giving up all your  
16 trial rights by entering into this plea today?

17 THE DEFENDANT: Yeah.

18 THE COURT: You understand that you do have a right to a  
19 speedy and public trial; that if the matter went to trial the State would be  
20 required to prove each of the elements as alleged in their charging  
21 document by proof beyond a reasonable doubt. Do you understand  
22 that?

23 THE DEFENDANT: Yeah.

24 THE COURT: And, your attorney did explain to you on each  
25 count what the State would have to prove. Is that correct?

1 THE DEFENDANT: Yeah.

2 THE COURT: Okay. Do you have any questions about what  
3 the State would have to prove if this matter went to trial?

4 THE DEFENDANT: No.

5 THE COURT: Okay. And you had a chance to discuss any  
6 defenses that you would have to these charges?

7 THE DEFENDANT: Yeah.

8 THE COURT: You discussed them with your attorney?

9 THE DEFENDANT: Yeah.

10 THE COURT: You understand at the time of trial you would  
11 have the right to testify, to remain silent, to have others come in and  
12 testify for you, to be confronted by the witnesses against you and cross-  
13 examine them, to appeal any conviction and to be represented by  
14 counsel throughout all critical stages of the proceedings. Do you  
15 understand all these trial rights?

16 THE DEFENDANT: Yeah.

17 THE COURT: And you understand that you will be giving  
18 them up by entering into this plea today?

19 THE DEFENDANT: Yeah.

20 THE COURT: Okay. All right, so, in order to accept your  
21 guilty plea, I have to go through each count and you have to tell me what  
22 you did that makes you guilty of this offense because I have to be sure  
23 that you are, in fact, guilty of these offenses before I accept your plea.  
24 Do you understand that?

25 THE DEFENDANT: Yeah.

1           THE COURT: So, in Clark County, Nevada, on or between  
2 January 20<sup>th</sup> and 21<sup>st</sup>, 2016, as to Count 1, did you willfully, unlawfully  
3 and feloniously conspire with Kevin Wong, Amanda Sexton and Marland  
4 Dean to commit a robbery by Mr. Wong, Sexton and Marland Dean  
5 committing the acts set forth in Counts 2 through 7, said acts being  
6 incorporated by reference as though set forth fully herein?

7           THE DEFENDANT: Yeah.

8           THE COURT: So, you conspired with them to commit the  
9 robbery?

10          THE DEFENDANT: Yeah.

11          THE COURT: And Count 2, did you willfully, unlawfully and  
12 feloniously enter, with the intent to commit a robbery, the residence  
13 occupied by Marlene Burkhalter and/or Jason Cliff, located at 950 Seven  
14 Hills Drive, Henderson, Clark County, Nevada? Did you possess or gain  
15 possession of a firearm and/or a baton during the commission of the  
16 crime and/or before leaving the structure?

17          THE DEFENDANT: Yeah.

18          THE COURT: Is the State satisfied with that?

19          MR. SCHWARTZER: Yes, Your Honor.

20          THE COURT: Okay.

21          MR. SCHWARTZER: Regarding that count, yes, Your Honor.

22          THE COURT: As to Count 3, the First Degree Kidnapping  
23 with Use of a Deadly Weapon, did you willfully, unlawfully and  
24 feloniously seize, confine, inveigle, entice, decoy, abduct, conceal,  
25 kidnap or carry away Marlene Burkhalter, a human being, with the intent

1 to hold or detain her against her will and without her consent for the  
2 purpose of committing robbery with use of a deadly weapon, a baton  
3 and/or a firearm?

4 THE DEFENDANT: Yes.

5 THE COURT: Okay.

6 MR. SCHWARTZER: And, Your Honor, I would just ask that  
7 he state that that was done by either himself or a person with him  
8 knowingly putting handcuffs on Ms. Burkhalter.

9 THE COURT: Okay. Is that what happened?

10 THE DEFENDANT: Yeah.

11 THE COURT: Did you do it or did one of your co-conspirators  
12 do it?

13 THE DEFENDANT: Co-conspirator.

14 THE COURT: And handcuffs were placed on her?

15 THE DEFENDANT: Yeah.

16 THE COURT: And she was taken to another room?

17 THE DEFENDANT: No.

18 THE COURT: Where was she taken?

19 MR. SCHWARTZER: She was – she wasn't – it was just – it's  
20 under the detained theory, Your Honor.

21 THE COURT: I thought she said she moved.

22 MR. SANFT: Just moved from the living room to the kitchen  
23 table.

24 THE COURT: Okay. She was moved from the living room to  
25 the kitchen table?



1 THE DEFENDANT: Yeah.

2 THE COURT: Okay. And as to Count 4, the First Degree  
3 Kidnapping with use of a Deadly Weapon, did you willfully, unlawfully  
4 and feloniously, seize, confine, inveigle, entice, decoy, abduct, conceal,  
5 kidnap or carry away Jason Cliff, with the intent to hold or detain Mr.  
6 Cliff, against his will and without his consent, for the purpose of  
7 committing robbery with use of a deadly weapon, a baton and/or a  
8 firearm?

9 THE DEFENDANT: Yes.

10 THE COURT: What did you do as to Mr. Cliff?

11 THE DEFENDANT: Helped my co-defendant handcuff him.

12 THE COURT: You helped your co-conspirator handcuff him?

13 THE DEFENDANT: Yeah.

14 THE COURT: Okay. Is the State satisfied with that?

15 MR. SCHWARTZER: Yes, Your Honor.

16 THE COURT: Okay. As to Count 5, Attempt Robbery with  
17 Use of a Deadly Weapon, did you willfully, unlawfully and feloniously  
18 attempt to take personal property from Marlene Burkhalter, in her  
19 presence, by means of force of violence or fear of injury to, and without  
20 her consent and against her will, by striking and/or handcuffing Ms.  
21 Burkhalter, but not gaining any property, with the use of a deadly  
22 weapon, a baton and/or a firearm?

23 THE DEFENDANT: Yeah.

24 THE COURT: Okay. Count 6, Attempt Robbery with Use of a  
25 Deadly Weapon, did you willfully, unlawfully and feloniously attempt to

1 take personal property from Mr. Jason Cliff, in his presence, by means of  
2 force or violence, or fear of injury to, and without his consent and against  
3 his will, by striking and/or handcuffing Mr. Cliff, but not gaining any  
4 property, with use of a deadly weapon, a baton and/or a firearm?

5 THE DEFENDANT: Yeah.

6 THE COURT: Is that a yes?

7 THE DEFENDANT: Yeah.

8 THE COURT: Okay. Count 7, Battery with Use of a Deadly  
9 Weapon Resulting in Substantial Bodily Harm, did you willfully,  
10 unlawfully and feloniously use force or violence upon the person of  
11 another, Jason Cliff, with use of a deadly weapon, a baton, by striking  
12 Mr. Cliff about the head and/or body with the baton resulting in  
13 substantial bodily harm to Mr. Cliff?

14 THE DEFENDANT: Yeah.

15 THE COURT: Is the State satisfied with that?

16 MR. SCHWARTZER: Yes. And just so -- and I am, Your  
17 Honor, but I would also include that Mr. White did hear Mr. Cliff's sworn  
18 testimony yesterday and did hear Mr. Cliff list out his injuries and how it  
19 has affected him. I would just ask him -- I ask you to have that  
20 incorporated into he heard that and he agrees with what he heard.

21 THE COURT: Okay. You heard the victim's testimony  
22 yesterday about the pain and suffering he's endured because of his  
23 injuries?

24 THE DEFENDANT: Yeah.

25 THE COURT: And you agree with that?

1 THE DEFENDANT: Yeah.

2 THE COURT: Okay. As to Count 8, Impersonation of an  
3 Officer, did you willfully, unlawfully, falsely impersonate yourself as a  
4 public officer, a policeman or a private individual, with a special authority  
5 by law to perform an act affecting the rights of another to Jason Cliff  
6 and/or Marlene Burkhalter; thereby, performing an act affecting the  
7 rights or interests of another by presenting yourselves as U.S. Marshals  
8 to Jason Cliff and/or Marlene Burkhalter, and/or presenting individuals  
9 with a false search warrant in order to gain access to their residence in  
10 an attempt to commit a robbery upon those individuals?

11 THE DEFENDANT: Yeah.

12 THE COURT: Is the State satisfied with that?

13 MR. SCHWARTZER: Yes, Your Honor.

14 THE COURT: Okay. And Mr. White, you are pleading guilty  
15 today because you are in truth and in fact guilty of these offenses?

16 THE DEFENDANT: Yeah.

17 THE COURT: And you do not want to proceed and go to trial?

18 THE DEFENDANT: No.

19 THE COURT: I mean, we picked a jury, we've gone through  
20 several witnesses; but you think it's in your best interest to just plead  
21 straight up to these charges?

22 THE DEFENDANT: Yeah.

23 THE COURT: Okay. And, again, you are doing this freely  
24 and voluntarily?

25 THE DEFENDANT: Yeah.

1 THE COURT: You had a chance to discuss all this with your  
2 lawyer and all the consequences?

3 THE DEFENDANT: Yeah.

4 THE COURT: And I've explained to you, probably  
5 painstakingly, that the State will be able to ask at the time of sentencing  
6 for any lawful sentence within the ranges that I've mentioned to you,  
7 including under the large habitual statute, where you're facing life  
8 without the possibility of parole.

9 THE DEFENDANT: Yeah.

10 THE COURT: You understand that?

11 THE DEFENDANT: Yeah.

12 THE COURT: And you've heard the District Attorney indicate  
13 at the time of sentencing he will be seeking a sentence under the  
14 habitual statute. You understand that?

15 THE DEFENDANT: Yeah.

16 THE COURT: Do you have any questions before I accept  
17 your plea?

18 THE DEFENDANT: No.

19 THE COURT: Okay. And, again, this is what you want to do  
20 and you're entering into this plea freely and voluntarily?

21 THE DEFENDANT: Yeah.

22 THE COURT: Okay.

23 MR. SCHWARTZER: Your Honor, can I just ask you for two  
24 things. Number one, I think you might have talked about it, but I just  
25 want to make sure that for -- you know in case this goes to post-

1 conviction – that you canvassed Mr. White whether he's satisfied with  
2 the representations Mr. Sanft has made during this case.

3 And number two, I would ask if he has had any contact with  
4 Marland Dean since his plea has been withdrawn. Since, as you know,  
5 Your Honor, the basis for his withdrawal of plea was Marland Dean was  
6 threatening Mr. White and I want to make sure that doesn't -- I don't see  
7 a second motion regarding that after this.

8 THE COURT: Okay. So, no one has threatened or coerced  
9 you into entering into this plea, correct?

10 THE DEFENDANT: No.

11 THE COURT: No one in the Clark County Detention Center?

12 THE DEFENDANT: No.

13 THE COURT: No one in the Nevada Department of  
14 Corrections?

15 THE DEFENDANT: No.

16 THE COURT: No one on the planet earth?

17 THE DEFENDANT: No.

18 THE COURT: Okay, no one has threatened you, correct?

19 THE DEFENDANT: Yeah.

20 THE COURT: Including, has – have you spoken to Marland  
21 Dean?

22 THE DEFENDANT: No.

23 THE COURT: Okay. I know you indicated to me the other  
24 day your mom had spoken to him.

25 THE DEFENDANT: Yeah.

1 THE COURT: Were any threats communicated to you  
2 through your mom?

3 THE DEFENDANT: No.

4 THE COURT: Okay. And you are satisfied with your  
5 representation of Mr. Sanft?

6 THE DEFENDANT: Yeah.

7 THE COURT: Okay. And you're satisfied with how the trial  
8 has gone so far?

9 THE DEFENDANT: Yeah.

10 THE COURT: I guess with the exception that the victims  
11 testified. I mean I'm --

12 THE DEFENDANT: Yeah.

13 THE COURT: But, again, you think this is in your best  
14 interest?

15 THE DEFENDANT: Yeah.

16 THE COURT: And you want me to accept your plea?

17 THE DEFENDANT: Yeah.

18 MR. SCHWARTZER: Thank you, Your Honor.

19 THE COURT: Okay. At this time I am going to accept your  
20 plea; make a finding you've entered into it freely and voluntarily; that you  
21 understand the nature of the charges and the consequences of your  
22 plea. I think I already have Mr. White's PSI.

23 MR. SANFT: That is --

24 MR. SCHWARTZER: Not with all of the charges, Your Honor.

25 THE COURT: Oh, that's true. That's true.

1 MR. SCHWARTZER: So, we're going to ask --

2 THE COURT: It was a negotiated --

3 MR. SCHWARTZER: Right.

4 MR. SANFT: And, Your Honor, a couple of things just for the  
5 record as well. I have, during the course of my representation of Mr.  
6 White, always informed Mr. White that I believe that he is someone  
7 that's very smart and articulate. I've read his motions and he  
8 understands the law very well.

9 I believe that, at this particular point, that Mr. White is not  
10 under any type of influence of alcohol or drugs that would impair his  
11 thinking here today with regards to his decision to enter into this plea.  
12 And I don't believe as well that, based upon my communication with Mr.  
13 White, that there's been any type of threat made against him. I have not  
14 received that as well.

15 I just want to make sure that that's on the record because I  
16 know that was a concern the last time we were in court with regards to  
17 that.

18 THE COURT: Okay. And that's all true, correct?

19 THE DEFENDANT: Yeah.

20 THE COURT: You're not on any kind of medication?

21 THE DEFENDANT: Just the medication that I take, my meds,  
22 but they're not impacting my decision to plead.

23 THE COURT: What kind of medication are you on?

24 THE DEFENDANT: Psych meds.

25 THE COURT: Okay. And you don't think it's affecting your

1 ability to enter into this plea today?

2 THE DEFENDANT: No.

3 THE COURT: Okay. And, again, you want to stop the trial  
4 and you just want to accept responsibility. Is that correct?

5 THE DEFENDANT: Yeah.

6 THE COURT: Well, why did you decide to do it today?

7 THE DEFENDANT: I just -- I slept on it. After seeing the  
8 victims yesterday and then hearing what -- hearing from the victim.

9 THE COURT: So, after hearing the victims' testimony you just  
10 -- you'd heard enough?

11 THE DEFENDANT: Yeah.

12 THE COURT: Okay. Anything before I accept his plea?

13 MR. SCHWARTZER: No, Your Honor,

14 THE COURT: Okay. At this time, I'm going to accept your  
15 plea, make a finding you've entered into it freely and voluntarily; that you  
16 understand the nature of the charges and the consequences of your  
17 plea. The matter will be referred to Parole and Probation and it will be  
18 set for sentencing.

19 MR. SANFT: Your Honor is there any way that we, since  
20 there is a PSI and all we need to do is amend it to include what he's pled  
21 today --

22 THE COURT: Right.

23 MR. SANFT: -- is there any way we can set it earlier, like in  
24 two weeks or so? He's asked for this to be set as quickly as possible.

25 THE COURT: I can try.



1 MR. SCHWARTZER: We can try. I just -- because they go  
2 through their math at Parole and Probation, I'm not sure they can but, I  
3 mean --

4 THE COURT: Yeah. And I'll set it in two weeks.

5 MR. SANFT: Thank you, Your Honor, and if they're not ready  
6 then they're not ready and we can go from there, but.

7 THE COURT: Right. Okay. Mr. White, I'm happy -- I'll set it  
8 in two weeks. If they're ready we'll go forward, because I do have  
9 everything except the new charges. But if they're not, you know, I'll  
10 have to continue it. You understand that, right?

11 THE DEFENDANT: All right.

12 MR. SANFT: Thank you, Your Honor.

13 THE CLERK: Can we go three?

14 THE COURT: Can we go three?

15 MR. SCHWARTZER: That's probably better too because I  
16 would like to --

17 THE COURT: Okay. Yeah, go ahead.

18 THE CLERK: Okay.

19 MR. SCHWARTZER: -- get in contact with the victims  
20 whether they want to talk at sentencing or not.

21 THE CLERK: That's going to be March 14th at 8:30 a.m.

22 [Colloquy between the Court and the Clerk]

23 THE COURT: Okay. So, do you all want to sit in here while I  
24 excuse the jury panel?

25 MR. SCHWARTZER: I'll sit in here, Your Honor. I wouldn't

1 mind talking to the jury if they want to stick around.

2 THE COURT: Okay.

3 MR. SANFT: Yes, Your Honor. What was the date again for  
4 my client? I just want --

5 THE CLERK: Oh, that's going to be March 14<sup>th</sup> at 8:30.

6 MR. SANFT: Thank you.

7 MR. SCHARTZER: Your Honor, I'm just going to talk to my  
8 witnesses.

9 THE COURT: Okay.

10 MR. SCHWARTZER: And I'll be back.

11 THE COURT: All right. If you want to bring them in, Officer  
12 Hawkes --

13 THE MARSHAL: Yes, ma'am.

14 THE COURT: -- I'll let them go.

15 MR. SANFT: Do you want him left here, Your Honor?

16 THE COURT: No.

17 MR. SANFT: No. He can go.

18 THE COURT: Mr. White can go.

19 MR. SANFT: Okay.

20 [Pause in the proceeding]

21 THE MARSHAL: All rise for the entering jury.

22 [In the presence of the jury]

23 THE COURT: Okay. The record will reflect the presence of  
24 the jury panel. Thank you very much for your patience this morning. I  
25 don't ever like to have a jury panel waiting and I'm always grateful when

1 everybody is so patient and courteous. So, thank you very much.

2 We did do some things outside of your presence and the case  
3 has been resolved. Mr. White has entered into a guilty plea to the  
4 Amended Indictment and so, therefore, we don't need to proceed any  
5 further. So, I'm going to discharge you as jurors.

6 Again, I apologize for the wait but I do, again, appreciate your  
7 courtesy and willingness to be here. I do allow both sides to speak to  
8 the jury panel; but only if you want to.

9 I think it's good on both sides. All of these attorneys here try  
10 a lot of cases and it's always good for them to hear from a jury panel;  
11 what you thought, what you liked, you didn't like or anything that you  
12 want to share with them.

13 And, so I am going to give you that opportunity. However, I  
14 just want to make sure you understand. Although you can talk about the  
15 case now, you are under no obligation to discuss the case with anyone.

16 You are free to discuss it but you don't have to. I do -- again, I  
17 know you've been here since 10:30 this morning; and it probably was  
18 hard for everyone to get here with all this wonderful weather. So, I do  
19 appreciate that, but I am going to discharge you from --

20 Where do you -- do you want them to go out in the hall? Where  
21 do --

22 MR. SCHWARTZER: I can --

23 THE MARSHAL: Yeah. They can do it right here.

24 MR. SCHWARTZER: I can do it right here if you want.

25 THE COURT: Okay. Yeah, I don't mind. I am going to

1 discharge you as jurors. The attorneys are here. You can chat with  
2 them if you want. You are free to go and Officer Hawkes will give you  
3 more information on how to get paid.

4 But, again, I am very grateful for your willingness to be here.  
5 Thank you very much and you are discharged as jurors. And then I think  
6 we'll just leave and let you all chat it up.

7 [Hearing concluded at 12:04 p.m.]

8 \* \* \* \* \*

9 ATTEST: I do hereby certify that I have truly and correctly transcribed the  
10 audio/video proceedings in the above-entitled case to the best of my ability.

11



12

Rebecca Foster  
Independent Transcriber

13

14

ANYTIME TRANSCRIPTS  
4123 N. Stampede Rd.  
Kingman, AZ 86401

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(702) 327-1664 / (928) 529-3730

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1 **MWPL**  
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8 Terry.jackson.esq@gmail.com  
9 *Counsel for Toney A. White*

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IN THE EIGHTH JUDICIAL DISTRICT COURT  
CLARK COUNTY, NEVADA

THE STATE OF NEVADA, )  
 )  
Plaintiff, )  
 )  
v. )  
 )  
Toney A. White, )  
#1214172, )  
 )  
Defendant. )

District Case No.: C-16-313216-2

Dept.: XII

**HEARING REQUESTED**

**MOTION TO WITHDRAW PLEA OF GUILTY**

Comes now the Defendant, TONEY A. WHITE, by and through counsel, TERRENCE M. JACKSON, ESQUIRE, and moves this court to enter an Order withdrawing his plea of guilty on the ground it was involuntary and unintelligently given. Defendant was not competent to enter the plea because of his medical condition at the time of the plea.

This Motion is based upon the prior pleadings including the prior Motion to Withdraw Plea dated September 5, 2018, the accompanying Affidavit of Counsel and the attached Points and Authorities including Defendant's Exhibits A, B and C, and such further facts and Supplementary Exhibits as will come before the Court at an Evidentiary Hearing of this Motion.

Respectfully submitted this 26th day of July, 2019. /s/ Terrence M. Jackson

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Terry.jackson.esq@gmail.com  
*Counsel for Toney A. White*

1 **POINTS AND AUTHORITIES**

2 **FACTUAL STATEMENT**

3  
4 Defendant originally pled guilty to a negotiated plea on October 19, 2017. On January 9,  
5 2018, Defendant filed a Motion to Withdraw his Plea of Guilt and moved for appointment of new  
6 counsel or to represent himself *pro per*. The Court denied his *pro per* request for *pro per*  
7 representation, however the Court granted Defendant's request for new counsel. After many hearings  
8 the Court granted the Defendant withdrawal of his first plea of guilty and reset the trial on February  
9 19, 2019.

10 The trial began on February 19, 2019, however the Defendant entered a plea of guilty mid-  
11 trial on February 20, 2019. This plea of guilty was invalid as it was involuntary because it was made  
12 while the Defendant was not competent and not able to understand fully all of his constitutional  
13 rights. An evidentiary hearing will clearly establish that a change in the Defendant's daily medicine  
14 during trial, provided to him by the Clark County Detention Center, adversely effected his  
15 competency during the plea (See, Exhibit A, B and C) so he could not therefore intelligently  
16 understand his rights and his plea was involuntary through no fault of his own.

17 **I. A GUILTY PLEA IS INVALID IF MADE WHEN THE DEFENDANT IS**  
18 **MENTALLY INCOMPETENT.**

19 Any guilty plea must be a knowing, voluntary and intelligent waiver of the defendant's Sixth  
20 Amendment right to trial. *Boykin v. Alabama*, 395 U. S. 239 (1969) It is respectfully submitted that  
21 the Defendant, Toney A. White, did not have the mental capacity to fully understand his rights and  
22 did not know what he was facing when he pled guilty, he could not enter a valid plea. *See, Meyer*  
23 *v. State*, 95 Nev. 885 (1979)

24 When a person is physically or psychologically incapacitated, there is always serious doubt  
25 about his ability to enter any plea . An evidentiary will show that in this case the Defendant was  
26 being prescribed heavy anti-psychotic medication by the jail while he was incarcerated. Defendant  
27 alleged a long history of psychosis since his youth in his *pro per* Petition (See *pro per* Petition, pg.  
28 4). His medical records show that he also suffers seizures from a motor vehicle accident in 2015.

1 in 2015. (Exhibit B, pg. 11 of 105) Exhibit B also notes he had a history of a right frontal craniotomy  
2 and subdural hematoma with evacuation as well as an unspecified psychiatric disorder, possibly  
3 schizoaffective disorder. (Exhibit B, pg. 12 of 105)

4 Just prior to the guilty plea, for whatever reason, the Defendant's necessary medications were  
5 suspended and this greatly affected his ability to fully understand his rights. Consequently when he  
6 entered his plea it was not a knowing and intelligent plea.

7 **II. THE MERE CONCLUSORY RESPONSES DEFENDANT MADE DURING THE**  
8 **PLEA ALLOCATION DO NOT ESTABLISH DEFENDANT WAS COMPETENT TO**  
9 **ENTER A VOLUNTARY PLEA OF GUILTY TO THE CHARGE.**

10 At the second plea hearing on February 21, 2019, Defendant White made the standard  
11 perfunctory conclusory affirmation of guilt as well as the affirmations that he understood all his  
12 rights. It is respectfully submitted a review of the transcript of the second plea hearing will not  
13 however clearly establish that Defendant fully understood his rights. It is respectfully submitted that  
14 an evidentiary hearing will definitely establish Defendant's medical condition at the time of his plea  
15 actually precluded his ability to voluntarily plead guilty.

16 Consider *Wilkins v. Bowersox*, 145 F.3d 1006 (8th Cir.1998), a case in which the court held  
17 that the defendant's guilty plea and waiver of presenting mitigating evidence was not knowing,  
18 voluntary and intelligent even despite the conclusory affirmations in the plea canvas that the  
19 defendant fully understood his rights.

20 In considering the facts of this case, the court should find a strong possibility that in this case,  
21 and in the *Wilkins* case, the mere fact that the defendant, an unsophisticated defendant was able to  
22 correctly answer the simple questions of the guilty plea canvas, was not enough to establish he had  
23 a full understanding of what rights he was giving up or what duties his attorney may have failed to  
24 perform. His attorney may easily have instructed his client how to answer every question of the court  
25 simply responding yes to every question. Counsel for Defendant may not even have known his client  
26 may be incompetent.

27 The court must look at the totality of circumstances in this case to determine whether the  
28 Defendant's plea in this case was actually a knowing, voluntary and intelligent waiver of his rights.

1 See, *State v. Freese*, 116 Nev. 1097, 13 P.3d 442 (2000), *McConnell v. State*, 125 Nev. 243, 212 P.3d  
2 307 (2009). Defendant has alleged he felt coerced by another individual who entered a plea. (See *pro*  
3 *per Post Conviction Petition* pg. 4)

4 *Meyer v. State*, 95 Nev. 888, 603 P.2d 1066 (1979), requires the withdrawal of a guilty plea  
5 to prevent a "manifest injustice." It is respectfully submitted for a guilty plea to be valid, it must have  
6 been entered under circumstances that were fundamentally fair. *Means v. State*, 120 Nev. 1001, 103  
7 P.3d 25 (2004). The totality of facts and circumstances of the Defendant's plea of guilt in this case  
8 require that he be allowed to withdraw his plea because it was fundamentally unfair and manifest  
9 injustice requires it be withdrawn.

### 10 CONCLUSION

11 Although it may seem strange that the Defendant seeks to withdraw his guilty plea for a  
12 second time, the facts clearly support his Second Motion. First, it is illogical that the Defendant  
13 would suddenly plead guilty to all counts. That plea yielded a much worse sentencing result than had  
14 previously been offered. Secondly, jail records established Mr. White's medication input was altered  
15 during trial. Based on his prior medical history it is only logical this change had a substantial  
16 cognitive impact on him. Third, the State will not be prejudiced by the Defendant withdrawing his  
17 plea. Although he had been sentenced and has even begun the appellate process, Defendant will file  
18 a Motion to Withdraw his Appeal and stay the appeal pending a decision on this Motion. This case  
19 is not so old that the State will be gravely prejudiced by having a delayed trial. Fourthly, the totality  
20 of circumstances and 'manifest injustice' compel withdrawal of the Defendant's plea.

21 Wherefore, for the above stated reasons, Defendant requests his Motion to Withdraw Plea  
22 of Guilty be granted.

23 DATED this 26th day of July, 2019.

Respectfully submitted,

24 /s/ Terrence M. Jackson  
25 TERRENCE M. JACKSON, ESQ.  
26 Nevada Bar No. 00854  
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*Counsel for Toney A. White*



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CERTIFICATE OF SERVICE

I hereby certify I am an assistant to Terrence M. Jackson, Esquire, a person competent to serve papers and not a party to the above-entitled action and on the 26th day of July, 2019, I served a copy of the foregoing: Motion to Withdraw Plea of Guilty as follows:

[X] To Steven B. Wolfson, Clark County District Attorney at  
steven.wolfson@clarkcountyda.com

and to:

[X] To Defendant, Toney A. White, NDOC # 1214172, at High Desert State Prison, via first-class mail, and

I further certify that pursuant to Rule 9(b) of the Nevada Electronic Filing and Conversion Rules, a copy of this Notice of Hearing was electronically served to all registered users on this case in the Eighth Judicial District Court Electronic Filing System.

By: /s/ Ila Wills  
Assistant to T. M. Jackson, Esq.

1 IN THE EIGHTH JUDICIAL DISTRICT COURT  
2 CLARK COUNTY, NEVADA  
3

4 THE STATE OF NEVADA, )  
5 Plaintiff, )  
6 v. )  
7 Toney A. White, )  
8 #1214172, )  
9 Defendant. )

District Case No.: C-16-313216-2

NSC Case No.: 78483

Dept.: XII

10 **NOTICE OF HEARING**

11 Please be advised that the Defendant's Motion to Withdraw Plea of Guilty in the above-  
12 entitled matter is set for hearing as follows:

13 **Date:**

14 **Time:**

15 **Location:** RJC Courtroom 14D  
16 Regional Justice Center  
200 Lewis Avenue  
Las Vegas, Nevada 89101

17 **Note:** Under NEFCR 9(d), if a party is not receiving electronic service through the Eighth Judicial  
18 District Court Electronic Filing System, the movant requesting a hearing must serve this notice on  
19 the party by traditional means.

20 By: /s/ Ila Wills  
21 Assistant to T. M. Jackson, Esq.

22 **CERTIFICATE OF SERVICE**

23 I hereby certify that pursuant to Rule 9(b) of the Nevada Electronic Filing and Conversion  
24 Rules, a copy of this Notice of Hearing was electronically served to all registered users on this case  
25 in the Eighth Judicial District Court Electronic Filing System.

26 By: /s/ Ila Wills  
27 Assistant to T. M. Jackson, Esq.  
28

**AFFIDAVIT OF TERRENCE M. JACKSON**

STATE OF NEVADA        )  
                                  ):ss  
COUNTY OF CLARK        )

I, TERRENCE M. JACKSON, the Affiant, being first duly sworn, deposes and states he is an attorney in good standing, licensed to practice law in the State of Nevada;

1. Affiant was appointed to represent Toney Anthony White in Eighth Judicial District Court, Clark County, Nevada in May of 2019, for post-conviction relief;

2. Affiant, as counsel for Toney White, has reviewed all prior pleadings and court records;

3. As the issue of the validity of Defendant White's plea had been raised before, Affiant discussed that matter with Defendant soon after being appointed his attorney in this case;

4. Toney White advised Affiant that his second plea of guilty was in fact not a valid, voluntary and intelligent plea because he was not mentally competent to enter the plea when it was taken;

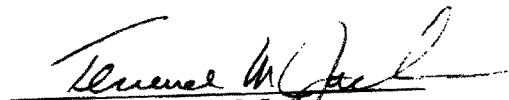
5. Mr. White explained to Affiant he had been regularly receiving anti-psychotic and seizure medication while in custody. Defendant stated that medication was suspended when his trial commenced on February 19, 2019. He then stated because of the suspension of his medication, he was not fully aware of the legal facts and circumstances of his case when he pled guilty on February 21, 2019;

6. At Affiant's request, Toney A. White sent a letter to Affiant detailing his past medical history (Exhibit A) as well as some of his medical records (Exhibit B);

7. Affiant has reviewed Defendant's medical records and believes because of his past medical history his regular intake of prescription medicines was critical to him having a sufficient understanding of the legal process to enter a valid plea.

Further Affiant sayeth not.

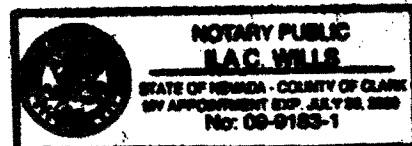
DATED this 26<sup>TH</sup> day of July, 2019.

  
Terrence M. Jackson

SUBSCRIBED and SWORN to before me this 26<sup>TH</sup> day of July, 2019.



NOTARY PUBLIC  
In and For County of Clark  
State of Nevada



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EIGHTH JUDICIAL DISTRICT COURT

CLARK COUNTY, NEVADA

CASE NO.: C-16-313216-2

DEPT. XII

**EXHIBIT 'A'**

Defendant's Letter to Counsel about Medical Condition, June 2019

MR. JACKSON

JUNE , 2019

GREETINGS. BY NOW I HOPE YOU HAVE RECEIVED MY JUNE 17, 2019 LETTER WITH THE HIPPA ENCLOSURES. PER YOUR INSTRUCTIONS I HAVE BEEN PONDERING ADDITIONAL POINTERS IN MY CASE AND POTENTIAL APPEAL ISSUES. THE FIRST IS THE FACT THAT I WAS HABITUALLIZED. I DO RECALL PLEDGING GUILTY TO ALL COUNTS OF THE CRIMINAL COMPLAINT. I DONT RECALL PLEDGING TO HABITUAL OFFENDER ALLEGATIONS NOR DID THE D.A. PROVE THEM WITH JOC'S OR ABSTRACTS OF JUDGMENTS FROM THE PRIOR CASES. IF I'M NOT MISTAKEN THE COURT JUST PIGGY-BACKED IT'S FINDING OF HABITUAL ON MY PLEA TO THE CHARGES OF THE CRIMINAL COMPLAINT WITHOUT HOLDING THE PROSECUTION TO IT'S BURDEN OF PROOF.

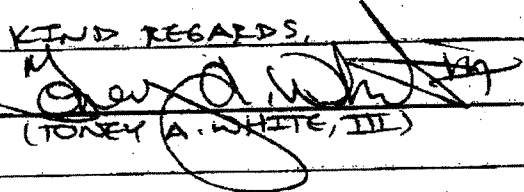
A SECOND CASE POTENTIAL MAY LIE IN RECENT RESEARCH I HAVE BEEN FOLLOWING ON THE CAUSES, EFFECTS AND CONSEQUENCES OF TRAUMATIC BRAIN INJURY (TBI) AND ITS RELATIONSHIP TO OFFENDERS COMMITTING CRIMES. I'M ENCLOSING 2 RECENT ARTICLES FOR YOUR REVIEW AND DISPOSITION. PLEASE COPY THEM AND RETURN THE ORIGINALS OR COPIES TO ME. AS YOU MAY RECALL ON SEPTEMBER 03, 2015 I WAS INVOLVED IN A SERIOUS MOTOR VEHICLE ACCIDENT (MVA) IN WHICH I WAS EJECTED FROM A MOPED AND KNOCKED UNCONSCIOUS AFTER BEING HIT BY A DRUNK DRIVER. (REPORT ENCLOSED). PRIOR TO THE MVA I HAD A HISTORY OF "RIGHT FRONTAL CRANIOTOMY AND SUBDURAL HEMATOMA EVACUATION." (SEE ENCLOSED MEDICAL REPORTS.)

PAGE 1

FOLLOWING THE MVA AND WHILE HOUSED AT CCDC I CONTINUED TO HAVE SEIZURES DUE TO MY EFFECTIVE SEIZURE MEDICATIONS BEING DISCONTINUED. PLEASE ADVISE ME IF YOU NEED ANY FURTHER INFORMATION REGARDING MY TBI.

LASTLY, AS A RESULT OF MY ARREST MY VEHICLE, COMPUTER AND OTHER PROPERTIES WERE TAKEN INTO EVIDENCE. THE ARRESTING AGENCY HAS REFUSED TO RELEASE THE PROPERTY UNTIL I OBTAIN A COURT ORDER DEMONSTRATING THE FINALITY OF THE CASE. THE AGENCY HAS INITIATED NO FORFEITURE ACTION AND CONTINUES TO RETAIN MY PROPERTY REFUSING TO RELEASE IT WITHOUT A COURT ORDER. OPPOSED TO TAKING CIVIL ACTION UNDER THE 5TH AMENDMENT TAKINGS CLAUSE, I SEEK THAT YOU MOTION THE COURT FOR THE RELEASE OF THE PROPERTY TO MY MOM PATRICIA BENNETT AND BROTHER TOSSIE BENNETT AS SOON AS POSSIBLE AS MY MOTHER IS DISABLED AND IS IN DIRE NEED OF MY VEHICLE.

THANKS FOR YOUR TIME AND I WILL REMAIN IN CLOSE CONTACT.

KIND REGARDS,  
BY:   
(TONEY A. WHITE, III)

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EIGHTH JUDICIAL DISTRICT COURT

CLARK COUNTY, NEVADA

CASE NO.: C-16-313216-2

DEPT. XII

**EXHIBIT 'B'**

Defendant's Medical Records



**St Rose Dominican Hospital-Siena Campus**

3001 St Rose Parkway

Henderson, NV. 89052

Facility Phone #: 702-616-5000

Name: WHITE, TONEY A

MRN: 10067855

Acct #: 62060688

Pt loc: SRS ER2

DOB: 7/19/1972 Age: 43 years Sex: M

Admit Date: 9/7/2015

Disch Date: 9/7/2015

Physician: Allgower, Lance DO

PCP: SRDH, No PCP, Not given

**Emergency Documentation - MD**

**Genitourinary symptoms:** No dysuria,

**Musculoskeletal symptoms:** Back pain.

**Neurologic symptoms:** Numbness, no headache, no tingling, no weakness.

**Additional review of systems information:** All other systems reviewed and otherwise negative. Other than the above noted.

**Health Status**

**Allergies:**

Allergic Reactions (Selected)

NKA.

**Medications:** Include documented meds (Selected)

Prescriptions

Prescribed

acetaminophen-oxyCODONE 325-10 mg: 1 Tab, PO, q4hr, 30 Tab, PRN: Pain

divalproex sodium 250 mg oral enteric coated tablet: 2 Tab, PO, TID, 180 Tab

Documented Medications

Documented

Effexor XR Cap: 150 mg, PO, qDay, 90 Cap

Flomax: 0.4 mg, PO, Daily

Thorazine: 200 mg, PO, qHS, 60 Tab

acetaminophen-oxyCODONE 325-10 mg: 1 - 2 Tab, PO, q4hr, PRN: Pain

pneumococcal 23-valent vaccine: IM, oncall.

**Past Medical/ Family/ Social History**

**Medical history:**

All Problems

Past medical history unknown / 1776597015 / Confirmed

This Problem was added as a result of Nursing History Documentation..

**Surgical history:**

No active procedure history items have been selected or recorded..

**Social history:** Alcohol use: Denies, Tobacco use: Denies, Drug use: Denies.

**Physical Examination**

**Vital Signs**

**Vital-Signs**

09/07/2015 13:15

Temperature PO

36.7 deg C

Heart Rate

95 bpm

NIBP Systolic

139 mm Hg

NIBP Diastolic

71 mm Hg

Resp Rate (Monitor)

16 Breaths/Min

SPO2

97 %

Oxygen Amount

Room air





St Rose Dominican Hospital-Siena Campus  
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Henderson, NV. 89052  
Facility Phone #: 702-616-5000

Name: WHITE, TONEY A  
MRN: 10067855  
Acct #: 62060686  
Pt loc: SRS ER2

DOB: 7/19/1972 Age: 43 years Sex: M  
Admit Date: 9/7/2015  
Disch Date: 9/7/2015  
Physician: Allgower, Lance DO  
PCP: SRDH, No PCP, Not given

### Emergency Documentation - MD

Per nurse's notes.

**General:** Alert.

**Skin:** Warm, dry, no rash.

**Head:** Normocephalic, atraumatic.

**Neck:** Supple.

**Eye:** Extraocular movements are intact, normal conjunctiva, vision grossly normal.

**Ears, nose, mouth and throat:** Oral mucosa moist.

**Cardiovascular:** Regular rate and rhythm, No murmur, Normal peripheral perfusion, No edema.

**Respiratory:** Lungs are clear to auscultation, respirations are non-labored, breath sounds are equal, Symmetrical chest wall expansion.

**Chest wall:** No tenderness.

**Back:** Nontender, Normal range of motion, Paralumbar and paracervical soft tissue tenderness. No midline tenderness.

**Musculoskeletal:** Normal ROM, normal strength, no tenderness, no swelling, no deformity.

**Gastrointestinal:** Soft, Nontender, Non distended, No organomegaly.

**Neurological:** Alert and oriented to person, place, time, and situation, No focal neurological deficit observed, CN II-XII intact, normal sensory observed, normal motor observed, normal speech observed, normal coordination observed.

**Psychiatric:** Within normal limits, cooperative, appropriate mood & affect.

### Medical Decision Making

**Differential Diagnosis:** Back pain, disc herniation, contusion.

**Rationale:** PT PRESENTS COMPLAINING OF CONTINUED PAIN. PT WAS SEEN HERE S/P MVA AND WAS FOUND TO HAVE A 5TH METACARPAL FX WHICH WAS SPLINTED. PT TOOK OFF THE SPLINT AT HOME AND HAS NOT FOLLOWED UP WITH ORTHO STATING HE HAS NO TRANSPORTATION AND NO MONEY. PT WAS OUTSIDE SMOKING WHEN HE WAS NEEDED FOR RE-EVALUATION AND DISPO. PT'S PAIN WAS TREATED AND HIS HAND RESPLINTED. PT DCED HOME WITH MEDS AND INFORMED HE MUST FU WITH ORTHO. PT HAD NO NEW INJURY AND DID NOT DISPLAY SIGNS OF CORD SYNDROME..

**Documents reviewed:** Emergency department nurses' notes, emergency department records (Patient was last seen in ED on 9/3/15. Diagnosis

Head injury

Abrasions of multiple sites

Metacarpal fx).

**Orders** Launch Order Profile (Selected)

#### Inpatient Orders

##### Ordered

Percocet-325/10: 1 Tab, PO, q4hr, PRN: Pain

##### Completed

Motrin: 800 mg, PO, x1

Valium: 5 mg, PO, x1

Zofran ODT: 4 mg, PO, x1

prednisONE: 60 mg, PO, x1.

### Reexamination/ Reevaluation

Time: 09/07/15 15:30:00 .

Notes: Discussed results with the patient. PT comfortable with discharge home and f/u as an outpatient. .

Date/Time Printed: 9/16/2015 10:21 PDT

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St Rose Dominican Hospital-Siena Campus  
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Physician: Allgower, Lance DO  
PCP: SRDH, No PCP, Not given

### Progress Notes

DOCUMENT NAME:  
RECEIVED DATE/TIME:  
RESULT STATUS:  
PERFORM INFORMATION:  
SIGN INFORMATION:

Physician Note  
7/16/2015 13:52 PDT  
Auth (Verified)  
Selco, Scott L MD (7/16/2015 13:53 PDT)  
Selco, Scott L MD (7/16/2015 14:06 PDT)

### COURSE / EVENTS

- + REPORT REC'D FROM RN, Pt
- + VITALS | LABS | MAR PERSONALLY REVIEWED
- + c/o LOW BACK PAIN
- + NO SZs
- + TOL KEPPRA
- + STILL w/ EVENT AMNESIA

### EXAMINATION

#### Vital Signs

	Low	High	Last
Temp C	36.0 (07/15 20:00)	37.1 (07/16 05:00)	36.8 (07/16 08:00)
HR	65 (07/15 23:00)	84 (07/15 15:54)	79 (07/16 08:00)
Resp Rate	14 (07/16 05:00)	23 (07/16 08:00)	23 (07/16 08:00)
NIBP SYS	94	132	125
Concurrent DIA	60	72	81
	(07/15 20:00)	(07/16 00:00)	(07/16 08:00)
NIBP DIA	60	81	81
Concurrent SYS	94	125	125
	(07/15 20:00)	(07/16 08:00)	(07/16 08:00)
NIBP Mean	76 (07/16 03:00)	91 (07/16 08:00)	91 (07/16 08:00)

#### Remodynamics

#### Vent/Oxygenation

	Low	High	Last
SaO2	96 (07/16 05:00)	100 (07/16 04:00)	99 (07/16 08:00)
L/min	0.0 (07/16 08:00)	0.0 (07/15 15:54)	0.0 (07/16 08:00)

NAD  
CALM | COMP  
RRR S1 S2 | LUNGS CTA  
NO JVD  
ABD SOFT NONTENDER BS PRESENT  
NO EXTREMITY EDEMA  
RADIAL AND PEDAL ARTERY PULSES 2/4  
Date/Time Printed: 9/16/2015 10:21 PDT



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### Progress Notes

#### NEUROLOGIC

A/A | O x 3

#### INTERACTIVE

FLUENT NORMAL SPEECH WITH INTACT GROSS COMPREHENSION

FERRL

EOMS NL

MAES AG

GAIT - DEFERRED

#### DIAGNOSTIC TESTING

##### Chemistry

Na	139.00 (07/16 04:12)
K	3.50 (07/16 04:12)
Cl	111.00 (07/16 04:12)
CO2	21.00 (07/16 04:12)
Gluc	93.00 (07/16 04:12)
T Billi	0.6 (07/16 04:12)
Bun	8.00 (07/16 04:12)
Cr	0.76 (07/16 04:12)
Ca	8.00 (07/16 04:12)
Phos	2.70 (07/16 04:12)
Mg	2.30 (07/16 04:12)
Anion Ga	7.00 (07/16 04:12)

##### Hematology

WBC	11.50 (07/16 04:12)
Hgb	12.20 (07/16 04:12)
Hct	37.20 (07/16 04:12)
Plt	290.00 (07/16 04:12)

##### Coagulation

##### Enzymes

Alkphos	88.00 (07/16 04:12)
ALT	25.00 (07/16 04:12)
Trop. I.	0.14 (07/16 09:12)

##### Proteins

Alb	2.70 (07/16 04:12)
-----	--------------------

EEG - 7/15/15 -  
NORMAL

#### IMPRESSION:

41-year-old male:

1. First ever seizure.

Date/Time Printed: 9/16/2015 10:21 PDT

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Pt loc: SRS ER2

DOB: 7/19/1972 Age: 43 years Sex: M

Admit Date: 9/7/2015

Disch Date: 9/7/2015

Physician: Allgower, Lance DO

PCP: SRDH, No PCP, Not given

**Progress Notes**

- 2 History of right frontal craniotomy and subdural hematoma evacuation.
3. Psych disorder, not otherwise specified; possibly schizoaffective disorder.
  4. Recreational marijuana user.
  5. Tobacco dependence.
  6. Drinker.
  7. Benign prostatic hypertrophy.
  8. Leukocytosis secondary to leukemoid reaction from seizure - RESOLVED.
  9. Mild acute kidney injury versus chronic kidney disease - RESOLVED.
  10. Lactic acidemia - RESOLVED.

**PLAN:**

1. Downgrade to MED-SURG.
2. Neuro checks q.4 hours.
3. Banana bag daily.
4. Mainline IV fluids.
5. Start home medications.
6. Depakote 500 mg p.o. t.i.d.
7. Monitor for signs of alcohol withdrawal.
8. Ativan 1 mg IV q.3 hours p.r.n. for seizures.
9. Seizure precautions.
10. Discuss with family when available.
11. D/C PLANNING.

**TIME**

35 MINUTES

I D/W RN TO COORDINATE CARE

ALL OF THE ABOVE WAS DISCUSSED WITH THE PATIENT.

DISCUSSED WERE:

- TEST RESULTS.
- CLINICAL SYNTHESIS.
- PROGNOSIS.
- PLAN OF CARE.

PATIENT HAD A CHANCE TO ASK QUESTIONS AND HAVE QUESTIONS ANSWERED SATISFACTORILY.

*Electronically Signed By:*

Selco, Scott L MD

On 07/16/15 14:06

*Co Signature By:*

Modified Signature By:

Selco, Scott L MD

On 07/16/15 14:06

Date/Time Printed: 9/16/2015 10:21 PDT

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**St Rose Dominican Hospital-Siena Campus**

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Physician: Allgower, Lance DO

PCP: SRDH, No PCP, Not given

***Progress Notes***

Event Number: 150903000026		<b>STATE OF NEVADA TRAFFIC ACCIDENT REPORT SCENE INFORMATION SHEET</b> <small>Revised 1/14/04</small>				Accident Number: LVM150903000026			
Code Revision: 01/01/2011						<input type="checkbox"/> 1) Property <input checked="" type="checkbox"/> 2) Injury <input type="checkbox"/> 3) Fatal			
<input checked="" type="checkbox"/> 1) Urban <input type="checkbox"/> 2) Rural	<input type="checkbox"/> 1) Emergency Use <input type="checkbox"/> 2) Office Report	<input type="checkbox"/> 1) Preliminary Report <input checked="" type="checkbox"/> 2) Initial Report	<input type="checkbox"/> 3) Resubmission <input type="checkbox"/> 4) Supplement Report	<input checked="" type="checkbox"/> 1) Hit and Run <input type="checkbox"/> 2) Private Property	Agency Name: LAS VEGAS METRO PD				
Collision Date 9 / 3 / 2015	Time 0007	Day THU	Beat / Sector 13	<input checked="" type="checkbox"/> 1) County CLARK	<input type="checkbox"/> 2) City	Surface <input type="checkbox"/> 1) Asphalt <input type="checkbox"/> 2) Concrete <input type="checkbox"/> 3) Gravel <input type="checkbox"/> 4) Dirt <input type="checkbox"/> 5) Other	Intersection <input type="checkbox"/> 1) Four Way <input type="checkbox"/> 2) T-Intersection <input type="checkbox"/> 3) I <input type="checkbox"/> 4) Y <input type="checkbox"/> 5) Roundabout <input type="checkbox"/> 6) Other	Paddle Markers <input checked="" type="checkbox"/> 1) None <input type="checkbox"/> 2) Left Side <input type="checkbox"/> 3) Right Side <input type="checkbox"/> 4) Both Sides <input type="checkbox"/> 5) Unknown	
Mile Marker	# Vehicles 2	# Non Motorists 0	# Occupants 3	# Fatalities 0	# Injured 2	# Restrained 0			
Occurred On: (Highway # or Street Name) <input type="checkbox"/> 1) Parking Lot    S LAS VEGAS BLVD								Access Control <input checked="" type="checkbox"/> 1) None <input type="checkbox"/> 2) Full <input type="checkbox"/> 3) Partial	
<input type="checkbox"/> 1) At Intersection With: <input checked="" type="checkbox"/> 2) Or 331 <input checked="" type="checkbox"/> 3) Feet <input type="checkbox"/> 4) Miles <input type="checkbox"/> 5) Approximate NORTH Of (Cross Street) E RICHMAR AVE									
<b>Roadway Character</b> <input type="checkbox"/> 1) Curve & Grade <input type="checkbox"/> 2) Curve & Hillcrest <input type="checkbox"/> 3) Curve & Level <input type="checkbox"/> 4) Straight & Grade <input type="checkbox"/> 5) Straight & Hillcrest <input checked="" type="checkbox"/> 6) Straight & Level <input type="checkbox"/> 7) Unknown <input type="checkbox"/> 8) Other		<b>Roadway Conditions</b> <input checked="" type="checkbox"/> 1) Dry <input type="checkbox"/> 7) Slush <input type="checkbox"/> 2) Ice <input type="checkbox"/> 8) Standing Water <input type="checkbox"/> 3) Wet <input type="checkbox"/> 9) Moving Water <input type="checkbox"/> 4) Snow <input type="checkbox"/> 10) Unknown <input type="checkbox"/> 5) Sand / Mud / Oil / Dirt / Gravel <input type="checkbox"/> 6) Other		<b>Total Thru Lanes</b> Main Road <input type="checkbox"/> 1) One <input type="checkbox"/> 2) Two <input type="checkbox"/> 3) Three <input type="checkbox"/> 4) Four <input type="checkbox"/> 5) Five <input checked="" type="checkbox"/> 6) > 5 Total All Lanes: 6		<b>Average Roadway Widths</b> Travel Lane: 12 Ft Storage / Turn Lane: 12 Ft Median: 3 Ft Paved Shoulder Inside:    Outside:		<b>Roadway Grade</b> <input type="checkbox"/> 1) Not Determined <input checked="" type="checkbox"/> 2) Relatively Level Roadway <input type="checkbox"/> 3) Up Slope (+) <input type="checkbox"/> 4) Down Slope (-) Relative To V1 Grade: 0.0 %	
<b>Pavement Markings and Type</b> 1) Centerline, Broken Yellow    5) No Passing, Either Direction <input type="checkbox"/> 12) None 2) Centerline, Solid Yellow    7) Turn Arrow Symbols <input type="checkbox"/> 13) Unknown 3) Centerline, Double Yellow    8) Center Turn Lane Line 4) Lane Line, Broken White    9) Edge Line, Left, Yellow 1) Lane Line, Solid White    10) Edge Line, Right, White <input type="checkbox"/> 11) Other				<b>Highway Description</b> <input type="checkbox"/> 1) Two-Way, Not Divided <input checked="" type="checkbox"/> 2) Two-Way, Divided, Unpro. Median <input type="checkbox"/> 3) Two-Way, Divided, Median Barrier <input type="checkbox"/> 4) One-Way, Not Divided <input type="checkbox"/> 5) Unknown <input type="checkbox"/> 6) Off Road		<b>Weather Conditions</b> <input checked="" type="checkbox"/> 1) Clear <input type="checkbox"/> 7) Fog, Smog, Smoke, Ash <input type="checkbox"/> 2) Cloudy <input type="checkbox"/> 8) Severe Crosswinds <input type="checkbox"/> 3) Snow <input type="checkbox"/> 9) Sleet / Hail <input type="checkbox"/> 4) Rain <input type="checkbox"/> 10) Unknown <input type="checkbox"/> 5) Blowing Sand, Dirt, Silt, Snow <input type="checkbox"/> 6) Other			
<b>Light Conditions</b> <input type="checkbox"/> 1) Dark <input checked="" type="checkbox"/> 6) Dark - No Roadway Lighting <input type="checkbox"/> 2) Dawn <input type="checkbox"/> 7) Dark - Spot Roadway Lighting <input type="checkbox"/> 3) Daylight <input type="checkbox"/> 8) Dark - Continuous Roadway Lighting <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 9) Dark - Unknown Roadway Lighting <input type="checkbox"/> 5) Other		<b>Vehicle Collision Type</b> <input type="checkbox"/> 1) Head On <input type="checkbox"/> 5) Rear to Rear <input checked="" type="checkbox"/> 2) Rear End <input type="checkbox"/> 6) Sideswipe - Meeting <input type="checkbox"/> 3) Backing <input type="checkbox"/> 7) Sideswipe - Overtaking <input type="checkbox"/> 4) Angle <input type="checkbox"/> 8) Non - Collision <input type="checkbox"/> 9) Unknown		<b>Location of First Event</b> <input checked="" type="checkbox"/> 1) Travel Lane 3 <input type="checkbox"/> 6) Outside Shoulder <input type="checkbox"/> 11) Ramp <input type="checkbox"/> 2) Turn Lane <input type="checkbox"/> 7) Intersection <input type="checkbox"/> 12) Unknown <input type="checkbox"/> 3) Gore <input type="checkbox"/> 8) Private Property <input type="checkbox"/> 4) Median <input type="checkbox"/> 9) Roadside <input type="checkbox"/> 5) Inside Shoulder <input type="checkbox"/> 10) Other					
<b>Highway / Environment Factors</b> <input checked="" type="checkbox"/> 1) None <input type="checkbox"/> 7) Shoulders <input type="checkbox"/> 11) Ruts, Holes, Bumps <input type="checkbox"/> 2) Weather <input type="checkbox"/> 8) Road Obstruction <input type="checkbox"/> 12) Active Work Zone <input type="checkbox"/> 3) Debris <input type="checkbox"/> 9) Worn Traffic Surface <input type="checkbox"/> 13) Inactive Work Zone <input type="checkbox"/> 4) Glass <input type="checkbox"/> 10) Wet, Icy, Snow, Slush <input type="checkbox"/> 14) Animal in Roadway <input type="checkbox"/> 5) Other Highway <input type="checkbox"/> 15) Unknown <input type="checkbox"/> 6) Other Environmental				<b>Record is Regulated by Law. Secondary Dissemination of any kind is Prohibited and could subject the offender to Criminal and Civil Liability.</b> Owner's Name: _____ Owner's Address: (Street A) _____ NV _____ Date: 9/11/2015					
First Harmful Event    LAS VEGAS METRO POLICE DEPT.									
Code #: 214		Description: MOTOR VEHICLE IN TRANSPORT							
Description of Accident / Narrative V2 WAS TRAVELLING NORTHBOUND ON SOUTH LAS VEGAS BOULEVARD, IN THE RIGHT TRAVEL LANE OF 3, NORTH OF EAST RICHMAR AVENUE. V1 WAS TRAVELLING NORTHBOUND ON SOUTH LAS VEGAS BOULEVARD, IN THE RIGHT TRAVEL LANE OF 3, NORTH OF EAST RICHMAR AVENUE, APPROACHING THE REAR OF V2. AT 331 FEET NORTH OF EAST RICHMAR AVENUE, V1 FAILED TO USE TO DUE CARE UPON APPROACHING THE MUCH									
<input checked="" type="checkbox"/> 1) Continued On Back of Scene Information Sheet									
Investigation Complete <input type="checkbox"/> 1) Yes <input checked="" type="checkbox"/> 2) No	Photos Taken <input checked="" type="checkbox"/> 1) Yes <input type="checkbox"/> 2) No	Scene Diagram <input checked="" type="checkbox"/> 1) Yes <input type="checkbox"/> 2) No	Statements <input checked="" type="checkbox"/> 1) Yes <input type="checkbox"/> 2) No # 3	Date Notified 9 / 3 / 2015	Time Notified 0033	Arrival Date 9 / 3 / 2015	Arrival Time 0050		
Investigator(s) Quinn		ID Number 4377	Date 9 / 3 / 2015	Reviewed By Bret Theil		Date Reviewed 9 / 9 / 2015	Page 1 of 7		

**Scene Information**

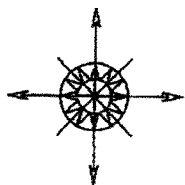
Event Number: 150903000026	STATE OF NEVADA TRAFFIC ACCIDENT REPORT SCENE INFORMATION SHEET Revised 1/14/04	Accident Number: LVM150903000026
		Agency Name: LAS VEGAS METRO PD

**Description of Accident / Narrative Continuation**

SLOWER MOVING V2, AND HIT V2 REAR WITH V1 FRONT. THAT COLLISION EJECTED BOTH OCCUPANTS OFF OF V2, AS V2 BECAME WEDGED UNDERNEATH THE FRONT OF V1. V1 FAILED TO STOP, RENDER AID, EXCHANGE INFORMATION, AND NOTIFY POLICE AS IT DROVE AWAY FROM THE SCENE, NORTHBOUND ON SOUTH LAS VEGAS BOULEVARD, DRAGGING V2 UNDERNEATH ITS FRONT END. THE DRAGGING LEFT GOUGE AND SCRATCH MARKS ON THE ROADWAY, WHICH TRAVELLED FROM THE AREA OF INITIAL CONTACT, INTO THE MIDDLE TRAVEL LANE AND BACK INTO THE RIGHT TRAVEL LANE, BEFORE EVENTUALLY TURNING RIGHT, EASTBOUND, ONTO EAST AGATE AVENUE AND FINALLY TURNING RIGHT, SOUTHBOUND, INTO THE PARK AVENUE CONDOMINIUM COMPLEX AT 83 EAST AGATE AVENUE. V1 THEN PARKED IN AN OPEN PARKING STALL, JUST TO THE SOUTHEAST OF THE FRONT ENTRANCE, FACING WEST, WITH V2 STILL STUCK UNDERNEATH THE FRONT END OF V1. THE DRIVER OF V1, THEN EXITED V1 AND FLED FROM THE SCENE. BOTH OCCUPANTS FROM V2 SUSTAINED SIGNIFICANT INJURIES AND WERE TRANSPORTED TO ST. ROSE SIENNA HOSPITAL, WHERE THEY WERE TREATED AND RELEASED. V1 APPEARED TO REMAIN DRIVABLE AND WAS SEALED AND IMPOUNDED AS EVIDENCE IN THE FELONY HIT AND RUN INCIDENT. V2 SUSTAINED SIGNIFICANT DAMAGE, WAS DISABLED, AND TOWED FOR SAFEKEEPING. THE AREA OF INITIAL CONTACT WAS 331 FEET NORTH OF THE NORTH EDGE OF RICHMAR AVENUE AND 12 FEET WEST OF THE EAST EDGE OF SOUTH LAS VEGAS BOULEVARD, AND WAS EVIDENCED BY GOUGE AND SCRATCH MARKS ON THE ROADWAY. THERE WERE NO PRE-IMPACT SKID MARKS ON THE ROADWAY.

THIS INCIDENT IS BEING FORWARDED TO THE HIT AND RUN DETAIL FOR FOLLOW-UP.

09/09/15 -- DRIVER (CLARK, RUSSELL NV/OLN#1604210571) CAME IN FOR SCHEDULED APPOINTMENT AND FILLED OUT VOLUNTARY STATEMENT. DRIVER WAS FOUND AT FAULT AND CHARGED ACCORDINGLY. CASE CLOSED. B6097T



Indicate North

A.I.C.: 331 N/N 16 WE

**Scene Information**

Page  
2 of 7

Event Number: 15090300026		<b>STATE OF NEVADA TRAFFIC ACCIDENT REPORT VEHICLE INFORMATION SHEET</b> <small>Revised 1/14/04</small>		Accident Number: LVM15090300026	
Vehicle # V1	# Occupants 1	<input checked="" type="checkbox"/> 1) At Fault <input type="checkbox"/> 2) Non Contact Vehicle		Agency Name: LAS VEGAS METRO PD	
Direction: <input checked="" type="checkbox"/> 1) North <input type="checkbox"/> 3) East <input type="checkbox"/> 5) Unknown of Travel: <input type="checkbox"/> 2) South <input type="checkbox"/> 4) West		Highway / Street Name: S. LAS VEGAS BOULEVARD			Travel Lane #: 3
Vehicle: <input checked="" type="checkbox"/> 1) Straight <input type="checkbox"/> 3) Left Turn <input type="checkbox"/> 5) U-Turn <input type="checkbox"/> 7) Wrong Way <input type="checkbox"/> 9) Passing <input type="checkbox"/> 11) Leaving Parked <input type="checkbox"/> 13) Leaving Lane <input type="checkbox"/> 15) Enter Parked <input type="checkbox"/> 17) Lane Change <input type="checkbox"/> 19) Unknown Action: <input type="checkbox"/> 2) Backing <input type="checkbox"/> 4) Right Turn <input type="checkbox"/> 6) Parked <input type="checkbox"/> 8) Stopped <input type="checkbox"/> 10) Racing <input type="checkbox"/> 12) Entering Lane <input type="checkbox"/> 14) Other Turning <input type="checkbox"/> 16) Driverless Vehicle <input type="checkbox"/> 18) Other					
Driver: (Last Name, First Name, Middle Name Suffix) CLARK, RUSSELL THOMAS			Transported By: <input checked="" type="checkbox"/> 1) Not Transported <input type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other		
Street Address: 2301 S VALLEY VIEW			Transported To:		
City: LAS VEGAS	State / Country: <input checked="" type="checkbox"/> 1) NV	Zip Code: 89102	Person Type: 1	Seating Position: 1	Occupant Restraints: 13
<input checked="" type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown	DOB: / /	Phone Number:	Injury Severity: U	Injury Location:	
<input type="checkbox"/> 2) Female					
OLN:	State: <input checked="" type="checkbox"/> 1) NV	Class: <input type="checkbox"/> 1) CDL <input checked="" type="checkbox"/> 2) DL	License Status: 0	Airbags: 2	Airbag Switch: Ejected: 0 Trapped: 0
Compliance: <input type="checkbox"/> 1) Restrict <input type="checkbox"/> 2) Endorse		Endorsements		Restrictions	
Alcohol/Drug Involvement: <input type="checkbox"/> 1) Not Involved <input type="checkbox"/> 2) Suspected Impairment <input type="checkbox"/> 3) Alcohol <input type="checkbox"/> 4) Drugs <input checked="" type="checkbox"/> 5) Unknown		Method of Determination (check up to 2): <input type="checkbox"/> 1) Field Sobriety Test <input type="checkbox"/> 4) Urine Test <input type="checkbox"/> 2) Evidentiary Breath <input type="checkbox"/> 5) Blood Test <input type="checkbox"/> 3) Driver Admission <input type="checkbox"/> 6) Preliminary Breath Test		Test Results:	
		Driver Factors: <input type="checkbox"/> 1) Apparently Normal <input type="checkbox"/> 6) Driver Ill / Injured <input type="checkbox"/> 2) Had Been Drinking <input type="checkbox"/> 7) Other Improper Driving <input type="checkbox"/> 3) Drug Involvement <input type="checkbox"/> 8) Driver Inattention / Distracted <input type="checkbox"/> 4) Apparently Fatigued / Asleep <input type="checkbox"/> 9) Physical Impairment <input type="checkbox"/> 5) Obstructed View <input type="checkbox"/> 10) Unknown			
Vehicle Year: 2009	Vehicle Make: AUDI	Vehicle Model: A4	Vehicle Type: SEDAN 4-DOOR	Vehicle Factors: <input type="checkbox"/> 1) Failed To Yield Right Of Way <input type="checkbox"/> 9) Failed To Maintain Lane <input type="checkbox"/> 16) Driverless Vehicle <input type="checkbox"/> 2) Disregard Control Device <input type="checkbox"/> 10) Following Too Close <input type="checkbox"/> 17) Unsafe Backing <input type="checkbox"/> 3) Too Fast For Conditions <input type="checkbox"/> 11) Unsafe Lane Change <input type="checkbox"/> 18) Ran Off Road <input type="checkbox"/> 4) Exceeding Speed Limit <input type="checkbox"/> 12) Made Improper Turn <input checked="" type="checkbox"/> 19) Hit and Run <input type="checkbox"/> 5) Wrong Way / Direction <input type="checkbox"/> 13) Over Correct/Steering <input type="checkbox"/> 20) Road Defect <input type="checkbox"/> 6) Mechanical Defects <input checked="" type="checkbox"/> 14) Other Improper Driving <input type="checkbox"/> 21) Object Avoidance <input type="checkbox"/> 7) Drove Left Of Center <input type="checkbox"/> 15) Aggressive / Reckless / Careless <input type="checkbox"/> 8) Other <input type="checkbox"/> 22) Unknown <input type="checkbox"/>	
Plate / Permit No.: 524YEU	State: <input checked="" type="checkbox"/> 1) NV	Expiration Date: 7 / 5 / 2016	Vehicle Color: BLK		
Vehicle Identification Number: WAULF78K79N032886					
Registered Owner Name: <input type="checkbox"/> 1) Same As Driver CLARK, RUSSELL THOMAS					
Registered Owner Address: 2301 S VALLEY VIEW BLVD, LAS VEGAS, NV 89102					
Insurance Company Name: <input checked="" type="checkbox"/> 1) Insured INFINITY					
Policy Number: 127700038034001	Effective: 6 / 5 / 2015	To: 12 / 5 / 2015			
Insurance Company Address or Phone Number: 800-334-1661					
<input checked="" type="checkbox"/> 1) Vehicle Towed	Towed By: FAST TOW				
Removed To:					
			<input type="checkbox"/> 1) Over Ride <input type="checkbox"/> 2) Under Ride		
<b>Traffic Control</b> F 1) Speed Zone 11) Stop Sign 2) Signal Light 12) Yield Sign 3) Flashing Light 13) R. R. Sign 4) School Zone 14) R. R. Gates 5) Ped. Signal 15) R. R. Signal <input checked="" type="checkbox"/> 6) No Passing F 16) Marked Lanes 7) No Controls 17) Tire Chains/Snow Req. 8) Warning Sign 18) Permissive Green 9) Turn Signal <input type="checkbox"/> 19) Unknown 10) Other			<b>Distance Traveled After Impact</b> MOVED		
			<b>Speed Estimate</b> From 0 To 0 Limit 45		
			<b>Extent Of Damage</b> <input type="checkbox"/> 1) Minor <input type="checkbox"/> 4) Total <input checked="" type="checkbox"/> 2) Moderate <input type="checkbox"/> 5) None <input type="checkbox"/> 3) Major <input type="checkbox"/> 6) Unknown		
<b>Damaged Areas</b> <input checked="" type="checkbox"/> 1) Front <input type="checkbox"/> 2) Right Side <input type="checkbox"/> 3) Left Side <input type="checkbox"/> 4) Rear <input type="checkbox"/> 5) Right Front <input type="checkbox"/> 6) Right Rear <input type="checkbox"/> 7) Top <input type="checkbox"/> 8) Under Carriage <input type="checkbox"/> 9) Left Front <input type="checkbox"/> 10) Left Rear <input type="checkbox"/> 11) Unknown <input type="checkbox"/> 12) Other					
<b>Sequence Of Events</b>					
Code #		Description		Collision With Fixed Object	Most Harmful Event
1st	214	MOTOR VEHICLE IN TRANSPORT		<input type="checkbox"/>	<input checked="" type="checkbox"/>
2nd				<input type="checkbox"/>	<input type="checkbox"/>
3rd				<input type="checkbox"/>	<input type="checkbox"/>
4th				<input type="checkbox"/>	<input type="checkbox"/>
5th				<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 1) NRS <input type="checkbox"/> 2) CFR <input type="checkbox"/> 3) CC / MC <input type="checkbox"/> 4) Pending (1)		Violation		NOC	Citation Number
<input type="checkbox"/> 1) NRS <input type="checkbox"/> 2) CFR <input type="checkbox"/> 3) CC / MC (2)		Violation		NOC	Citation Number
Investigator(s) Quinn		ID Number 4377	Date 9 / 3 / 2015	Reviewed By Bret Thell	Date Reviewed 9 / 9 / 2015 Page 3 of 7

**Vehicle Information**



<b>Event Number:</b> 150903000026		<b>STATE OF NEVADA</b> <b>TRAFFIC ACCIDENT REPORT</b> VEHICLE INFORMATION SHEET <small>Revised 1/14/04</small>		<b>Accident Number:</b> LVM150903000026 <b>Agency Name:</b> LAS VEGAS METRO PD	
<b>Name:</b> (Last Name, First Name, Middle Name Suffix)		<b>Transported By:</b> <input type="checkbox"/> 1) Not Transported <input type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other _____			
<b>Street Address:</b>		<b>Transported To:</b>			
<b>City:</b>	<b>State / Country</b> <input type="checkbox"/> 1) NV	<b>Zip Code:</b>	<b>Person Type:</b>	<b>Seating Position:</b>	<b>Occupant Restraints:</b>
<input type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown <b>DOB:</b> <b>Phone Number:</b> <input type="checkbox"/> 2) Female     /     /			<b>Injury Severity:</b>	<b>Injury Location:</b>	
		<b>Airbags:</b>	<b>Airbag Switch:</b>	<b>Ejected:</b>	<b>Trapped:</b>
<b>Name:</b> (Last Name, First Name, Middle Name Suffix)		<b>Transported By:</b> <input type="checkbox"/> 1) Not Transported <input type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other _____			
<b>Street Address:</b>		<b>Transported To:</b>			
<b>City:</b>	<b>State / Country</b> <input type="checkbox"/> 1) NV	<b>Zip Code:</b>	<b>Person Type:</b>	<b>Seating Position:</b>	<b>Occupant Restraints:</b>
<input type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown <b>DOB:</b> <b>Phone Number:</b> <input type="checkbox"/> 2) Female     /     /			<b>Injury Severity:</b>	<b>Injury Location:</b>	
		<b>Airbags:</b>	<b>Airbag Switch:</b>	<b>Ejected:</b>	<b>Trapped:</b>
<b>Name:</b> (Last Name, First Name, Middle Name Suffix)		<b>Transported By:</b> <input type="checkbox"/> 1) Not Transported <input type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other _____			
<b>Street Address:</b>		<b>Transported To:</b>			
<b>City:</b>	<b>State / Country</b> <input type="checkbox"/> 1) NV	<b>Zip Code:</b>	<b>Person Type:</b>	<b>Seating Position:</b>	<b>Occupant Restraints:</b>
<input type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown <b>DOB:</b> <b>Phone Number:</b> <input type="checkbox"/> 2) Female     /     /			<b>Injury Severity:</b>	<b>Injury Location:</b>	
		<b>Airbags:</b>	<b>Airbag Switch:</b>	<b>Ejected:</b>	<b>Trapped:</b>
<input type="checkbox"/> 1) Trailing Unit 1 VIN: _____		<b>Plate:</b> _____	<b>State:</b> <input type="checkbox"/> 1) NV	<b>Type:</b> _____	
<input type="checkbox"/> 1) Trailing Unit 2 VIN: _____		<b>Plate:</b> _____	<b>State:</b> <input type="checkbox"/> 1) NV	<b>Type:</b> _____	
<input type="checkbox"/> 1) Trailing Unit 3 VIN: _____		<b>Plate:</b> _____	<b>State:</b> <input type="checkbox"/> 1) NV	<b>Type:</b> _____	
<b>Commercial Vehicle Configuration</b>					
<input type="checkbox"/> 1) Bus, 9 - 15 Occupants <input type="checkbox"/> 2) Bus, > 15 Occupants <input type="checkbox"/> 3) Single 2 Axle and 6 Tire <input type="checkbox"/> 4) Single > 3 Axle <input type="checkbox"/> 5) Any 4 Tire Vehicle		<input type="checkbox"/> 6) Tractor Only <input type="checkbox"/> 7) Tractor / Trailer <input type="checkbox"/> 8) Tractor / Doubles <input type="checkbox"/> 9) Tractor / Triples <input type="checkbox"/> 10) Truck with Trailer		<input type="checkbox"/> 11) Tractor / Semi Trailer <input type="checkbox"/> 12) Passenger Vehicle, (Haz-Mat) <input type="checkbox"/> 13) Light Truck, (Haz-Mat) <input type="checkbox"/> 14) Other Heavy Vehicle	
		<b>Source</b>			
		<input type="checkbox"/> 1) Driver <input type="checkbox"/> 2) Log Book <input type="checkbox"/> 3) Shipping Papers / Trip Manifest			
		<input type="checkbox"/> 4) State Reg. <input type="checkbox"/> 5) Side Of Vehicle <input type="checkbox"/> 6) Other			
<b>Carrier Name:</b>		<b>Power Unit GVWR</b> <input type="checkbox"/> 1) ≤ 10,000 Lbs <input type="checkbox"/> 2) 10,000 - 25,000 Lbs <input type="checkbox"/> 3) ≥ 25,000 Lbs		<input type="checkbox"/> 1) Haz-Mat <input type="checkbox"/> 2) Released	
<b>Carrier Street Address:</b>		<b>City:</b>	<b>State:</b> <input type="checkbox"/> 1) NV	<b>Zip:</b>	
<b>Cargo Body Type</b> <input type="checkbox"/> 1) Pole <input type="checkbox"/> 6) Van / Box <input type="checkbox"/> 11) Grain, Gravel Chips <input type="checkbox"/> 2) Tank <input type="checkbox"/> 7) Concrete Mixer <input type="checkbox"/> 12) Bus, 9 - 15 Occupants <input type="checkbox"/> 3) Flatbed <input type="checkbox"/> 8) Auto Carrier <input type="checkbox"/> 13) Bus, > 15 Occupants <input type="checkbox"/> 4) Dump <input type="checkbox"/> 9) Garbage/Refuse <input type="checkbox"/> 14) Other <input type="checkbox"/> 5) Unknown <input type="checkbox"/> 10) Not Applicable		<b>Haz-Mat ID #:</b>	<b>Type of Carrier</b> <input type="checkbox"/> 1) Single State <input type="checkbox"/> 2) USDOT <input type="checkbox"/> 3) Canada <input type="checkbox"/> 4) Mexico <input type="checkbox"/> 5) None	<b>NAS Safety Report #:</b> <b>Carrier Number:</b>	
		<b>Hazard Classification #:</b>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div>		
<b>Vehicle Information</b>				Page 4 of 7	

Event Number: 150903000026		<b>STATE OF NEVADA</b> <b>TRAFFIC ACCIDENT REPORT</b> VEHICLE INFORMATION SHEET <small>Revised 1/14/04</small>		Accident Number: LVM150903000026																									
Vehicle # V2	# Occupants 2	<input type="checkbox"/> 1) At Fault <input type="checkbox"/> 2) Non Contact Vehicle		Agency Name: LAS VEGAS METRO PD																									
Direction of Travel: <input checked="" type="checkbox"/> 1) North <input type="checkbox"/> 2) South <input type="checkbox"/> 3) East <input type="checkbox"/> 4) West <input type="checkbox"/> 5) Unknown		Highway / Street Name: S LAS VEGAS BLVD			Travel Lane #: 3																								
Vehicle: <input checked="" type="checkbox"/> 1) Straight <input type="checkbox"/> 2) Left Turn <input type="checkbox"/> 3) U-Turn <input type="checkbox"/> 4) Wrong Way <input type="checkbox"/> 5) Passing <input type="checkbox"/> 6) Leaving Parked <input type="checkbox"/> 7) Leaving Lane <input type="checkbox"/> 8) Enter Parked (R) <input type="checkbox"/> 9) Lane Change <input type="checkbox"/> 10) Unknown Action: <input type="checkbox"/> 1) Backing <input type="checkbox"/> 2) Right Turn <input type="checkbox"/> 3) Parked <input type="checkbox"/> 4) Stopped (C) <input type="checkbox"/> 5) Racing <input type="checkbox"/> 6) Entering Lane <input type="checkbox"/> 7) Other Turning <input type="checkbox"/> 8) Driverless Vehicle <input type="checkbox"/> 9) Other																													
Driver: (Last Name, First Name, Middle Name, Suffix) WHITE, TONEY ANTHONY III			Transported By: <input type="checkbox"/> 1) Not Transported <input checked="" type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other <span style="float: right;">AMR</span>																										
Street Address: 9457 S LAS VEGAS BLVD Apt# 145			Transported To: SAINT ROSE DOMINICAN - SIENNA HOSPITAL																										
City: LAS VEGAS	State / Country: <input checked="" type="checkbox"/> 1) NV	Zip Code: 89123	Person Type: 1	Seating Position: 1	Occupant Restraints: 1																								
<input checked="" type="checkbox"/> 1) Male <input type="checkbox"/> 2) Unknown <input type="checkbox"/> 3) Female	DOB: 7 / 19 / 1972	Phone Number: 5623411408	Injury Severity: A	Injury Location: 7	1																								
OLN:	State: <input type="checkbox"/> 1) NV <input type="checkbox"/> 2) WA	Class: <input type="checkbox"/> 1) CDL <input checked="" type="checkbox"/> 2) DL	License Status: 0	Airbags: 1	Airbag Switch: Ejected: 1 Trapped: 0																								
Compliance: <input type="checkbox"/> 1) Restrict <input type="checkbox"/> 2) Endorse		Endorsements		Restrictions																									
Alcohol/Drug Involvement: <input checked="" type="checkbox"/> 1) Not Involved <input type="checkbox"/> 2) Suspected Impairment <input type="checkbox"/> 3) Alcohol <input type="checkbox"/> 4) Drugs <input type="checkbox"/> 5) Unknown		Method of Determination (check up to 2): <input type="checkbox"/> 1) Field Sobriety Test <input type="checkbox"/> 2) Urine Test <input type="checkbox"/> 3) Evidentiary Breath <input type="checkbox"/> 4) Blood Test <input type="checkbox"/> 5) Driver Admission <input type="checkbox"/> 6) Preliminary Breath Test		Test Results:																									
			Driver Factors: <input checked="" type="checkbox"/> 1) Apparently Normal <input type="checkbox"/> 2) Had Been Drinking <input type="checkbox"/> 3) Drug Involvement <input type="checkbox"/> 4) Apparently Fatigued / Asleep <input type="checkbox"/> 5) Obstructed View <input type="checkbox"/> 6) Driver Ill / Injured <input type="checkbox"/> 7) Other Improper Driving <input type="checkbox"/> 8) Driver Inattention / Distracted <input type="checkbox"/> 9) Physical Impairment <input type="checkbox"/> 10) Unknown																										
Vehicle Year: 2014	Vehicle Make: OTHER	Vehicle Model: OTHER	Vehicle Type: MOTORSCOOTER																										
Plate / Permit No.:	State: <input type="checkbox"/> 1) NV	Expiration Date: / /	Vehicle Color: BLK																										
Vehicle Identification Number: L8YTCAPFXEY602161																													
Registered Owner Name: <input type="checkbox"/> 1) Same As Driver UNKNOWN																													
Registered Owner Address: UNKNOWN, UNKNOWN, NV 0																													
Insurance Company Name: <input type="checkbox"/> 1) Insured																													
Policy Number:		Effective: / /	To: / /																										
Insurance Company Address or Phone Number:																													
<input checked="" type="checkbox"/> 1) Vehicle Towed		Towed By: FAST TOW																											
Removed To: TOW YARD																													
<b>Traffic Control</b> F <input type="checkbox"/> 1) Speed Zone <input type="checkbox"/> 11) Stop Sign <input type="checkbox"/> 2) Signal Light <input type="checkbox"/> 12) Yield Sign <input type="checkbox"/> 3) Flashing Light <input type="checkbox"/> 13) R. R. Sign <input type="checkbox"/> 4) School Zone <input type="checkbox"/> 14) R. R. Gates <input type="checkbox"/> 5) Ped. Signal <input type="checkbox"/> 15) R. R. Signal (R) <input type="checkbox"/> 6) No Passing <input type="checkbox"/> 16) Marked Lanes <input type="checkbox"/> 7) No Controls <input type="checkbox"/> 17) Tire Chains/Snow Req. <input type="checkbox"/> 8) Warning Sign <input type="checkbox"/> 18) Permissive Green <input type="checkbox"/> 9) Turn Signal <input type="checkbox"/> 19) Unknown <input type="checkbox"/> 10) Other		Distance Traveled After Impact: MOVED		<b>Speed Estimate</b> From: 0 To: 0 Limit: 45																									
				<b>Extent Of Damage</b> <input type="checkbox"/> 1) Minor <input type="checkbox"/> 2) Moderate <input type="checkbox"/> 3) Major <input type="checkbox"/> 4) Total <input type="checkbox"/> 5) None <input type="checkbox"/> 6) Unknown																									
<b>Sequence Of Events</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Code #</th> <th>Description</th> <th>Collision With Fixed Object</th> <th>Most Harmful Event</th> </tr> </thead> <tbody> <tr> <td>1st 214</td> <td>MOTOR VEHICLE IN TRANSPORT</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>2nd</td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>3rd</td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>4th</td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>5th</td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>						Code #	Description	Collision With Fixed Object	Most Harmful Event	1st 214	MOTOR VEHICLE IN TRANSPORT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2nd		<input type="checkbox"/>	<input type="checkbox"/>	3rd		<input type="checkbox"/>	<input type="checkbox"/>	4th		<input type="checkbox"/>	<input type="checkbox"/>	5th		<input type="checkbox"/>	<input type="checkbox"/>
Code #	Description	Collision With Fixed Object	Most Harmful Event																										
1st 214	MOTOR VEHICLE IN TRANSPORT	<input type="checkbox"/>	<input checked="" type="checkbox"/>																										
2nd		<input type="checkbox"/>	<input type="checkbox"/>																										
3rd		<input type="checkbox"/>	<input type="checkbox"/>																										
4th		<input type="checkbox"/>	<input type="checkbox"/>																										
5th		<input type="checkbox"/>	<input type="checkbox"/>																										
<input type="checkbox"/> 1) NRS <input type="checkbox"/> 2) CFR <input type="checkbox"/> 3) CC / MC <input type="checkbox"/> 4) Pending (1)		Violation		NOC	Citation Number																								
<input type="checkbox"/> 1) NRS <input type="checkbox"/> 2) CFR <input type="checkbox"/> 3) CC / MC (2)		Violation		NOC	Citation Number																								
Investigator(s) Quinn		ID Number 4377	Date 9 / 3 / 2015	Reviewed By Bret Theil	Date Reviewed 9 / 9 / 2015 Page 5 of 7																								

**Vehicle Information**

<b>Event Number:</b> 150803000026		<b>STATE OF NEVADA</b> <b>TRAFFIC ACCIDENT REPORT</b> VEHICLE INFORMATION SHEET <small>Revised 1/14/04</small>		<b>Accident Number:</b> LVM150903000026  <b>Agency Name:</b> LAS VEGAS METRO PD	
<b>Name:</b> (Last Name, First Name, Middle Name Suffix) SEXTON, AMANDA LEA			<b>Transported By:</b> <input type="checkbox"/> 1) Not Transported <input checked="" type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other <u>AMR</u>		
<b>Street Address:</b> 9457 S LAS VEGAS BLVD APT# 145			<b>Transported To:</b> SAINT ROSE DOMINICAN - SIENNA HOSPITAL		
<b>City:</b> LAS VEGAS	<b>State / Country:</b> <input checked="" type="checkbox"/> 1) NV	<b>Zip Code:</b> 89123	<b>Person 2 Type:</b>	<b>Seating Position:</b> 4	<b>Occupant Restraints:</b> 1
<input type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown <b>DOB:</b> 4 / 14 / 1992 <input checked="" type="checkbox"/> 2) Female	<b>Phone Number:</b> 5623411408		<b>Injury Severity:</b> 8	<b>Injury Location:</b> 6	1
			<b>Airbags:</b> 1	<b>Airbag Switch:</b> 1	<b>Ejected:</b> 1 <b>Trapped:</b> 0
<b>Name:</b> (Last Name, First Name, Middle Name Suffix)			<b>Transported By:</b> <input type="checkbox"/> 1) Not Transported <input type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other		
<b>Street Address:</b>			<b>Transported To:</b>		
<b>City:</b>	<b>State / Country:</b> <input type="checkbox"/> 1) NV	<b>Zip Code:</b>	<b>Person Type:</b>	<b>Seating Position:</b>	<b>Occupant Restraints:</b>
<input type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown <b>DOB:</b> / / <b>Phone Number:</b> <input type="checkbox"/> 2) Female			<b>Injury Severity:</b>	<b>Injury Location:</b>	
			<b>Airbags:</b>	<b>Airbag Switch:</b>	<b>Ejected:</b> <b>Trapped:</b>
<b>Name:</b> (Last Name, First Name, Middle Name Suffix)			<b>Transported By:</b> <input type="checkbox"/> 1) Not Transported <input type="checkbox"/> 2) EMS <input type="checkbox"/> 3) Police <input type="checkbox"/> 4) Unknown <input type="checkbox"/> 5) Other		
<b>Street Address:</b>			<b>Transported To:</b>		
<b>City:</b>	<b>State / Country:</b> <input type="checkbox"/> 1) NV	<b>Zip Code:</b>	<b>Person Type:</b>	<b>Seating Position:</b>	<b>Occupant Restraints:</b>
<input type="checkbox"/> 1) Male <input type="checkbox"/> 3) Unknown <b>DOB:</b> / / <b>Phone Number:</b> <input type="checkbox"/> 2) Female			<b>Injury Severity:</b>	<b>Injury Location:</b>	
			<b>Airbags:</b>	<b>Airbag Switch:</b>	<b>Ejected:</b> <b>Trapped:</b>
<input type="checkbox"/> 1) Trailing Unit 1 <b>VIN:</b>			<b>Plate:</b>	<b>State:</b> <input type="checkbox"/> 1) NV <b>Type:</b>	
<input type="checkbox"/> 1) Trailing Unit 2 <b>VIN:</b>			<b>Plate:</b>	<b>State:</b> <input type="checkbox"/> 1) NV <b>Type:</b>	
<input type="checkbox"/> 1) Trailing Unit 3 <b>VIN:</b>			<b>Plate:</b>	<b>State:</b> <input type="checkbox"/> 1) NV <b>Type:</b>	
<b>Commercial Vehicle Configuration</b>					
<input type="checkbox"/> 1) Bus, 9 - 15 Occupants <input type="checkbox"/> 6) Tractor Only <input type="checkbox"/> 11) Tractor / Semi Trailer <input type="checkbox"/> 2) Bus, > 15 Occupants <input type="checkbox"/> 7) Tractor / Trailer <input type="checkbox"/> 12) Passenger Vehicle, (Haz-Mat) <input type="checkbox"/> 3) Single 2 Axle and 6 Tires <input type="checkbox"/> 8) Tractor / Doubles <input type="checkbox"/> 13) Light Truck, (Haz-Mat) <input type="checkbox"/> 4) Single > 3 Axle <input type="checkbox"/> 9) Tractor / Triples <input type="checkbox"/> 14) Other Heavy Vehicle <input type="checkbox"/> 5) Any 4 Tire Vehicle <input type="checkbox"/> 10) Truck with Trailer			<b>Source</b> <input type="checkbox"/> 1) Driver <input type="checkbox"/> 4) State Reg. <input type="checkbox"/> 2) Log Book <input type="checkbox"/> 5) Side Of Vehicle <input type="checkbox"/> 3) Shipping Papers / Trip Manifest <input type="checkbox"/> 6) Other		
<b>Carrier Name:</b>			<b>Power Unit GVWR</b> <input type="checkbox"/> 1) ≤ 10,000 Lbs <input type="checkbox"/> 2) 10,000 - 25,000 Lbs <input type="checkbox"/> 3) ≥ 25,000 Lbs <input type="checkbox"/> 1) Haz-Mat <input type="checkbox"/> 2) Released		
<b>Carrier Street Address:</b>			<b>City:</b>	<b>State:</b> <input type="checkbox"/> 1) NV	<b>Zip:</b>
<b>Cargo Body Type</b> <input type="checkbox"/> 1) Pole <input type="checkbox"/> 6) Van / Box <input type="checkbox"/> 11) Grain, Gravel Chips <input type="checkbox"/> 2) Tank <input type="checkbox"/> 7) Concrete Mixer <input type="checkbox"/> 12) Bus, 9 - 15 Occupants <input type="checkbox"/> 3) Flatbed <input type="checkbox"/> 8) Auto Carrier <input type="checkbox"/> 13) Bus, > 15 Occupants <input type="checkbox"/> 4) Dump <input type="checkbox"/> 9) Garbage/Refuse <input type="checkbox"/> 14) Other <input type="checkbox"/> 5) Unknown <input type="checkbox"/> 10) Not Applicable		<b>Haz-Mat ID #:</b>	<b>Type of Carrier</b> <input type="checkbox"/> 1) Single State <input type="checkbox"/> 2) USDOT <input type="checkbox"/> 3) Canada <input type="checkbox"/> 4) Mexico <input type="checkbox"/> 5) None	<b>NAS Safety Report #:</b>  <b>Carrier Number:</b>	
		<b>Hazard Classification #:</b>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>		

**Vehicle Information**

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IN THE EIGHTH JUDICIAL DISTRICT COURT  
CLARK COUNTY, NEVADA

District Case No.: C-16-313216-2

Dept.: XII

**EXHIBIT 'C'**

Defendant's *Pro Per* Petition, January 2018

Electronically Filed  
1/9/2018 9:36 AM  
Steven D. Grierson  
CLERK OF THE COURT

*Steven D. Grierson*

DA  
AOR  
Haley  
Grierson  
PP

TONY A. WHITE B270990  
CCDC  
380 S. CASINO CENTER BLVD.  
LAS VEGAS, NV, 89101

DEFENDANT

STATE OF NEVADA, COUNTY OF CLARK

DISTRICT COURT

8TH JUDICIAL DISTRICT

PEOPLE OF THE STATE OF  
NEVADA,

PLAINTIFF,

VS.

TONY ANTHONY WHITE,

DEFENDANT

CASE NO. C-16-313216-2  
DEPT. NO. XII

DEFENDANT WHITE'S  
MOTION FOR WITH-  
DRAWAL OF GUILTY  
PLEA AND FOR APPOINT-  
MENT OF NEW COUNSEL  
OR ALTERNATIVELY TO  
PROCEED IN PRO PER.

STATEMENT OF FACTS

DATE: 1/30/18

TIME: 8:30 AM

ON JANUARY 20, 2016, OFFICERS DISPATCHED TO 950 SEVEN HILLS DRIVE, HENDERSON, NEVADA OBSERVED KENTON WONG BEHIND 2 VEHICLES KEEPING LOOKOUT AS THEY REPORTED TO APARTMENT NO. 2511. OFFICER M. ENGEL TALKED TO WONG WHILE OFFICER LEONAN ENTERED APARTMENT 2511. ENGEL RESPONDED TO A SIGHTING OF A SUSPECT AT WHICH TIME WONG ENTERED THE JEEP AND EXITED THE COMPLEX. APPARENTLY RANDO CALLS WENT OUT RELATING TO THE BLACK JEEP CHEROKEE (LICENSE NO. WASHING-TON ASW 5060 (VEN 1J4B8NXXC672487) AND ON ST. ROSE PARKWAY AND JEFFREY'S INTERSECTION NUMEROUS MARKED PATROL VEHICLES CONVERGED ON WONG AND THE JEEP LIGHTS FLEW UP AND DEMANDING THAT HE EXIT THE VEHICLE HANDS UP AND BACK TOWARD THE OFFICERS.

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WONG WAS INSTRUCTED TO KNEEL TO HIS KNEES, CROSS HIS LEGS AND LIE FLAT WITH BOTH HANDS STRAIGHT OUT. HE WAS APPROACHED, HANDCUFFED AND SEARCHED BY OFFICERS BEFORE BEING PLACED INTO A PATROL CAR. OFFICERS THEN ENSURED THAT NO OTHER PASSENGERS WERE IN THE VEHICLE BY VIEWING AND CLEARING IT. WONG WAS REPORTEDLY STOPPED DUE TO SEVERAL "UNSPECIFIED" DRIVING INFRACTIONS. FROM AN UNKNOWN LOCATION DETECTIVE RYAN ADAMS WAS ADVISED OF THE TRAFFIC STOP WITH WONG AND WAS DIRECTED TO RESPOND TO THAT LOCATION. ADAMS RESPONDED AND ASSENT ANY MIRANDA ADMONITIONS GIVEN, WAS ALLEGEDLY THREE GRANTED PERMISSION TO SEARCH THE VEHICLE.

DURING THE SEARCH AMANDA SEXTON AND DEFENDANT WHITE'S IDENTIFICATIONS WERE DISCOVERED LEADING TO THE SERIES OF EVENTS THAT ATTACHED TO THOSE DISCOVERIES. ACCORDING TO REPORTS, WONG CONTINUED TO TALK WITH ADAMS FOR "SEVERAL MINUTES" BEFORE BEING PLACED INTO CUSTODY.

ON JANUARY 21, 2016, IN THE EARLY MORNING HOURS DEFENDANT WHITE (NOT ON HIS ANTI-PSYCHOTIC MEDICATIONS AND STILL HEAVILY INTOXICATED), SEXTON AND DEAN WERE PROVIDED A RIDE TO 7-11 ON CHARLESTON BLVD BY GLEN COUSERT, NEAR SEXTON AND WHITE'S APARTMENT. DURING THIS TIME DEAN LEFT, RETRIEVED A SUIT CASE AND PLACED IT INTO COUSERTS VEHICLE TRUNK. THE BRIEF CASE CONTAINED SEVERAL ITEMS AND WAS TAKEN TO 9457 S. LAS VEGAS BLVD, LAS VEGAS, NV, BUT NOT TO OR REMOTELY NEAR APARTMENT 145.

FOLLOWING THESE EVENTS AND DURING BUSINESS HOURS ON JANUARY 21, 2016, DETECTIVE JOSEPH EBERT SUCCESSFULLY OBTAINED SEARCH WARRANTS TO SEARCH THE BLACK JEEP CHEROKEE AND APARTMENT 2085 ON EAST CHARLESTON BELONGING TO DEFENDANTS WHITE AND SEXTON. THE SEARCH WARRANT RETURN ON THE BLACK JEEP REPORTED TO LIST 9 ITEMS SEIZED FROM THE JEEP. THE RETURN ON APARTMENT 2085 REPORTED TO LIST 11 ITEMS SEIZED FROM THE APARTMENT. PROBABLE CAUSE UPON WHICH THE 2 SEARCH WARRANTS WERE BASED INCLUDED INFORMATION OBTAINED IN VIOLATION OF WONG'S MIRANDA ADMONITIONS AS WELL AS 4TH AMENDMENT PROTECTIONS OF WONG, WHITE AND SEXTON'S AGAINST UNREASONABLE AND ILLEGAL SEARCH EXECUTED ON THE BLACK JEEP AND SEXTON'S PURSE.

1. IT IS QUESTIONABLE AS TO WHETHER WONG, WHO DIDN'T OWN THE VEHICLE, HAD ANY LEGAL AUTHORITY TO CONSENT TO ITS SEARCH LESS ABOVE THE BELONGINGS OF AND IN MRS. SEXTON'S PURSE. HPD AND AS KNOWLEDGEABLE TO ADAMS PRIOR TO THE SEARCH, RETAINED FROM HPD DOCS (REV. 01/14/04) TITLED "HPD VOLUNTARY CONSENT TO SEARCH" WHICH EXPRESSLY AUTHORIZES VOLUNTARY SEARCHES OF PREMISES, VEHICLES OR OTHER PROPERTIES THAT ADAMS FAILED TO MAKE ACCESSIBLE TO WONG FOR SIGNING PRIOR TO THE VEHICLE SEARCH.

STATEMENTS OF WITNESSES BURTON, DEAN, ANN WHITE AND GLEN COUSSET AS WELL AS ANY EVIDENCE RETRIEVED AS A RESULT OF CONTACT WITH THESE WITNESSES WERE THE PRODUCT OF THE UNLAWFUL SEARCH WHICH INCLUDED, BUT IS NOT LIMITED TO WRITTEN STATEMENTS, THE RETRIEVING OF A KEY FOB, THE HAND DRAWN MAP AND OTHER ITEMS.

### HISTORY OF THE CASE

DEFENDANT JAMES ANTHONY WHITE WAS ARRESTED JANUARY 22, 2016, AND CHARGED JOINTLY WITH 3 CO-DEFENDANTS WITH 2 COUNTS OF ATTEMPTED ROBBERY W/ USE OF A DW, 2 COUNTS OF 1ST DEGREE KIDNAPPING W/ USE OF A DW, 1 COUNT OF CONSPIRACY TO COMMIT ROBBERY, 1 COUNT OF BATTERY W/ USE OF A DW RESULTING IN SUBSTANTIAL BODILY HARM, 1 COUNT OF BURGLARY W/ A DW AND 1 COUNT OF IMPERSONATING A PEACE OFFICER BY INDICTMENT OF THE CLARK COUNTY GRAND JURY IN CASE NO. 15AG5129 A-D. THEY EACH WERE ARRAIGNED IN HENDERSON JUSTICE COURT ON OR ABOUT FEBRUARY 01, 2016. ACKNOWLEDGING THE AGENCY OF ALL 4 DEFENDANTS, THE COURT OFFICIATED ITS APPOINTMENT OF COUNSEL. DEFENDANT WHITE WAS APPOINTED COUNSEL HARVEY GRUBER OF HENDERSON. COUNSEL HAS REMAINED UNDER APPOINTMENT THE DURATION OF THIS CASE TILL THE CURRENT DATE.

ON MARCH 09, 2016, CLARK COUNTY GRAND JURY CONVENED RESULTING IN THE ISSUANCE OF A CRIMINAL INDICTMENT WARRANT<sup>1</sup>. ON MARCH 17, 2016, DEFENDANTS WERE ARRAIGNED IN 8TH JUDICIAL DISTRICT COURT DEPARTMENT 12. ON ADVICE OF COUNSEL, DEFENDANTS RIGHT TO SPEEDY TRIAL WAS WAIVED<sup>2</sup>. PRE-TRIAL CALENDAR CALL WAS SET FOR OCTOBER 25, 2016 AND TRIAL FOR NOVEMBER 01, 2016. ON JUNE 02, 2016, DEFENDANT WHITE MOTIONED TO DISMISS AND REPLACE COUNSEL ON SEVERAL BASIS INCLUDING FAILURE TO INVESTIGATE, FAILURE TO DISCLOSE TO DEFENDANT ALL DISCOVERY, FAILURE TO COMMUNICATE ALL CASE FACTS AND STRATEGIES WITH DEFENDANT AND DUE TO THE EXISTENCE OF A CONFLICT OF INTEREST CAUSED BY COUNSEL'S TELEPHONIC DISRESPECT AND DISPARAGING OF DEFENDANT'S MOTHER.

<sup>1</sup>2. AS REFLECTED BY THE GRAND JURY TRANSCRIPT FILED MARCH 25, 2015, EXHIBITS SUBMITTED WERE 1 HANDDRAWN MAP AND 24 PHOTOS.

3. THE WAIVER OF SPEEDY TRIAL WAS ARBITRARY AND UNWARRANTED AS WITH THE BENEFIT OF THIS EXTRA TIME COUNSEL HAS STILL NOT PERFORMED ADVOCATION AND EFFECTIVE REPRESENTATION OF WHITE.

WHEN THE INITIAL MOTION CAME ON FOR HEARING, USING DECEPTION AND MISREPRESENTATION COUNSEL VOWED AND ASSURED DEFENDANT THAT HE WOULD COMPLETE AND FILE CERTAIN MOTIONS. THESE FALSE REPRESENTATIONS WERE MERELY TO FORCE DEFENDANTS NON-PURSUIT AND WITHDRAWAL OF THE MOTION.

ON OCTOBER 25, 2016, ALL DEFENDANTS APPEARED WITH COUNSEL. A CALENDAR CALL WAS SET FOR MARCH 14, 2017 AND TRIAL FOR MARCH 20, 2017. THE TRIAL DATE OF NOVEMBER 01, 2016, WAS VACATED.

BY NOVEMBER 18, 2016, A BAR COMPLAINT WAS FILED BY WHITE IN NEVADA STATE BAR CASE NO. C313216 SEEKING DISCIPLINARY MEASURES BE TAKEN AGAINST COUNSEL. THIS WAS BASED UPON COUNSEL'S UNPROFESSIONALISM AND MISCONDUCT REPORTED BY DEFENDANT'S MOTHER, TO WHICH COUNSEL EXTENSIVELY PERJURED, DISPARAGED AND DISRESPECTED WHITE'S MOTHER WHO MERELY CALLED TO INQUIRE AS TO COUNSEL'S PROGRESS IN THE CASE WHICH OBVIOUSLY WAS NONE AT THAT TIME.

ON NOVEMBER 22, 2016, COUNSEL, ON NOTICE OF THE BAR COMPLAINT AGAINST HIM, FILED A MOTION TO WITHDRAWAL BASED ON A NOTARIZED NOVEMBER 21, 2016, AFFIDAVIT ATTESTING UNDER OATH THAT HE COULD NO LONGER REPRESENT DEFENDANT WHITE DUE TO CONFLICT.

ON DECEMBER 28, 2016, DEFENDANT FILED A SECOND MOTION TO RECUSE COUNSEL, IT WAS ON FOR HEARING JANUARY 19, 2017. THE SECOND HEARING RESULTED IN ANOTHER WITHDRAWAL BY WHITE BASED AGAIN ON VERBAL DECEPTION OF COUNSEL TO TAKE CERTAIN ACTION ON THE CASE. AGAIN DEFENDANT GAVE COUNSEL THE BENEFIT OF ALL DOUBT. WHEN JUDICIAL INQUIRY WAS DIRECTED AT COUNSEL HIS RESPONSE WAS "IT IS WHAT IT IS JUDGE."

A THIRD MOTION TO RECUSE COUNSEL AND PROCEED IN PRO PER WAS FILED MARCH 27, 2017. IN THAT MOTION DEFENDANT ARTICULATED HIS LEGAL BASIS EMPHASIZING COUNSEL'S CONTINUING DECEPTION, MISREPRESENTATIONS AND REFUSAL TO FILE CERTAIN PLEADINGS ADVOCATE DEFENDANTS BEHALF AND SUBVERT THE STATE TO ADVERSARIAL TESTING. COUNSEL'S FAILURE TO INVESTIGATE THE CASE WAS FURTHER CONCERNING TO DEFENDANT. THE MOTION CAME ON FOR HEARING APRIL 18, 2017, AND WITHOUT CITING ANY REASON OR CONDUCTING A FARETTA CANVAS THE COURT SIMPLY DENIED DEFENDANTS MOTION.



SINCE HIS APPOINTMENT, IN SUBSEQUENT CONTACTS WITH COUNSEL, WHITE ADVISED COUNSEL OF A EXTENDED HISTORY OF MENTAL HEALTH AND LACK OF STRONG ANTI-PSYCHOTIC MEDICATIONS ON JANUARY 21, 2016, COMBINED WITH A SEPTEMBER 03, 2015, SUBSTANTIAL HEAD TRAUMA INCIDENT WHICH CAUSES MENTAL BLACK OUTS, MEMORY LAPSES SLOW THINKING AND SUSCEPTIBILITY TO MANIPULATION. COUNSEL WAS FURTHER ADVISED OF DEFENDANT'S MEDICAL NEED FOR HIS PRESCRIPTION GLASSES TO PREVENT EXTREME EXCRUCIATING HEADACHES AND OF THE FACT OF THE EXCESSIVE INTOXICATION.

DEFENDANT SOUGHT THAT COUNSEL IN CONJUNCTION WITH WONG'S COUNSEL 4. FILE A MOTION TO SUPPRESS EVIDENCE OBTAINED IN VIOLATION OF MIRANDA AND THE FOURTH AMENDMENT TO THE U.S. CONSTITUTION. SINCE CLOSE TO SOME 2 YEARS OF APPOINTMENT, COUNSEL HAS TAKEN ABSOLUTELY NO ACTION WITH EXCEPTION TO A 4 PAGE MOTION TO WITHDRAWAL. IN ADDITION, COUNSEL HAS FAILED TO OBTAIN AND RECORRISH ALL DISCOVERY. IN HIS POSSESSION OR AVAILABLE ON REQUEST, HAS FAILED TO COMMUNICATE ALL ANTICIPATED TACTICS/STRATEGIES RELATED TO THE CASE OR PURSUE DEFENDANT'S MENTAL HEALTH, HEAD TRAUMA AND INTOXICATION CLAIMS AND HAS FAILED TO COMMUNICATE HIS INTENT OF OR ATTEMPT TO OBTAIN OR APPLY FOR ANY EXPERTS TO EVALUATE DEFENDANT. COUNSEL HAS NOT MERELY EXPLORED THE POSSIBILITY OF SUGGESTING IDENTIFICATION OF DEFENDANT BOTH AT THE CRIME SCENE AND BEFORE THE GRAND JURY. AS OF THE CURRENT DATE NO CASE INVESTIGATION PREPARATORY TO TRIAL HAS ENTAILED NOR CONCLUDED.

THE SOLE REPRESENTATION PROVIDED BY COUNSEL IS COUNSEL'S CONTINUING PERSUASION ON WHITE TO PLEA GUILTY TO THE ALLEGATIONS AS A TRIAL LOSE WAS GUARANTEED. DUE TO MOUNTING PRESSURES FROM COUNSEL, HIS REFUSAL TO PREPARE FOR TRIAL AND HIS CONSISTENT DECEPTIONS AND MISREPRESENTATIONS (IE, DEFENDANT'S CREDIT EARNINGS QUALIFICATIONS ON HIS SENTENCE) AND IN LIGHT OF DIRECT THREATS TO WHITE'S SAFETY AND GANG ATTACKS (IE, THE TORCHING OF HIS SISTER'S RESIDENCE BY ASSOCIATES OF DEAN FOR "SWITCHING" ON HIM), WHITE WAS FORCED AGAINST HIS WILL TO PLEA GUILTY DESPITE HIS INNOCENCE. THESE CONCERNS AND WHITE'S DESIRE TO WITHDRAWAL HIS PLEA WERE DISCUSSED TO COUNSEL WHO HAS NOT CONVEYED SUCH TO THE COURTS.

4. WONG HAS LONG AGO ENTERED A PLEA AGREEMENT AND HAS BEEN SENTENCED AND TRANSPORTED TO ADOC. THE OPPORTUNITY TO JOINTLY MOVE FOR SUPPRESSION THUS WAS TIME-SENSITIVE BUT FOR COUNSEL'S INEFFECTIVENESS AND TARDINESS. SAID TARDINESS AND INEFFECTIVENESS WAS FURTHER INSTRUMENTAL IN PROVIDING THE PROSECUTION UNFAIR ADVANTAGE TO PREVENT SUPPRESSION BY VIRTUE OF DISPOSING OF WONG AND SETTING PORTIONS OF THE CASE.

5. OF DISCOVERY POSSESSED OR ACCESSIBLE TO COUNSEL NOT YET PROVIDED TO WHITE ARE THE MARCUM NOTICE, PHOTOGRAPHIC EVIDENCE, NARRATIVE REPORTS OF SOME 7 OFFICERS (MELSEN, NEWBARGER, NICHOLS, EBBET, WATFORD, LEWIS AND CHRISTOPHER, THE CRIME SCENE LOG, DNA ANALYST, VICTIM MEDICAL RECORDS AND TOXICOLOGY, ETC.)

AS OF AFFIRMATION DATE OF FEBRUARY 02, 2016, AND CLOSE TO 2 YEARS LATER, COUNSEL'S PURPORTED REPRESENTATION OF WHITE HAS UNDOUBTEDLY REVEALED TO BE A FARCE AND PRETENSE. SECONDLY, COUNSEL'S CONTINUED REPRESENTATION IN LIGHT OF FACTS UNDERLYING COUNSEL'S MOTION TO WITHDRAWAL OBVIOUSLY CONTINUES TO PERSEVERE AND CREATE A CONFLICT OF INTEREST. DESPITE REPEATED URGENCY OF COUNSEL TO CHALLENGE GRAND JURY VIOLATIONS, ADDRESS THE COERCED PLEA INDUCED BY THREATS AND GANG VIOLENCE, CONDUCT CAREFUL FACTUAL AND LEGAL INVESTIGATION AND INQUIRIES WITH VIEWS TO DEVELOPING MATTERS OF DEFENSE IN ORDER TO MAKE ESSENTIAL INFORMED DECISIONS ON WHITE'S BEHALF AT BOTH THE PLEADING STAGES AND PREPARATORY TO TRIAL, COUNSEL HAS AS OF TODAY MADE NO PRE-TRIAL INVESTIGATION PREPARATORY TO THE NOVEMBER 01, 2016 AND MARCH 20, 2017 TRIAL DATES LETS ALONE THE RESCHEDULED TRIAL DATE OF OCTOBER 31, 2017 (I.E., INTERVIEW WITNESSES AND VICTIMS, OBTAINING ADDITIONAL RELEVANT EVIDENCE AND REPORTS TO HENDERSON AND THE STATES POSSESSION <sup>61</sup> ETC). COUNSEL HAS FURTHER FAILED TO APPRAISE DEFENDANT OF CASE PROGRESS AND PROVIDE COMPLETE DISCOVERY HAS CREATED SUBSTANTIAL DISTRUST AND HAS FURTHER, AMONG OTHER THINGS, COMPELLED DEFENDANT TO INVOKE HIS RIGHT TO SELF REPRESENTATION. MORE SO IN LIGHT OF THE CONTINUING MISREPRESENTATIONS AND DECEPTIONS OF COUNSEL.

IN CLOSE TO A 2 YEAR PERIOD THE SOLE PLEADING FILED WAS COUNSEL'S NOVEMBER 22, 2016, 4 PAGE MOTION TO WITHDRAWAL. NO DISCOVERY RELATED OR PRE-TRIAL MOTIONS HAVE BEEN FILED ON DEFENDANT'S BEHALF. OCTOBER 31, 2017, WAS THE PRE-TRIAL DATE AND SOME 7-DAYS BEFORE TRIAL WAS SCHEDULED TO COMMENCE COUNSEL FILED NOTHING. RATHER THAN ADVOCATE AND FIGHT FOR DEFENDANT COUNSEL JOINED IN ON PRESSURES TO INDUCE DEFENDANT'S GUILTY PLEA WHILE DECEIVING AND MISREPRESENTING.

SUCH OMISSIONS AND MANEUVERS COMBINED WITH COUNSEL'S CONTINUED DECEPTION AND MISREPRESENTATIONS TO DEFENDANT PROMPTS THE INSTANT MOTION AND MORE PARTICULARLY DEFENDANT'S MOTION TO WITHDRAWAL HIS GUILTY PLEA AND HIS INVOCATION OF HIS RIGHT TO SELF REPRESENTATION.

6. BY COUNSEL'S ACCOUNT AND ACCORDANCE, UPON DEFENDANT'S INQUIRY, THE PROSECUTION IS SOLELY REQUESTED TO DISCLOSE SELECTIVE EVIDENCE THEY'RE GONNA USE AND NOT THE REMAINDER WHICH MAY BE FAVORABLE TO DEFENDANT OR ANY DEFENSE HE MAY MOUNT TO THE SERIOUS ALLEGATIONS.

## I. SELF REPRESENTATION.

IN FARETTA V. CALIFORNIA, (1975) 422 U.S. 806, 821, THE SUPREME COURT HELD THAT AN ACCUSED HAS A SIXTH AMENDMENT RIGHT TO CONDUCT HIS OWN DEFENSE IN A CRIMINAL CASE. SEE ALSO, NEV. CONST. ART. I, 58, GRAVES V. STATE, (1996) 112 NEV. 118, 124.

A DEFENDANT'S SIXTH AMENDMENT RIGHT TO COUNSEL IMPLICITLY EMBODIES A "CORRELATIVE RIGHT TO DEFENSE WITH A LAWYER'S HELP." ADAMS V. U.S. EX-REL. MCMAHON, (1942) 317 U.S. 269, 279. THE 6TH AMENDMENT DOES NOT REQUIRE THAT A COUNSEL BE FORCED UPON A DEFENDANT. CARTER V. ILLINOIS, 329 U.S. 173, 174-175; MOORE V. MIDGHEAN, 355 U.S. 155, 161.

THE RIGHT TO ASSISTANCE OF COUNSEL IS "THE RIGHT OF THE ACCUSED PERSONALLY TO MANAGE AND CONDUCT HIS OWN DEFENSE IN A CRIMINAL CASE." McKASKLE V. WIGGINS, (1984) 465 U.S. 168, 174; HASLAM V. U.S., 431 F.2D 362, 365 (9TH CIR.). A DEFENDANT'S PRO PER INVOCATION AND RIGHT MUST BE HONOURED OUT OF "THAT RESPECT FOR THE INDIVIDUAL WHICH IS THE LIFE BLOOD OF THE LAW." ILLINOIS V. ALLEN, 397 U.S. 337, 350-351 (1970).

IN ORDER FOR A DEFENDANT TO REPRESENT HIMSELF HE MUST "KNOWINGLY AND INTELLIGENTLY" FOREGO THE BENEFITS ASSOCIATED WITH A SKILLED AND EXPERIENCED ATTORNEY. FARETTA, 422 U.S. AT 835; JOHNSON V. ZERBST, (1938) 304 U.S. 464, 465; MALTREY V. GILLIES, 332 U.S. 708, 723-24; ALSO SEE ADAMS, SUPRA.

TO ENSURE A VALID WAIVER OF COUNSEL, A JUDGE SHOULD MAKE A "SEARCHING OR FORMAL" INQUIRY INTO BOTH THE DEFENDANT'S UNDERSTANDING OF THE 6TH AMENDMENT WAIVER AND AWARENESS OF THE DISADVANTAGES OF SELF-REPRESENTATION. EDWA V. TOVAR, 541 U.S. 77, 89 (2004) (QUOTING JOHNSON V. ZERBST 304 U.S. AT 458, 464). IN DOING SO, THE COURT LOOKS AT THE CIRCUMSTANCES OF THE CASE INCLUDING A DEFENDANT'S BACKGROUND, EDUCATION AND EXPERIENCE IN ASSESSING THE WAIVER. HOOKS V. STATE, (2008) 124 NEV. 48.

## II. COUNSEL'S AFFIRMATIVE DUTIES.

A CRIMINAL DEFENDANT HAS A GUARANTEE OF COUNSEL WHICH "CANNOT BE SATISFIED BY MERE FORMAL APPOINTMENT." ANNEY V. ALABAMA, (1940) 308 U.S. 444, 446. THE FACT THAT THE PERSON WHO HAPPENS TO BE A LAWYER IS PRESENT ALONGSIDE THE ACCUSED, HOWEVER, IS NOT ENOUGH TO SATISFY THE CONSTITUTIONAL COMMAND... AN ACCUSED IS ENTITLED TO BE ASSISTED BY AN ATTORNEY WHETHER RETAINED OR APPOINTED, WHO PLAYS THE ROLE NECESSARY TO ENSURE THAT THE TRIAL IS FAIR." STEECKMAN V. WASHINGTON, (1984) 466 U.S. 655; MCMAHON V. RICHARDSON, (1970) 397 U.S. 759, 771.

THE RIGHT TO COUNSEL IS A RIGHT TO EFFECTIVE COUNSEL NOT MERELY JUST A WARM BODY NEXT TO THE DEFENDANT. SLYER V. SULLIVAN (1980) 446 U.S. 344. THE RIGHT TO COUNSEL GUARANTEED BY THE 6TH AMENDMENT IS A FUNDAMENTAL RIGHT. ARGERSINGER V. HAMILIN, (1972) 402 U.S. 25, 29-33. A VIOLATION OF THE 6TH AMENDMENT IS SHOWN UPON DEMONSTRATION OF A CONFLICT OF INTEREST ADVERSELY AFFECTING A LAWYER'S PERFORMANCE. GLASSER V. U.S., (1942) 315 U.S. 60, 92.

COUNSEL'S EFFECTIVE PERFORMANCE IN ORDER TO SATISFY THE 6TH AMENDMENT MUST NOT REDUCE THE PLEADINGS TO A FARCE OR PRETEXT. COUNSEL'S INACTION IN CONDUCTING PRE-TRIAL INVESTIGATION RENDERS ASSISTANCE A SHAM AND FARCE. JACKSON V. WARDEN, (1975) 91 NEV. 430; WARDEN V. LISCHKO, (1974) 90 NEV. 221, 223; BUT SEE STATE V. LOVE, (1993) 109 NEV. 1136, 1139.

IT IS STILL RECOGNIZED THAT A PRIMARY REQUIREMENT IS THAT COUNSEL ... "CONDUCT CAREFUL FACTUAL AND LEGAL INVESTIGATIONS AND INQUIRIES WITH A VIEW TO DEVELOPING MATTERS OF DEFENSE IN ORDER THAT HE MAY MAKE INFORMED DECISIONS ON HIS CLIENT'S BEHALF BOTH AT THE PLEADING STAGE... AND AT TRIAL..." IN RE SAUNDERS (CAL. 1970) 472 P.2D 921, 926. COUNSEL'S FAILURE TO UNDERTAKE THESE CAREFUL INVESTIGATIONS AND INQUIRIES RESULTS IN OMITTING A CRUCIAL DEFENSE FROM THE CASE. PEOPLE V. STANWORTH, (CAL. 1974) 522 P.2D 1058.

FURTHER, IN PEOPLE V. WHITE, (CAL. 1973) 514 P.2D 69, 71-72 THE COURT NOTED THAT THE AMERICAN BAR ASSOCIATION STANDARDS FOR CRIMINAL JUSTICE SETS FORTH MANDATORY STANDARDS BY WHICH THE ASSISTANCE OF COUNSEL MAY BE JUDGED. THE FOLLOWING SECTIONS OF THE DEFENSE FUNCTION STANDARD ARE OF PARTICULAR RELEVANCE HERE: 1.1(B) (ROLE OF THE DEFENSE COUNSEL); 3.2 (INTERVIEWING OF CLIENT), AND 4.1 (DUTY TO INVESTIGATE).

COUNSEL CANNOT MEANINGFULLY ADVOCATE DEFENDANT'S RIGHTS WITHOUT ACCESS TO WITNESSES, EVIDENCE AND OTHER VITAL TOOLS TO MOUNT A DEFENSE.

### III. MOTION TO WITHDRAWAL GUILTY PLEA.

N.P.S. § 176.165 PROVIDES:

"EXCEPT AS OTHERWISE PROVIDED IN THIS SECTION, A MOTION TO WITHDRAWAL A PLEA OF GUILTY GUILTY BUT MENTALLY ILL OR MILD CONTENDERE MAY BE MADE ONLY BEFORE SENTENCING IS IMPOSED OR IMPOSITION OF SENTENCE IS SUSPENDED. TO CORRECT MANIFEST INJUSTICE, THE COURT AFTER SENTENCE MAY SET ASIDE THE JUDGMENT OF CONVICTION AND PERMIT THE DEFENDANT TO WITHDRAWAL THE PLEA."

A DEFENDANT MAY WITHDRAW A PLEA OF GUILTY OR NOLO CONTENDERE "FOR ANY REASON OR NO REASON" BEFORE THE COURT ACCEPTS THE PLEA. AFTER THE COURT ACCEPTS THE PLEA BUT BEFORE SENTENCING A DEFENDANT MAY WITHDRAW HIS PLEA ONLY IF IT IS REQUESTED BY THE COURT OR THE DEFENDANT PROVIDES A FAIR AND JUST REASON FOR REQUESTING THE WITHDRAWAL. U.S. V. DAVIS, 428 F.3D 802, 808 (9TH CIR. 2005) (FAIR AND JUST REASON EXISTED TO WITHDRAW PLEA BECAUSE DEFENSE COUNSEL GROSSLY MISCHARACTERIZED DEFENDANT'S POSSIBLE SENTENCE).

PERMITTING A DEFENDANT TO WITHDRAW A GUILTY PLEA IS AT THE COURT'S DISCRETION. STATE V. ADAMS, (1978) 94 NEV. 503 (1978). WHEN A DEFENDANT BRINGS A MOTION TO WITHDRAW A GUILTY PLEA, THE COURT HAS A DUTY TO REVIEW THE ENTIRE RECORD TO DETERMINE WHETHER THE GUILTY PLEA WAS VALID. A COURT MAY NOT SIMPLY REVIEW THE PLEA CANVASS IN A VACUUM, CONCLUDE THAT IT INDICATES THAT THE DEFENDANT UNDERSTOOD WHAT HE WAS DOING, USE THAT CONCLUSION AS THE SOLE BASIS FOR DENYING A MOTION TO WITHDRAW A GUILTY PLEA. MITCHELL V. STATE, (1993) 109 NEV. 137.

IN DETERMINING WHETHER A "FAIR AND JUST REASON" EXISTS, COURTS CONSIDER SEVERAL FACTORS, INCLUDING (1) WHETHER THERE HAS BEEN AN ASSERTION OF LEGAL INNOCENCE; (2) THE AMOUNT OF TIME BETWEEN THE PLEA AND MOTION TO WITHDRAW; AND (3) WHETHER THE GOVERNMENT WOULD BE PREJUDICED BY WITHDRAWAL OF THE PLEA. U.S. V. DAVIS, 428 F.3D AT 805 (FACTORS INCLUDE SUBSTANCE OF PLEA COLLUSION, ADDITIONAL EVIDENCE, INTERVENING CIRCUMSTANCES AND REASONS FOR WITHDRAWAL OF PLEA THAT DID NOT EXIST WHEN PLEA WAS ENTERED).

ALL 3 "FAIR AND JUST REASON" FACTORS TIP IN DEFENDANTS FAVOR, NAMELY (1) AT ALL STAGES OF THE PROCEEDING PRIOR TO HIS INDUCED PLEA DEFENDANT VEHEMENTLY MAINTAINED HIS INNOCENCE TO THE CRIMINAL ALLEGATIONS AND CONTINUES TO DO SO; (2) THE AMOUNT OF TIME BETWEEN THE PLEA AND MOTION TO WITHDRAW ARE MINISCULE. I.E., THE PLEA WAS INDUCED OCTOBER 19, 2017 AND COUNSEL HAS REMAINED KNOWLEDGEABLE OF DEFENDANTS DESIRE TO WITHDRAW THE PLEA FOR SOME TIME NOW. (3) THERE COULD BE NOR IS THERE ANY PERCEIVABLE PREJUDICE TO BE CAUSED TO THE STATES CASE. ALL WITNESSES AND EVIDENCE STILL REMAINS AVAILABLE AND INTACT. THE STATE CANNOT DEMONSTRATE THAT A MERE 2 MONTH DELAY HAS BEEN INSTRUMENTAL IN CAUSING ANY HARM TO ITS CASE. ITS CASE REMAINS JUST AS REPE FOR PROSECUTION AS IT DID AND WAS PRIOR TO OCTOBER 19, 2017.

## DISCUSSION

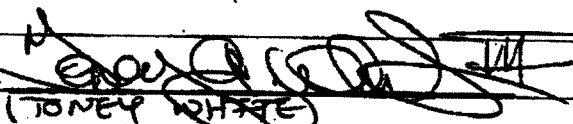
AFTER SOME 10 MONTHS OF REPRESENTATION AND COUNSEL'S FAILURE TO ACT AND ENTENDING UNJUST RESULTS AS A RESULT OF COUNSEL'S INEFFECTIVENESS, DEFENDANT SOUGHT TO PROCEED PRO PER TO GAIN PERSONAL CONTROL OVER AND THE ABILITY TO MANAGE HIS OWN DEFENSE AS EARLY AS DECEMBER 28, 2016. THE DENIAL OF SUCH AND THE COURTS FORCING INCOMPETENT COUNSEL UPON DEFENDANT WHO FAILED TO DEFEND AND INVESTIGATE SUBSTANTIALLY LEVERAGED DEFENDANT AND WAS 1 OF SEVERAL CRITICAL FACTORS INSTRUMENTAL IN THE OCTOBER 19, 2017 GUILTY PLEA EFFECTIVELY COMPROMISING DEFENDANT WITH SOLELY 2 REMAINING OPTIONS: (1) TAKE THE 9 TO 25 YEAR DEAL WITH INEFFECTIVE AND INCOMPETENT COUNSEL UNWILLINGLY FORCED UPON DEFENDANT BY THE COURT AND WITH WHOM WAS DISTRUSTED AND OPERATED UNDER CONFLICT; OR (2) PROCEED TO TRIAL WITHOUT A DEFENSE, UN-EQUIPPED AND UNPREPARED WITHOUT ANY ABILITY TO DEFEND OR DEMONSTRATE HIS INNOCENCE DUE TO COUNSEL'S TAC AND FAILURE OF TRIAL PREPARATION. AT TRIAL DEFENDANT FACED 9 SERIOUS COUNTS IN ADDITION TO SEVERAL HABITUAL OFFENDER ALLEGATIONS WHICH COULD HAVE RENDERED SEVERAL LIFE SENTENCES.

DESPITE DISCOVERING THE FACT THAT DEFENDANT'S GUILTY PLEA WAS ALSO INDUCED BY IMMINENT THREATS OF SERIOUS BODILY HARM AGAINST DEFENDANT AND HIS FAMILY (IE., SISTER WHO SWITCHED ON CO-DEFENDANT DEAN AND DEFENDANT'S DISABLED WHEELCHAIR BOUND MOTHER) AND OF DEFENDANT'S DESIRE TO WITHDRAW HIS GUILTY PLEA, ENJOY HIS RIGHT TO SELF REPRESENTATION AND TRIAL, COUNSEL HAS FAILED TO ENLIGHTEN THE COURT, OR ACT IN DEFENDANT'S BEST INTEREST IN MOTIONING FOR RELIEF.

FOR EACH OF THE FOREGOING REASONS AND THOSE ARTICULATED IN DEFENDANT'S DECEMBER 14, 2017 CORRESPONDENCE TO THE COURT, DEFENDANT MOVES TO WITHDRAW HIS OCTOBER 19, 2017 GUILTY PLEA AND FOR RECUSAL OF COUNSEL, APPOINTMENT OF NEW COUNSEL OR ALTERNATIVE TO PROCEED PRO SE.

RESPECTFULLY SUBMITTED,

DATE: DECEMBER 23, 2017

BY:   
(TONEY WHITE)  
DEFENDANT

T. WHITE-8270790

CCDC

330 S. CASTRO CTR BLVD-

LAS VEGAS, NV, 89101

LAS VEGAS, NV 890

FOREVER  
23 DEC 2017 PM 2:1

SENT FROM CCDC

Barn Swallow

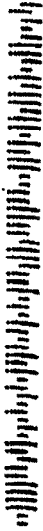
CLERKS OFFICE

DISTRICT COURT, 8TH JUDICIAL DISTRICT  
3RD FLOOR

200 LEWIS AVENUE

LAS VEGAS, NV, 89101

000009-10168



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**SUPREME COURT OF THE STATE OF NEVADA**

**TONY A. WHITE,**

)

Electronically Filed  
Aug 06 2019 04:52 p.m.  
Elizabeth A. Brown  
Clerk of Supreme Court

)

Supreme Court No: **78483**

Appellant,

)

D.C. case no.: C-16-313216-2

)

Dept.: **XII**

v.

)

STATE OF NEVADA,

)

**E-filed**

)

Respondent.

)

)

**MOTION TO STAY APPELLATE PROCEEDINGS AND REMAND TO**

**DISTRICT COURT FOR MOTION TO WITHDRAW GUILTY PLEA**

Comes now the Defendant, Toney Anthony White, and moves this Honorable Court to Stay his Appeal pending in case number 78483 and remand his case to District Court so he can file a Motion to Reconsider Denial of his Motion to Withdraw his Guilty Plea based upon new evidence of his mental/medical condition at the time of his plea.

**0548**



As grounds for this Motion, Defendant Toney A. White submits that his plea of guilty was involuntary and unintelligent based upon his medical conditions at the time he entered his plea. Defendant submits a review of the Defendant's medical/psychiatric history will establish that he was heavily medicated while in custody, taking anti-psychotic medicine which altered his perceptions at the time he entered his plea. (See Exhibit A, medical records from CCDC)

Wherefore, Defendant respectfully requests his case be remanded forthwith to the District Court so he can establish at an evidentiary hearing that he did not fully understand the consequences of his plea. Only after a full review of all the circumstances of the Defendant's plea can a fair decision on his case be made and his unjust conviction and sentence be corrected by allowing his plea to be withdrawn.

DATED this 6th day of August, 2019

/s/ Terrence M. Jackson

Terrence M. Jackson, Esquire  
Law Office of Terrence M. Jackson  
terry.jackson.esq@gmail.com  
Counsel for Appellant, Toney A. White

...

**CERTIFICATE OF SERVICE**

I certify that on the 6th day of August, 2019, I served a copy of this Motion to Stay Appellate Proceeding and Remand to District Court for Withdrawal of Guilty Plea upon all counsel of record:

[ X ] Via Electronic Service (eFlex) to the Nevada Supreme Court;

[ X ] and by United States first class mail with postage affixed to the Nevada

Attorney General and to the Defendant as follows:

STEVEN B. WOLFSON

Clark County District Attorney

steven.wolfson@clarkcountynyda.com

STEVEN S. OWENS

Chief Deputy D.A. - Criminal

APPELLATE DIVISION

steven.owens@clarkcountynyda.com

TONEY A. WHITE, ID#1214172

H.D.S.P. - P.O. Box 650

Indian Springs, NV 89070-0650

AARON D. FORD, ESQUIRE

Nevada Attorney General

100 North Carson Street

Carson City, Nevada 89701

By: /s/ Ila C. Wills

Assistant to T. M. Jackson, Esq.

**SUPREME COURT OF THE STATE OF NEVADA**

---

**TONEY A. WHITE**

Supreme Court No: **78483**

Appellant

**E-filed**

---

**EXHIBIT 'A'**

**MEDICAL RECORDS FROM CCDC**

28-9  
white



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony  
Name of Patient

11/19  
Date

3270790 7/11/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 1000mg, Risperidol 10mg, Metamucil powder,  
Elucavazole 400mg, Benztropine Mesylate 1mg — CPC  
CPC

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill-effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

11/19  
Date/Time

2000 med pass

[Signature]  
Witness

[Signature]  
Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

TONEY WHITE

Name of Patient

01/01/19

Date

8270790 7-19-72

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

STOPPED MEDS PENDING DETERMINATION OF

CYST CAUSE ON BRAIN/NASAL

Ethinac. Patch 28133

oxytropino 1mg  
Sertraline 50mg

Quetiapine 50mg

Haloperidol 15mg

Flurazepate 15mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Toney White

Patient Signature

01/01/19

Date/Time

0800

Banks, LPN

Witness

Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

Toney White

Name of Patient

1/2/19

Date

8270790 7/19/72

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

levetiracetam 1000mg fluconazole 400mg  
haloperidol 15mg sertraline 50mg  
nutraceuticals benztropine 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill-effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused

Patient Signature

1/2/19 0800

Date/Time

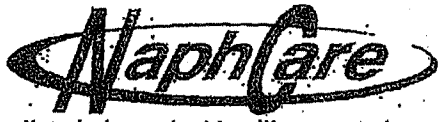
C9417D

Witness

[Signature]

Witness

25-9  
white



Your Independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony  
Name of Patient

11/21/19  
Date

8270790 7/16/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 1000mg, Haloperidol 10mg, Metamucil, Fluconazole 400mg  
Benzotropine Mesylate 1mg CPC  
CPC

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill-effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

11/21/19  
Date/Time

2000 red press

P# 7395  
Witness

C (b)  
Witness



URGENT  
LAS VEGAS METROPOLITAN POLICE DEPARTMENT  
CLARK COUNTY DETENTION CENTER

JAN 01 2019

**MEDICAL/DENTAL/PSYCHIATRIC REQUEST**

Name: WHITE TONEY ID: 8270790  
LAST FIRST

Housing: 25-9 Date of Birth: 7/19/72 Date: 11/1/19

Description of Illness or Injury: I NEED TO SEE THE DOCTOR PROMPT AS I AM IN  
EXTREME PAIN AND THINK IVE CONTRACTED ASBESTAS OR CONTRACTED  
CONDITIONS FROM MY MY MEDICATION WHICH HAVE BEEN THE  
REASON I STOPPED TAKING THEM. MY MUSCLES ARE DEGENERATING  
AND ARE EXTREMELY PAINFUL.

TO BE COMPLETED BY STAFF ONLY

Date/Time Triaged: \_\_\_\_\_ Category: ☐ 1 ☐ 2 ☐ 3 RN

S: \_\_\_\_\_

O: TEMP: \_\_\_\_\_ PULSE: \_\_\_\_\_ RESP: \_\_\_\_\_ BP: \_\_\_\_\_

**Appointment Scheduled  
with  
Psych Provider**

A: \_\_\_\_\_

B: \_\_\_\_\_

Refer To: ☐ Sick Call Doctor ☐ Nurse ☐ Psychiatrist ☐ Dentist ☐ DON ☐ Other: \_\_\_\_\_

Fee Charge: ☐ \$ 8.00 Medical Access Fee ☐ \$5.00 Medication Fee ☐ \$3.00 Medication Renewal Fee

☐ \$200.00 or actual cost whichever is higher ☒ No Charge

I understand pursuant to NRS 211.140 that I may be responsible for payment for medical care (see back of this form).

I understand that a Medical Access Fee and/or Medication Fee will be deducted from my cash account.

I understand that fees may be collected at a later date if funds are not currently available. If I do not have sufficient funds to pay and money is deposited to my cash account, the amount I owe for these services will be deducted before any funds are available to me. No inmate will be refused in-house medical services based upon an inability to pay at the time the healthcare is provided.

Inmate Signature: [Signature] Date: 01/01/19

Staff Signature: [Signature] Date: 1/2/19 Time: 0500

INMATE NAME (please print)	ID#	HOUSING:
<u>TONEY WHITE</u>	<u>8270790</u>	<u>25-9</u>

DISTRIBUTION: WHITE - Medical Records YELLOW - Inmate





Your Independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tony Anthony  
Name of Patient

11/3/19  
Date

8275790 7/11/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Keppra 1000, Haloperidol 10, metformin 1 pack, Eliquis 400mg  
Baclofen Mesylate 1mg. CPC  
CPC

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

11/3/19  
Date/Time

2000 med pass

[Signature]  
Witness

[Signature]  
Witness

# RELIGIOUS DIET ORDER

1-3-19  
DIET START DATE

Release  
DIET END DATE

Toney White  
INMATE'S NAME

8270790  
INMATE'S ID NUMBER

259  
INMATE'S LOCATION

☐

PORK FREE RELIGIOUS DIET

☐

LACTO-OVO VEGETARIAN

☐

TOTAL VEGETARIAN (VEGAN)

☒

OTHER

Kosher / Halal

Bonnie Polley  
AUTHORIZED SIGNATURE

1-3-19  
DATE REQUESTED

 **ARAMARK**  
Correctional Services

2J-09

LAS VEGAS METROPOLITAN POLICE DEPARTMENT  
CLARK COUNTY DETENTION CENTERTSP  
11/4/19

## MEDICAL/DENTAL/PSYCHIATRIC REQUEST

Name: WHITE TONY ID: 8270790  
Housing: 2J-9 Date of Birth: 7/19/72 Date: 11/4/19  
Description of Illness or Injury: PLEASE CLARIFY MY ACCOUNT AND ORDER  
THAT I BE WEIGHED.

## TO BE COMPLETED BY STAFF ONLY

Date/Time Triaged: \_\_\_\_\_ Category ☐ 1 ☐ 2 ☐ 3 \_\_\_\_\_ RN  
S: \_\_\_\_\_

O: TEMP: \_\_\_\_\_ PULSE: \_\_\_\_\_ RESP: \_\_\_\_\_ BP: \_\_\_\_\_  
Weight check ordered

A: \_\_\_\_\_

B: \_\_\_\_\_

Refer To: ☐ Sick Call Doctor ☐ Nurse ☐ Psychiatrist ☐ Dentist ☐ DON ☐ Other: \_\_\_\_\_

Fee Charge: ☒ \$8.00 Medical Access Fee ☐ \$5.00 Medication Fee ☐ \$3.00 Medication Renewal Fee  
☐ \$200.00 or actual cost whichever is higher ☐ No Charge

I understand pursuant to NRS 211.140 that I may be responsible for payment for medical care (see back of this form).

I understand that a Medical Access Fee and/or Medication Fee will be deducted from my cash account.

I understand that fees may be collected at a later date if funds are not currently available. If I do not have sufficient funds to pay and money is deposited to my cash account, the amount I owe for these services will be deducted before any funds are available to me. No inmate will be refused in-house medical services based upon an inability to pay at the time the healthcare is provided.

Inmate Signature: [Signature] Date: 11/4/19

Staff Signature: [Signature] Date: 11/5/19 Time: 8:19

INMATE NAME (please print)	ID#	HOUSING:
<u>TONY WHITE</u>	<u>8270790</u>	<u>2J-9</u>

DISTRIBUTION: WHITE - Medical Records YELLOW - Inmate



**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tony Anthony  
Name of Patient

1/4/19  
Date

8270790  
8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 1000mg, Haloperidol 10mg, Natural Fiber,  
Fluconazole 400mg, Bupropion Mesylate 1mg — CAC  
— CPC

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

1/4/19 2:00 PM  
Date/Time

T167108  
Witness

CAC  
Witness



URGENT  
LAS VEGAS METROPOLITAN POLICE DEPARTMENT  
CLARK COUNTY DETENTION CENTER

**MEDICAL/DENTAL/PSYCHIATRIC REQUEST**

Name: WHITE TONEY ID: 8270790  
Housing: 25-09 Date of Birth: 7/19/72 Date: 01/04/19

Description of Illness or Injury: I NEED TO TALK TO THE SOCIAL WORKER PSYCHOLOGIST  
ABOUT CONTINUING THOUGHTS OF SELF HARM AND WORTHINESS AND TO  
DISCUSS MY TREATMENT LEVEL.

TO BE COMPLETED BY STAFF ONLY

Date/Time Triaged: \_\_\_\_\_ Category ☐ 1 ☐ 2 ☐ 3 \_\_\_\_\_ RN

S: \_\_\_\_\_

O: TEMP: \_\_\_\_\_ PULSE: \_\_\_\_\_ RESP: \_\_\_\_\_ BP: \_\_\_\_\_

Patient concerned about housing. Wanting to be transferred  
to psych housing. Patient informal that there is a class feature  
A: And custody due to the fact that he is a Max inmate.  
B: Patient advised to take psych per. if needed, also to inform an  
officer of SE/HI.

Refer To: ☐ Sick Call Doctor ☐ Nurse ☐ Psychiatrist ☐ Dentist ☐ DON ☐ Other: \_\_\_\_\_

Fee Charge: ☐ \$ 8.00 Medical Access Fee ☐ \$5.00 Medication Fee ☐ \$3.00 Medication Renewal Fee  
☐ \$200.00 or actual cost whichever is higher ☐ No Charge

I understand pursuant to NRS 211.140 that I may be responsible for payment for medical care (see back of this form).

I understand that a Medical Access Fee and/or Medication Fee will be deducted from my cash account.

I understand that fees may be collected at a later date if funds are not currently available. If I do not have sufficient funds to pay and money is deposited to my cash account, the amount I owe for these services will be deducted before any funds are available to me. No inmate will be refused in-house medical services based upon an inability to pay at the time the healthcare is provided.

Inmate Signature: [Signature] Date: 01/04/19

Staff Signature: [Signature] Date: 1/4/19 Time: 1510

INMATE NAME (please print) <u>TONEY WHITE</u>	ID#: <u>8270790</u>	HOUSING: <u>25-9</u>
--	------------------------	-------------------------

DISTRIBUTION: WHITE - Medical Records YELLOW - Inmate



Your Independent Health Care Choice

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony Anthony  
Name of Patient

11/5/19  
Date

8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 1000mg, Haloperidol 10mg, Metamucil Powder — CPC  
Fluconazole 400, Benztropine Mesylate 1mg — CPC  
————— CPC

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

11/5/19 2:00 med pass  
Date/Time

[Signature]  
Witness

[Signature]  
Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

11/6/19

Name of Patient

Date

827,790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 800mg, HALOPERIDOL 10mg, METAMUCIL,  
FLUCONAZOLE 150mg, COBAMIN 1mg

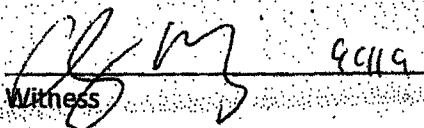
The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

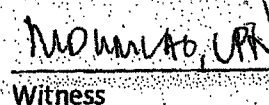
I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Date/Time

  
Witness

  
Witness



**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

Name of Patient

1/7/19  
Date

8270790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1000mg, HALOPERIDOL 5mg, METAMUCIL,  
FLUCONAZOLE 400mg, COLEMAN 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Date/Time

A. WILLIAMS 14524

Mohamed, LBN

Witness

Witness





Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

Toney White

Name of Patient

1/10/19

Date

8210790

7/19/72

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

levetiracetam 1000mg

fluoxetine 400mg

haloperidol 15mg

sertraline 50mg

nutritional fiber

benztropine 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused

Patient Signature

1/10/19 0800

Date/Time

Witness

[Signature]

Witness

[Signature]



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

Toney White  
Name of Patient

1/12/19  
Date

8270790 7/19/72  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

levetiracetam 1000mg sertraline 50mg  
haloperidol 15mg benztropine 1mg  
natural fiber

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused  
Patient Signature

1/12/19 0800  
Date/Time

[Signature]  
Witness

[Signature]  
Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

Taney White 01/19/2019  
Name of Patient Date

8270790 07/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

LEVETIRACETAM 500mg Tab, Fluoxetine 200mg Tab  
Haloperidol 5mg Tab, Sertraline HCL 50mg, Benzodiazepam 400mg Mometasone Oral 1mg  
Natural Fibre Laxative Oral 28.3% Powder

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused 01/19/2019 0800  
Patient Signature Date/Time

[Signature] 8232 [Signature]  
Witness Witness

15-9  
skate



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony, Anthony  
Name of Patient

11/19/19  
Date

8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 1000mg, Haloperidol 10mg, Benztropine Mesylate 1mg  
Natural Fiber Powder, Fluconazole 400mg GR  
CPC

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

11/19/19 2000 mid pass  
Date/Time

[Signature]  
Witness

[Signature]  
Witness



your independent health care choice.

#25-09

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tracy Anthony  
Name of Patient

1/25/2019  
Date

8270790 / 07/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

LEVETIRACETAM 500mg Tab Subcutaneous Heparin Solution 28.3% Powder  
Haloperidol 10 mg TABS Fluorometholone 200mg Tab  
Baclofen Mesylate 1mg Tab

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

01/25/2019 2000  
Date/Time

T12856L  
Witness

GA  
Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

Toney White  
Name of Patient

1/26/19  
Date

8270790 7/19/72  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

levetiracetam 1000mg

Sertoline 50mg

haloperidol 15mg

natural fiber

benztropine 1mg

fluconazole 400mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused  
Patient Signature

1/26/19 0800  
Date/Time

[Signature]  
Witness

[Signature]  
Witness





Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

Name of Patient

1/29/19

Date

827-790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1000mg, HAWPCRIDAL 10mg, COCAENTIN 1mg,  
MELAMICOL, FLUCONAZOLE 400mg.

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

[Signature] 13850

Witness

Date/Time

Monmouth, NJ

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

Toney White

Name of Patient

1/30/19

Date

8270190

1/19/12

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

levoracetamol 100mg

sertraline 50mg

haloperidol 15mg

natural laxative

benztropine 1mg

fluconazole 400mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused

Patient Signature

1/30/19 0800

Date/Time

[Signature]  
Witness

[Signature]  
Witness





Your independent health care choice

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

Toney White  
Name of Patient

11/31/19  
Date

8210790 7/19/12  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

<u>levetiracetam 1000mg</u>	<u>sertraline 50mg</u>
<u>haloperidol 15mg</u>	<u>natural fiber</u>
<u>benztropine 1mg</u>	<u>fluconazole 400mg</u>

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused  
Patient Signature

11/31/19 0800  
Date/Time

[Signature]  
Witness

[Signature]  
Witness

1/29/2019 2:01:51 PM Pacific Standard Time



Clark County Detention Center  
330 S. Casino Center Blvd.  
Las Vegas, NV 89101  
702-671-6698

MAR

PICTURE  
NOT AVAILABLE

<b>Patient:</b>	WHITE, TONEY ANTHONY	<b>#:</b>	08270790	<b>Lang:</b>	
<b>DOB:</b>	7/19/1972 (Age=46)	<b>Sex:</b>	M	<b>Race:</b>	B
<b>Housing:</b>	LVMPD-ST-2J-09-S	<b>SSN:</b>	**HIDDEN**	<b>Type:</b>	
<b>Status:</b>	ACTIVE	<b>Booking Date:</b>	2/3/2016 12:00:00 AM Pacific Standard Time	<b>Release:</b>	

**Allergies:** Carbamazepine, Depakote, Dilantin, Phenobarbital

Name	Directions	Start	Stop	Provider Name	Placed By	Additional Information	Date Created	Discontinued By	Discontinued Date	Discontinued Reason
Levetiracetam Oral 500 MG Tablet	Take 1000 mg by mouth twice a day for 90 day(s).	12/19/2018	3/18/2019 11:59 PM Pacific Daylight Time	MARTINEAU, KYLE PA	Daryl Phillips RN		12/19/2018 9:25 AM Pacific Standard Time			
Haloperidol Oral 5 MG Tablet	Take 15 mg by mouth once in the morning for 90 day (s). *for AVH.	12/15/2018 8:00 AM Pacific Standard Time	3/14/2019 11:59 PM Pacific Daylight Time	FISHER, TERRI NP	Terri Fisher NP	for AVH	12/15/2018 4:52 PM Pacific Standard Time			
Haloperidol Oral 10 MG Tablet	Take 10 mg by mouth once before bedtime for 90 day (s). *for AVH.	12/15/2018 8:00 PM Pacific Standard Time	3/14/2019 11:59 PM Pacific Daylight Time	FISHER, TERRI NP	Terri Fisher NP	for AVH	12/15/2018 4:51 PM Pacific Standard Time			
Benztropine Mesylate Oral 1 MG Tablet	Take 1 mg by mouth twice a day for 90 day(s).	1/20/2019	4/19/2019 11:59 PM Pacific Daylight Time	FISHER, TERRI NP	Terri Fisher NP		12/15/2018 4:51 PM Pacific Standard Time			

0574

Name	Directions	Start	Stop	Provider Name	Placed By	Additional Information	Date Created	Discontinued By	Discontinued Date	Discontinued Reason
Sertraline HCl Oral 50 MG Tablet	Take 50 mg by mouth once in the morning for 90 day (s).	1/20/2019	4/19/2019 11:59 PM Pacific Daylight Time	FISHER, TERRI NP	Terri Fisher NP		12/15/2018 4:50 PM Pacific Standard Time			
Natural Fiber Laxative Oral 28.3 % Powder	Take 1 by mouth twice a day for 90 day(s).	11/21/2018	2/18/2019 11:59 PM Pacific Standard Time	MARTINEAU, KYLE PA	Scott Blondeaux Charge RN		11/21/2018 11:47 AM Pacific Standard Time			
Fluconazole Oral 200 MG Tablet	Take 400 mg by mouth twice a day for 90 day(s).	11/21/2018	2/18/2019 11:59 PM Pacific Standard Time	MARTINEAU, KYLE PA	Kyle Martineau PA		11/16/2018 11:52 AM Pacific Standard Time			
Lower Bunk	once before bedtime HS	3/1/2018	2/28/2019 11:59 PM Pacific Standard Time	WILLIAMSON, LARRY MD	Camisha Gathright LPN		3/1/2018 8:32 AM Pacific Standard Time			

**STEINBERG DIAGNOSTIC MEDICAL IMAGING CENTERS**

Phone: (702) 732-6000 [www.sdmi-lv.com](http://www.sdmi-lv.com) Fax: (702) 732-6071

Patient Name: Toney White

Patient: Toney White  
SDMI #: 1614330  
Pt. DOB: 07/19/1972  
Pt. Sex: Male  
Date of Service: 12/14/18  
SDMI Location: NW

Physician: Kyle Martineau PA-C  
Dr. Fax: (702) 366-0576  
Dr. Phone: (702) 671-5698  
Dr. Addr.: 330 S Casino Center Blvd Las Vegas, NV 89101  
Cc:  
Cc:

---

**MRI BRAIN WITH AND WITHOUT CONTRAST**

**CLINICAL HISTORY:**

Seizure disorder.

**TECHNIQUE:**

Sagittal T1, Axial T2, Axial FLAIR, . Axial and coronal T1 post gadolinium. 10 cc's IV dotarem administered.

**COMPARISON:**

No significant change compared with May 2018

**FINDINGS:**

Favor moderate supratentorial small vessel ischemic change advanced for age. No change in numerous bilateral fairly symmetrical subcentimeter supratentorial white matter abnormalities. Largely subcortical and deep white. No individual focus or pattern that would implicate demyelinating disease/MS based on the MRI. Correlate with neurologic exam. No mass. Large vessel flow voids are patent. There is no restricted diffusion.

**IMPRESSION:**

No significant change. Favor moderate supratentorial small vessel ischemic change advanced for age

Interpreted by: David Browne 12/14/2018 1:25 PM

Electronically approved by: David Browne, M.D. Date: 12/14/18 13:55

**Physician Access To Images and Reports Is Available Online at [www.sdmi-lv.com](http://www.sdmi-lv.com)**

2767 N. Tenaya Way, Las Vegas, NV 89128  
4 Sunset Way, Building D, Henderson, NV 89014  
800 N Gibson Rd Ste 110, Henderson, NV 89011

2950 S. Maryland Pkwy, Las Vegas, NV 89109  
6925 N Durango Dr, Las Vegas, NV 89149  
800 Shadow Ln, Las Vegas, NV 89106

2850 Siena Heights, Henderson, NV 89052  
9070 W. Post Road, Las Vegas, NV 89148

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Clark County Detention Center  
330 S. Casino Center Blvd.  
Las Vegas, NV 89101  
702-671-5698

1/29/2019 1:55:03 PM Pacific Standard Time

## Offsite Healthcare Authorization

This section to be completed by NaphCare Staff - Approval Number - TC161101

1) Inmate's Name (Last, First Middle Initial) <b>WHITE, TONEY A</b>	2) Inmate's ID Number <b>08270790</b>	3) Date of Birth <b>7/19/1972</b>
4) Social Security Number	5) Gender <b>M</b>	6) Book Date / Release Date <b>2/3/2016 /</b>
7) Responsible Party <b>Reprice by NaphCare</b>	Electronically signed by <b>MARTINEAU, KYLE (1235676610)</b> <b>12/18/2018 1:53:25 PM</b>	

8) Reason  
**F/U after MRI of brain**

9) Allergies  
**Carbamazepine, Depakote, Dilantin, Phenobarbital**

10) Order  
**DR. KEVIN XIE 3006 S. MARYLAND PKWY STE 765, 7TH FLOOR LAS VEGAS, NV 89109 P 702.731.8115**

11) Transportation Type  
**Unknown**

12) History of Present Illness / Current Symptoms / Current Treatments / Medications  
**Levetiracetam Oral 500 MG Tablet, Haloperidol Oral 5 MG Tablet, Haloperidol Oral 10 MG Tablet, Benzotropine Mesylate Oral 1 MG Tablet, Sertraline HCl Oral 50 MG Tablet, Natural Fiber Laxative Oral 28.3 % Powder, Fluconazole Oral 200 MG Tablet, Lower Bunk**

**Asthma, Seizure Disorder**

13) Type Requested (E.G. Cardiology, Surgical Consult, CT/MRI) **Neurology** 14) Details

15) Name of Facility / Physician Where Services Requested  
**PLACECARD PROVIDER**

16) Service Date  
**1/30/2019 11:00:00 AM**

17) Facility / Physician Address  
**DR. KEVIN XIE 3006 S. MARYLAND PKWY STE 765, 7TH FLOOR LAS VEGAS, NV 89109 P 702.731.8115**

**Instructions to Off Site Providers**

1. NaphCare will not be financially responsible for any non-emergency treatments that are not directly related to the diagnosis printed on this form.  
To obtain authorization for additional treatments, you must contact NaphCare Utilization Approval by calling (205) 536-8400 or (800) 834-2420 ext. 8695.
2. Because of security concerns, inmates must NOT be informed of follow-up appointments or possible hospitalization.
3. Complete the bottom portion of this form, place it in a sealed envelope, and give to the Correctional Officer when the inmate is returned.
4. Use the Inmate's I.D. Number as the Insured I.D. Number on claim forms.

**This section to be completed by off site provider**

Findings

Medication Changes

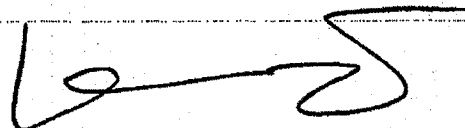
Recommendations

- 1) lab
- 2) Aspirin 81 mg daily
- 3) continue all other meds
- 4) See Pr xie in 3 M

Provider's

Signature:

Date

 1/30/19

1/30/19

**Kevin Xie, MD, PHD, MBA, Neurologist, Epileptologist**

**Board Certified In Adult Neurology and Epilepsy**

**Nevada Neuroscience Institute**

**Sunrise Hospital & Medical Center**

**3006 Maryland Parkway, Suite 765 Las Vegas, NV 89109**

**Phone: 702-961-7310; Fax: 844-231-4920**

**See my assistant before you leave the clinic and keep this sheet for your record**

**Old record, Old CT or MRI film and report, EEG report,**

**Patient agreement form, Urine drug screen, PDMP**

**CT, MRI/MRA/MRV, Pet, Wada, DATSCAN, US**

**EEG (routine), Sunrise Hospital Inpatient EEG Monitoring (Dr. Xie)**

**EMG, Here at Dr. Xie's Clinic, LAB.**

**Referral,**

**PT, OT, Speech, Dietitian Neuropsychology test**

**National registry for women with epilepsy and pregnancy, CBD oil**

**VNS for epilepsy, Neuropace for epilepsy, Cefaly for migraine/Headache, Eneura  
Spring TMS for migraine, DBS for tremor and PD Wrist splint. DMV form. Letter.**

**Trigger point injection, Occipital nerve block, Botox injection Preauthorization**

**Continue all medications**

**New Medication:**

*baby Aspirin*

**Next Office visit:**

*3 M*

**To view your test results, please sign in patient portal of our EMR system  
(ECW). The results will be available as soon as physicians review them.**

**Otherwise, they are also available on next office visit. You will not receive  
notification in the mail.**

8-10 hrs fasting

## Order Form

385711NN1 NV NEUROSCIENCES INST

3006 S MARYLAND PKWY, STE 785  
LAS VEGAS, NV, 891092248

702-961-7310 844-231-4920

Req/Ctrl# (CD-): 318138811

KEVIN C XIE, MD

NPI: 1700868155

Neurology

White, Toney, Male, 07/19/1972 ID: 8X301894482

Today: 01/30/2019 12:21 PM

702-671-5698 330 S CASINO CENTER BLVD, LAS VEGAS, NV, US 89101-6102

Order Date: 01/30/2019 11:00 AM

Primary Insurance Name: NAPHCARE INC

Insurance Address: 2090 COLUMBIANA RD STE 4000 , BIRMINGHAM , AL , 352162158

Subscriber Number: TC142286

Insured Name: White, Toney

Address: 330 S CASINO CENTER BLVD, LAS VEGAS, NV, US 89101-6102

Priority	Lab	Fast	Source/Cl Date and Time	Assessment(s)	Clinical Info
Routine	LEVETIRACETAM (QLV-15142X)	No		- G40.909, Seizure disorder	
Routine	LIPID PANEL (80061)	No		- G40.909, Seizure disorder	
Routine	Oxcarbazepine (Trileptal),S (L-716928)	No		- G40.909, Seizure disorder	



Electronically Signed By:  
KEVIN C XIE, MD

Signature of  
Patient/Guardian

0580



DATE	TIME	INAMTE	HOUSING	ADDRESS
WED 1/30	11:00 AM EST ✓ 1	WHITE, TONEY #08270790 7/19/1972 ✓ MAX/PC	-ST -2J -09	DR. KEVIN XIE 3006 S. MARYLAND PKWY STE 765, 7TH FLOOR LAS VEGAS, NV 89109 ✓ P 702.731.8115
SPECIALTY: NEURO			ROUTINE	
SCHEDULED WITH: JORDAN			CONFIRMED WITH: Sharon	
OFFSITE NOTES: <u>Asprin ordered</u>				

\*PLEASE DO NOT SHARE ANY FUTURE APPOINTMENTS WITH THE PATIENT\*

**PLEASE RETURN PACKET TO:**  
**NORTH TOWER THIRD FLOOR MEDICAL ADMIN OFFICE.**

FOR OFFICER USE ONLY				
CIRCLE ONE:	COMPLETED	REFUSED	RELEASED	OTHER
REASON IF APPT IS NOT COMPLETED:				
SIGN: <u>[Signature]</u>		DATE: <u>1-30-19</u>		

INMATE SIGNATURE FOR REFUSAL: \_\_\_\_\_

**CALL (702)671-5698 FOR ANY OTHER INFORMATION**



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

2/9/14

Name of Patient

Date

827079 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

FLUCONAZOLE 400mg, METAMUCIL, KETPPA 1000mg,  
COGENTIN 1mg, HALDOL 10mg


The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

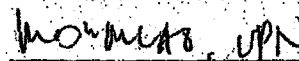
By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

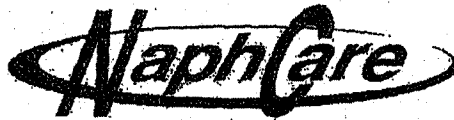
Date/Time

 13604

Witness

 UPN

Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

WHITE, TONEY  
Name of Patient

2/5/19  
Date

8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

FLUCONAZOLE 400mg, METAMUCIL, COSENTIN 1mg,  
HALDOL 10mg, KEPRA 600mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

[Signature] 13606

Witness

Date/Time

[Signature]

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONY 2/6/19  
Name of Patient Date  
8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

FLUCONAZOLE 400mg, METAMUCIL, COCAERTIN 1mg,  
HALDOL 10mg, LEVUPRA-1000mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

[Signature] 13604  
Patient Signature Date/Time  
[Signature]  
Witness Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

Toney White

Name of Patient

2/1/9

Date

8270790 7/12/72

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

aspirin 81mg      benztropine 1mg      fluconazole 400mg  
levetiracetam 1000mg      sertraline 50mg  
haloperidol 15mg      natural fiber

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

refused  
Patient Signature

2/1/9 0800  
Date/Time

238708  
Witness

D. Peakerby LPW  
Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tanya  
Name of Patient

2-7-19  
Date

8270792 / 07-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500mg Tab, Gabapentin 10mg Tablet,  
Benzotropine Mesylate 1mg Tablet, a Natural Fiber Laxative  
28.3% Powder, Fluconazole 200 mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

2/7/19 2000  
Date/Time

[Signature]  
Witness

[Signature]  
Witness

#9



Your independent health care choice

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tony  
Name of Patient

2-8-2019  
Date

8270790 / 07-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500 mg Tablet; Natural Fibers  
Haloperidol 10mg Tablet; Fluconazole 200mg Tablet  
Benzotropine Methylate 1mg Tab

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

2-8-2019 / 2:00  
Date/Time

A171148  
Witness

[Signature]  
Witness

25



**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White Tanya 29 2019  
Name of Patient Date

827 0790 7 19 1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500mg Tab Hydrocodone 10mg Tab  
Benzotropine Mesylate Pw Tab Natural Fibra 28.3% Powder  
Thiamazole 200mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

[Signature]  
Patient Signature

2-9-2019  
Date/Time

[Signature]  
Witness

[Signature]  
Witness





Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

WHITE, TONY  
Name of Patient

2/10/19  
Date

8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 500mg, HALDOL 10mg, COCAINE 1mg,  
METAMUCIL, FURCANAZOLE 400mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

J. ARCEA 17107

Witness

Date/Time

MONICA L. CAR

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONY

Name of Patient

2/10/19

Date

8270790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1000mg, HALDOL 10mg, COCAINE 1mg,  
METAMPHETAMINE, FLUCONAZOLE 400mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

J. ARCEA 17107

Witness

Date/Time

MONICA L. CAR

Witness



**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, Tony

2/11/19

Name of Patient

Date

827090 7/16/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1000mg, PAINDA 10mg, COCAINE 1mg,  
METAMUCIL, FLUOROKAL 100mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Date/Time

Witness

Witness



Your Independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONY

2/12/19

Name of Patient

Date

B2707A6 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1000mg, HALPOL 10mg, METAMUCIL,  
COSENTIN 1mg, FLUCONAZOLE 400mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Date/Time

BUENO PH (710)

MOU MHO, UPN

Witness

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tanya  
Name of Patient

02-13-2019  
Date

8270740 / 07/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500 mg Tablet, Haloperidol 10 mg Tablet, Bupropion 150 mg Tablet,  
Natural Fiber Laxative Oral 48.3% Powder  
Thiamine 200 mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

02/13/2019 / 2:00  
Date/Time

M. G. M. 6620  
Witness

as  
Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, Tanya  
Name of Patient

2-14-2019  
Date

8270790 / 02-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500mg advised Head Location 28.36 Border  
Hydrocodone 10mg Tablet Fluorocort 200mg Tablet  
Baclofen 10mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Tanya  
Patient Signature

2-14-19 / 2000  
Date/Time

MSUIT 9225  
Witness

GS  
Witness

25-9

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDUREWhite, Tanya  
Name of Patient2-16-2019  
Date8270790 / 07-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500 mg, Haloperidol 10 mg Tablet,  
Benzotropine Mesylate 1mg Tab Fluoxetine 200 mg Tab  
Dutasteride 28.3% Powder

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

2-16-2019 / 2000  
Date/Time

588611  
Witness

[Signature]  
Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONY  
Name of Patient

2/17/19  
Date

827-790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1000mg, METAMUCIL, COLEMAN 1mg,  
HALDOL 1mg, FLUCONAZOLE 400mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date/Time

D17542C  
Witness

N. P. K. L. A. D., LPH  
Witness





Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

Name of Patient

2/18/19

Date

8270790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

FEPPRA 100mg, HALDOL 5mg, COLENTIN 1mg,  
METAMUCIL, FLEXOR-KNEE 40mg

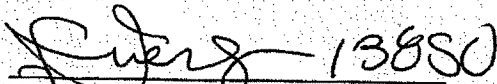
The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.


I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Date/Time

  
Witness

  
Witness

259



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tony  
Name of Patient

2-19-2019  
Date

8270790 / 07-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Lorazepam 500mg Tablet, Haloperidol 10mg Tablet,  
Susiprin Mesylate 1mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

R. White  
Patient Signature

2-19-2019 / 2000  
Date/Time

[Signature] 13650  
Witness

[Signature]  
Witness

25-9



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Teresa

Name of Patient

2-20-2019

Date

8270790 / 07-19-1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Aspirin 81mg, Levamisole 500mg Tab, Haloperidol 5mg Tab,  
Dantrolene Mesylate 1mg Tab, Sildenafil 50mg Tab

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

2-20-19/0424

Date/Time

2-20-19/0424

R9223 H

Witness

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

2/21/19

Name of Patient

Date

8270746 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

ASPIRIN 81mg, KAPPA 1000mg, HALLDOL 15mg,  
COLEMIN 1mg, ZOLOFT 50mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Date/Time

[Signature] 13850

[Signature]

Witness

Witness



**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

2/22/19

Name of Patient

Date

8270790 / 7/19/72

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

- ASA 81 MG, KEPRA 1000 MG, HALDOL 15 MG,  
BAMPROFENE 1MG, ZOLOFT 50 MG

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

REFUSED

Patient Signature

J. OB 9895

Witness

2/22/19 0700

Date/Time

PM LPA

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY  
Name of Patient

2/26/19  
Date

8270790 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

LEPPRA 1000mg, HALDOL 6mg, ZOGENTIN 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date/Time

[Signature] 17527  
Witness

[Signature]  
Witness

239



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony  
Name of Patient

2/27/19  
Date

8270790 / 7062279 / 4/30/86 8270790 / 7/19/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Aspirin, Keppra, Haloperidol, Cogentin  
and Zoloff

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

02/27/19/DBW  
Date/Time

E/4/4/6/19  
Witness

Wine  
Witness

25-09



RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White - Tony  
Name of Patient

2-27-2019  
Date

8270790 / 07-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Lamotrigine 500mg  
Haloperidol 10mg Tablets  
Bupropion 150mg Tablets

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

2-27-2019  
Date/Time

C17432  
Witness

[Signature]  
Witness





Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Toney  
Name of Patient

2-28-19  
Date

8270790 7/19/12  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Asprin 81mg, Keppra 1000mg, Haldol 15mg,  
Cogentin 1mg, Zolof 50mg  
JR

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

OBW 2-28-19  
Date/Time

[Signature] 8-2-31  
Witness

[Signature]  
Witness



RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony  
Name of Patient

3-5-19  
Date

8270790 719-72  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Keppra 1000mg, Haldol 10mg,  
Cerenitin 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

[Signature] 17527  
Witness

Date/Time

John 3-5-2019  
[Signature]  
Witness

2)



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tony      3-7-19  
 Name of Patient      Date  
8270790 / 7-19-72  
 Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Aspirin, Heparin, Haldol 15mg,  
Augmentin 1g, Sertraline 10mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Mfund  
 Patient Signature

017515C  
 Witness

3-7-19 / 0800  
 Date/Time  
[Signature]  
 Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tony  
Name of Patient

3-8-19  
Date

8270790 7-19-72  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

<u>Aspirin 81mg</u>	<u>Benztrapine 1mg</u>
<u>Levetiracetam 1000mg</u>	<u>Sertraline 50mg</u>
<u>Valproic acid 15mg</u>	

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

3-8-19 0800  
Date/Time

[Signature]  
Witness

V Banks LPN  
Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Toney  
Name of Patient

3-14-2019  
Date

8270296  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500mg Haloperidol 10mg Tablet  
Benztropine Mesylate 1mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

3-14-19 / 2000  
Date/Time

N. G. 6678  
Witness

[Signature]  
Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Toney  
Name of Patient

3-16-19  
Date

7-19-72 8270790  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Haldol 15mg, Asprin 81mg, Keppra 1g, Cogentin 1mg  
Zolof 50mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

\_\_\_\_\_  
Patient Signature

OBW 3-16-19  
Date/Time

[Signature]  
Witness

Jaylon Post  
Witness

**SUPREME COURT OF THE STATE OF NEVADA**

---

**TONEY A. WHITE**

Supreme Court No: **78483**

Appellant

**E-filed**

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**EXHIBIT 'A' - Part 2**

**MEDICAL RECORDS FROM CCDC**



RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

WHITE, TONEY  
Name of Patient

3/17/19  
Date

8270790 7/17/1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

HALDOL 10 mg, KEPRA 1000 mg, COLENTIN (m)

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

JS MITH 1388

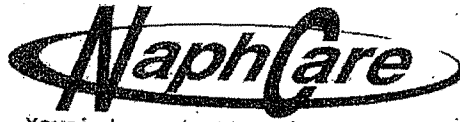
Witness

Date/Time

MOHAMAD, LPN

Witness





Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

WHITE, TONEY

Name of Patient

3/19/19

Date

8270790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

HALDOL 10 mg, DOGENTIN 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

*[Handwritten Signature]*

Witness

Date/Time

*[Handwritten Signature]*

Witness



**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White toney

Name of Patient

3-21-19

Date

7/19/72 8270790

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Keppra 1000mg, Haldol 15, aspirin 81mg  
Cogentin 1mg, Zolof 50mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

A. PLANK

Patient Signature

0800 3-21-19

Date/Time

Witness

Jayles

Witness



Your independent health care choice.

RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE

White, Tenney  
Name of Patient

3-23-2019  
Date

8270790 / 07-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500mg Tablet, Haloperidol HCL 10mg Tablet,  
Benztrapine Mesylate 1mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Refused  
Patient Signature

3-22-18 / 2000  
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J17012w  
Witness

[Signature]  
Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

WHITE, TONEY

Name of Patient

3/24/19

Date

8270790 7/19/1972

Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

KEPPRA 1500mg, HALDOL 10mg, clobazam 1mg

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided NOT to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

Patient Signature

Witness

Date/Time

MONICA, W

Witness



Your independent health care choice.

**RELEASE OF RESPONSIBILITY - SPECIFIC PROCEDURE**

White, Tony  
Name of Patient

5-27-2019  
Date

8270790 7-19-1972  
Patient ID Number / Date of Birth

I have hereby clearly expressed or indicated a decision to refuse to accept the following medical treatment/recommendations:

Levetiracetam 500mg Tablet

Haloperidol 10mg Tablet

Benzotropine Mesylate 1mg Tablet

The above treatment/recommendations and the risks and benefits involved have been satisfactorily explained to me. In addition, I have had the opportunity to ask questions about the proposed recommendation and have had these answered to my satisfaction.

I have decided **NOT** to accept/permit the treatment/recommendations listed above and understand that my failure to follow the advised medical treatment may seriously affect my health.

By signing below, I assume responsibility for all of the risks and consequences of my refusal and hereby release and agree to hold harmless NaphCare, Inc. and its employees and agents from all responsibility and ill effect which may occur as a result of my refusal to accept/permit the proposed recommendation(s).

[Signature]  
Patient Signature

3-27-19 / 2000  
Date/Time

J. J. J.  
Witness

[Signature]  
Witness

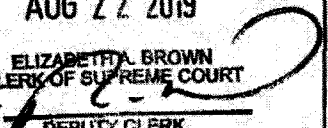
IN THE SUPREME COURT OF THE STATE OF NEVADA

TONEY ANTHONY WHITE,  
Appellant,  
vs.  
THE STATE OF NEVADA,  
Respondent.

No. 78483

**FILED**

AUG 22 2019

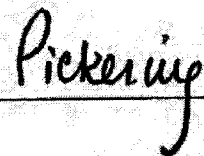
ELIZABETH A. BROWN  
CLERK OF SUPREME COURT  
BY  DEPUTY CLERK

**ORDER DENYING MOTION**

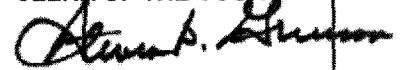
This is a direct appeal from a judgment of conviction. Appellant has filed a motion requesting this court stay this appeal and remand to the district court to permit appellant to file a motion for reconsideration of the order denying his motion to withdraw his guilty plea based upon newly obtained evidence.

If a remand to the district court is required, the parties must comply with the procedures for remand set forth in NRAP 12A and NRCP 62.1. If the district court is inclined to modify a decision from which an appeal has been taken, after jurisdiction has vested in this court, the course of action is for the district court to certify to this court its inclination to modify its decision and to request a remand. *Id.* Accordingly, the motion is denied.

It is so ORDERED.

 A.C.J.

cc: Terrence M. Jackson  
Attorney General/Carson City  
Clark County District Attorney



**MOT**  
TERRENCE M. JACKSON, ESQ.  
Nevada Bar No. 00854  
Law Office of Terrence M. Jackson  
624 South Ninth Street  
Las Vegas, NV 89101  
T: 702-386-0001 / F: 702-386-0085  
Terry.jackson.esq@gmail.com  
*Counsel for Toney A. White*

IN THE EIGHTH JUDICIAL DISTRICT COURT  
CLARK COUNTY, NEVADA

THE STATE OF NEVADA,

Plaintiff,

v.

Toney A. White,  
#1214172,

Defendant.

District Case No.: C-16-313216-2

Dept.: XII

HEARING REQUESTED

**MOTION FOR CERTIFICATION AND REQUEST FOR REMAND**

Pursuant to Nevada Supreme Court Order dated August 22, 2019, in case number 78483 (Exhibit A), Defendant, TONEY A. WHITE, respectfully requests the District Court state it has reviewed Defendant's 35 page Motion to Withdraw Plea of Guilty, filed July 26, 2019.

Defendant asks the Court to state the Court believes the Motion has sufficient merit to warrant an evidentiary hearing and therefore it has ordered the State to Reply to Defendant's Motion to Withdraw Plea of Guilty by October 10, 2019.

DATED this 30th day of August, 2019.

/s/ Terrence M. Jackson  
Terrence M. Jackson, Esq.  
Nevada Bar No. 00854  
Law Office of Terrence M. Jackson  
624 South Ninth Street  
Las Vegas, NV 89101  
T: 702-386-0001 / F: 702-386-0085  
Terry.jackson.esq@gmail.com

*Counsel for Toney A. White*

1 IN THE EIGHTH JUDICIAL DISTRICT COURT  
2 CLARK COUNTY, NEVADA  
3

4 THE STATE OF NEVADA, )  
5 Plaintiff, )  
6 v. )  
7 Toney A. White, )  
8 #1214172, )  
Defendant. )

District Case No.: C-16-313216-2  
Dept.: XII

9  
10 **NOTICE OF HEARING**

11 Please be advised that the Defendant's Motion for Certification and Request for Remand in  
12 the above-entitled matter is set for hearing as follows:

13 **Date:**

14 **Time:**

15 **Location:** RJC Courtroom 14D  
16 Regional Justice Center  
200 Lewis Avenue  
Las Vegas, NV 89101

17 **Note:** Under NEFCR 9(d), if a party is not receiving electronic service through the Eighth Judicial  
18 District Court Electronic Filing System, the movant requesting a hearing must serve this notice on  
19 the party by traditional means.

20 By: /s/ Ilia C. Wills  
Assistant to Terrence M. Jackson, Esq.

21  
22 **CERTIFICATE OF SERVICE**

23 I hereby certify that pursuant to Rule 9(b) of the Nevada Electronic Filing and Conversion  
24 Rules, a copy of this Notice of Hearing was electronically served to all registered users on this case  
25 in the Eighth Judicial District Court Electronic Filing System.

26  
27 By: /s/ Ilia C. Wills  
Assistant to Terrence M. Jackson, Esq.  
28



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1 IN THE EIGHTH JUDICIAL DISTRICT COURT

2 CLARK COUNTY, NEVADA

3  
4 District Case No.: C-16-313216-2

5 Dept.: XII

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11 **EXHIBIT 'A'**

12  
13 Nevada Supreme Court - Order Denying Motion

IN THE SUPREME COURT OF THE STATE OF NEVADA

TONY ANTHONY WHITE

Appellant

vs.

THE STATE OF NEVADA

Respondent

No. 78483

FILED

AUG 27 2019

ELIZABETH A. BROWN  
CLERK OF SUPREME COURT  
BY *[Signature]*  
DEPUTY CLERK

ORDER DENYING MOTION

This is a direct appeal from a judgment of conviction. Appellant has filed a motion requesting this court stay this appeal and remand to the district court to permit appellant to file a motion for reconsideration of the order denying his motion to withdraw his guilty plea based upon newly obtained evidence.

If a remand to the district court is required, the parties must comply with the procedures for remand set forth in NRAP 12A and NRCP 62.1. If the district court is inclined to modify a decision from which an appeal has been taken, after jurisdiction has vested in this court, the course of action is for the district court to certify to this court its inclination to modify its decision and to request a remand. *Id.* Accordingly, the motion is denied.

It is so ORDERED.

*Pickering*

A.C.J.

cc: Terrence M. Jackson  
Attorney General/Carson City  
Clark County District Attorney

19-35168

**IN THE SUPREME COURT OF THE STATE OF NEVADA**

---

TONEY A. WHITE,	)	
#1214172,	)	<b>CASE NO.: 78483</b>
Appellant,	)	<b>E-FILE</b>
	)	D.C. Case: C-16-313216-2
v.	)	Dept.: XII
	)	
STATE OF NEVADA,	)	
	)	
Respondent.	)	
	)	

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Electronically Filed  
Sep 09 2019 12:15 p.m.  
Elizabeth A. Brown  
Clerk of Supreme Court

**MOTION FOR ENLARGEMENT OF TIME**

COMES NOW the Defendant, Toney A. White, by and through Terrence M. Jackson, Esquire, the appointed appellate counsel, and requests this Honorable Court for an enlargement of time of sixty (60) days within which to file the Appellant's Opening Brief and Appendix.

As grounds for this Motion, Defendant states he needs additional time to complete his Opening Brief and raise all legitimate issues. Defendant further states he believes the most important issue of the case, the validity of the Defendant's guilty

plea, is set for hearing in District Court for September 24, 2019.

Until those issues in that Motion are decided, Defendant cannot effectively raise the most significant issue on his appeal. Defense counsel has acted diligently at all times since appointed on this case and is not seeking an extension of time for the mere purpose of delay.

**Dated** this 9th of September, 2019.

Respectfully submitted,

/s/ Terrence M. Jackson

TERRENCE M. JACKSON, ESQ.

Nevada Bar No. 000854

Law Office of Terrence M. Jackson

Terry.jackson.esq@gmail.com

Counsel for Appellant Toney A. White

### **CERTIFICATE OF SERVICE**

I hereby certify and affirm I am an assistant in the office of Terrence M. Jackson, Esquire, a person of such age and discretion as to be competent to serve papers and that on the 9th of September, 2019, I served this document, MOTION FOR ENLARGEMENT OF TIME, filed electronically with the Nevada Supreme Court, by electronic service (*eFlex*) as follows:

STEVEN B. WOLFSON

Clark County District Attorney

steven.wolfson@clarkcountyda.com

AARON D. FORD

Nevada Attorney General

100 North Carson Street

Carson City, NV 89701

STEVEN S. OWENS

Chief Deputy D.A. - Criminal

steven.owens@clarkcountyda.com

[X] And by U.S. Postal Service, first-class postage affixed to:

TONEY A. WHITE

ID# 1214172

ELY STATE PRISON

POST OFFICE BOX 1989

ELY, NEVADA 89301


By: /s/ Ila C. Wills

Assistant to Terrence M. Jackson, Esq.

DISTRICT COURT  
CLARK COUNTY, NEVADA

\*\*\*\*

Electronically Filed  
9/4/2019 4:03 PM  
Steven D. Grierson  
CLERK OF THE COURT



State of Nevada  
vs  
Toney White

Case No.: C-16-313216-2

Department 12

**NOTICE OF HEARING**

Please be advised that the Motion for Certification and Request for Remand in the above-entitled matter is set for hearing as follows:

**Date:** September 24, 2019  
**Time:** 8:30 AM  
**Location:** RJC Courtroom 14D  
Regional Justice Center  
200 Lewis Ave.  
Las Vegas, NV 89101

**NOTE: Under NEFCR 9(d), if a party is not receiving electronic service through the Eighth Judicial District Court Electronic Filing System, the movant requesting a hearing must serve this notice on the party by traditional means.**

STEVEN D. GRIERSON, CEO/Clerk of the Court

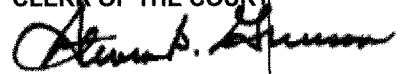
By: /s/ Joshua Raak  
Deputy Clerk of the Court

**CERTIFICATE OF SERVICE**

I hereby certify that pursuant to Rule 9(b) of the Nevada Electronic Filing and Conversion Rules a copy of this Notice of Hearing was electronically served to all registered users on this case in the Eighth Judicial District Court Electronic Filing System.

By: /s/ Joshua Raak  
Deputy Clerk of the Court

0627



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2  
DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 THURSDAY, JUNE 9, 2016

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **DEFENDANT'S APPLICATION TO RECUSE COUNSEL AND FOR**  
18 **APPOINTMENT FOR ALTERNATIVE COUNSEL; MEMORANDUM OF**  
19 **POINTS AND AUTHORITIES**

20 APPEARANCES:

21 For the State:

RACHEL O'HALLORAN, ESQ.  
Deputy District Attorney

22 For the Defendant:

HARVEY GRUBER, ESQ.

23  
24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER



1 Las Vegas, Nevada, Thursday, June 9, 2016

2  
3 [Proceedings commenced at 8:58 a.m.]

4 THE COURT: State of Nevada versus Toney White,  
5 C313216. He's present and he's in custody.

6 Okay. I had a chance to read your motion. Is there anything  
7 else you want to add?

8 THE DEFENDENT: No. I submit on the motion.

9 THE COURT: Okay. You didn't provide any legal basis for  
10 the Court to grant your motion. It appears as though you're quite well  
11 aware of the facts of your case. And you can't become well aware of the  
12 facts of the case unless you've read the discovery. And it appears pretty  
13 clear to me that you've read the discovery and you know the facts. So  
14 your motion to dismiss your attorney is denied and it's set for calendar  
15 call.

16 Is there anything -- it seems his big issue is --

17 Here's another thing. You don't get to assert other people's  
18 constitutional rights. So it appears that you want your attorney, in  
19 conjunction with another person, to somehow suppress evidence  
20 because somebody else's constitutional rights were violated. You don't  
21 get the benefit of that, so which is probably why your attorney hasn't filed  
22 that motion. So your attorney can't file frivolous motions or motions that  
23 have no basis in law; do you understand that?

24 THE DEFENDENT: Yes.

25 THE COURT: Okay.

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MR. GRUBER: I'm not going to say anything.

THE COURT: Okay.

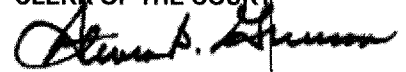
MR. GRUBER: Thank you, Judge.

[Proceedings concluded at 9:00 a.m.]

\* \* \* \* \*

ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

  
SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2

DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 TUESDAY, DECEMBER 13, 2016

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **HARVEY GRUBER, ESQ.'S MOTION TO WITHDRAW AS COUNSEL**  
18 **OF RECORD**

19 APPEARANCES:

20 For the State:

NOREEN C. DEMONTE, ESQ.  
Chief Deputy District Attorney

21  
22 For the Defendant:

HARVEY GRUBER, ESQ.

23  
24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Tuesday, December 13, 2016

2

3 [Proceedings commenced at 9:02 a.m.]

4 THE COURT: State of Nevada versus Toney White,

5 C313216. Present in custody.

6 If I let everybody withdraw that this happened to I wouldn't  
7 have any attorneys.

8 MR. GRUBER: Judge, our relationship --

9 THE COURT: Really?

10 MR. GRUBER: -- has now become adversarial due to this.

11 THE COURT: Have you been appointed?

12 MR. GRUBER: Yes.

13 THE COURT: Well, this happens all the time. What am I --  
14 what's different here?

15 MR. GRUBER: I --

16 THE COURT: I can't allow this to be the -- I mean I don't --

17 MR. GRUBER: Put it this way now.

18 THE COURT: -- I don't know what you want me to do.

19 MR. GRUBER: I can't communicate with the man because of  
20 the adversarial relationship. I'm not going to be able to represent him to  
21 the best of my ability based on this.

22 THE COURT: But this happens all the time; right?

23 MR. GRUBER: It's never happened to me. I've never had  
24 one like this that had been -- that had a bark like in the middle of a case.  
25 I've never had this happen to me. I've been doing this for 20 years.

1 THE COURT: I think it happens all the time. I guess --  
2 MR. GRUBER: It's the first time --  
3 THE COURT: -- you're just lucky.  
4 MR. GRUBER: It's the first -- well, because --  
5 THE COURT: Because I was kind of surprised you were filing  
6 a motion because of this.  
7 MR. GRUBER: Because -- like I said, Judge, I've never had  
8 this issue come up in my practice. Twenty years of doing this I've never  
9 had a client --  
10 THE COURT: And then as soon as I let you withdraw  
11 everybody and their mother will be doing this, so --  
12 MR. GRUBER: Judge, I just -- I'm bringing it up to the Court.  
13 I now have an adversarial relationship with my client.  
14 MS. DEMONTE: I'm going to submit it, but -- I mean, this is  
15 the same argument I heard a week ago in another department where my  
16 response was the same. Another attorney is going to have this exact  
17 same experience and we're just going to go through the entire State Bar  
18 list until we come up with somebody that the Defendant's --  
19 THE COURT: Yeah, that's --  
20 MS. DEMONTE: -- not going to have an issue with.  
21 MR. GRUBER: I under -- I'm just bringing it up.  
22 THE COURT: So at this time I'm --  
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MR. GRUBER: I'm putting it on the record now.

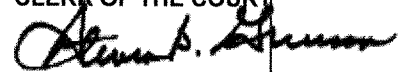
THE COURT: Okay. I'm going to deny the request.

[Proceedings concluded at 9:04 a.m.]

\*\*\*\*\*

ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

  
SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2  
C-16-313216-4

10 vs.

DEPT. XII

11 TONEY ANTHONY WHITE,  
12 MARLAND DEAN,  
13 AKA: MARLAND NEAL DEAN,  
14 Defendants.

15 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
16 THURSDAY, DECEMBER 14, 2017

17 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
18 **SENTENCING**

19 APPEARANCES:

20 For the State: ERIKA MENDOZA, ESQ.  
Chief Deputy District Attorney

21 For Defendant White: Not Present

22 For Defendant Dean: TRAVIS SHETLER, ESQ.

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24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

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Las Vegas, Nevada, Thursday, December 14, 2017

[Proceedings commenced at 11:17 a.m.]

THE COURT: Twenty-three and 24.

THE COURT CLERK: Mr. White refused to appear.

THE COURT: Okay. Mr. White is not here so that will be continued.

Twenty-three and 24 you can put them on the same date.

THE COURT CLERK: Yes, Your Honor.

December 21, 8:30.

THE COURT: Thank you.

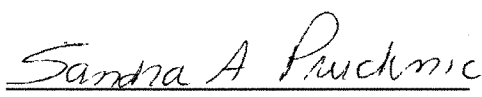
MR. SHETLER: Thank you, Judge.

THE COURT: Thank you very much. Sorry about that.

[Proceedings concluded at 11:17 a.m.]

\*\*\*\*\*

ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

  
SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 Las Vegas, Nevada, Thursday, March 17, 2016

2  
3 [Proceedings commenced 8:51 at a.m.]

4 THE COURT: State versus Wong, White, Sexton and Dean.

5 MR. PRINTY: Judge, for the record, Mike Printy appearing  
6 with Ms. Sexton.

7 MR. HUGHES: Ed Hughes for Mr. Wong.

8 THE COURT: Which one is Mr. Wong?

9 Okay. Mr. Wong.

10 DEFENDANT WONG: Good morning, Your Honor.

11 THE COURT: Okay.

12 MR. GRUBER: Harvey Gruber on behalf of Mr. White.

13 THE COURT: Are you Mr. White?

14 DEFENDANT WHITE: Yeah.

15 THE COURT: Mr. White.

16 MR. SHETLER: And good morning, Your Honor. Travis  
17 Shetler on behalf of Mr. Dean.

18 THE COURT: Okay. And this their arraignment; correct?  
19 Have they been arraigned?

20 UNIDENTIFIED SPEAKER: No.

21 THE COURT: No. Okay. Do they all have copies of the  
22 charging document?

23 UNIDENTIFIED SPEAKER: No.

24 THE COURT: Okay. All right. Why don't you have a seat  
25 and we'll get the charging document. You can give them to your client

1 and when they're ready I'll arraign them.

2 [Recess taken at 8:52 a.m.]

3 [Proceedings recalled at 8:57 a.m.]

4 THE COURT: State of Nevada versus Wong, White, Sexton  
5 and Dean. Have they all been provided with copies of the charging  
6 document?

7 MR. PRINTY: Yes.

8 MR. SHETLER: Yes.

9 MR. GRUBER: Yes.

10 MR. HUGHES: Yes, Your Honor.

11 THE COURT: They just don't have them with them?

12 MR. HUGHES: We just went through them with them.

13 MR. GRUBER: We just went through them with them.

14 THE COURT: Oh, okay.

15 MR. SHETLER: We're saving paper this morning, Judge.

16 THE COURT: Okay.

17 Mr. Wong, your true and full name for the record?

18 DEFENDANT WONG: Kevin Kekoa Wong, Jr.

19 THE COURT: How old are you?

20 DEFENDANT WONG: Thirty-one.

21 THE COURT: How are did you go in school?

22 DEFENDANT WONG: I went to three years of college.

23 THE COURT: You do read, write and understand the English  
24 language?

25 DEFENDANT WONG: Yes, I do.

1 THE COURT: And you received a copy of the Indictment in  
2 this case charging you -- let's see -- in Count 1, conspiracy to commit  
3 robbery, Count 2, burglary while in possession of a deadly weapon,  
4 Count 3 and 4, first degree kidnapping with use of a deadly weapon,  
5 Count 5 and 6, attempt robbery with use of a deadly weapon, and Count  
6 7, battery with use of a deadly weapon resulting in substantial bodily  
7 harm, and Count 8, impersonation of an officer?

8 DEFENDANT WONG: I haven't -- well, yes, yes, yes.

9 THE COURT: You haven't what?

10 He can have a copy of the charging document. Do you want a  
11 copy of it?

12 DEFENDANT WONG: Yes, please.

13 THE COURT: Okay.

14 MR. SCHWARTZER: Your Honor, I'll provide a copy.

15 THE COURT: All right.

16 MR. SHETLER: We got copies here --

17 THE COURT: Okay.

18 MR. SHETLER: -- for everybody.

19 THE COURT: So you understand what you're being charged  
20 with?

21 DEFENDANT WONG: Yes, Your Honor.

22 THE COURT: You had a chance to discuss it with your  
23 lawyer?

24 DEFENDANT WONG: Yes, Your Honor.

25 THE COURT: How do you plead to the charges in the

1 Indictment?

2 DEFENDANT WONG: Not guilty

3 THE COURT: You understand you have the right to be  
4 brought to trial within 60 days. Do you wish to invoke or waive that  
5 right?

6 DEFENDANT WONG: Waive.

7 THE COURT: Okay.

8 I want to -- I'll wait till I arraign them all and then we'll set a  
9 trial.

10 State versus Toney White. Mr. White, will you please state  
11 your name for the record.

12 DEFENDANT WHITE: Toney White.

13 THE COURT: How old are you?

14 DEFENDANT WHITE: Forty-three.

15 THE COURT: How far did you go in school?

16 DEFENDANT WHITE: GED.

17 THE COURT: You do read, write and understand the English  
18 language?

19 DEFENDANT WHITE: Yes.

20 THE COURT: You received a copy of the Indictment in this  
21 case charging you with Count 1, conspiracy to commit robbery, Count 2,  
22 burglary while in possession of a deadly weapon, 3 and 4, first degree  
23 kidnapping with use of a deadly weapon, 5 and 6, attempt robbery with  
24 use of a deadly weapon, Count 7, battery with use of a deadly weapon  
25 resulting in substantial bodily harm, and Count 8, impersonation of an

1 officer?

2 DEFENDANT WHITE: Yes.

3 THE COURT: Do you understand these charges against you?

4 DEFENDANT WHITE: Yes.

5 THE COURT: How do you plead to the charges in the  
6 Indictment?

7 DEFENDANT WHITE: Not guilty.

8 THE COURT: You understand you have the right to be  
9 brought to trial within 60 days. Do you wish to invoke or waive that  
10 right?

11 DEFENDANT WHITE: Um -- can I speak to my counsel about  
12 that? It's the --

13 MR. GRUBER: Court's indulgence.

14 DEFENDANT WHITE: And I'll waive it.

15 THE COURT: Okay.

16 Ms. Sexton, your true and full name for the record.

17 DEFENDANT SEXTON: Amanda Sexton.

18 THE COURT: How old are you?

19 DEFENDANT SEXTON: Twenty-three.

20 THE COURT: How are did you go in school?

21 DEFENDANT SEXTON: Some college.

22 THE COURT: You do read, write and understand the English  
23 language?

24 DEFENDANT SEXTON: Yes, ma'am.

25 THE COURT: And you received a copy of the Indictment in

1 this case charging you in Count 1 with conspiracy to commit robbery,  
2 Count 2, burglary while in possession of a deadly weapon, Count 3 and  
3 4, first degree kidnapping with use of a deadly weapon, Counts 5 and 6,  
4 attempt robbery with use of a deadly weapon, Count 7, battery with use  
5 of a deadly weapon resulting in substantial bodily harm, and Count 8,  
6 impersonation of an officer?

7 DEFENDANT SEXTON: Yes, ma'am.

8 THE COURT: Do you understand those charges?

9 DEFENDANT SEXTON: [Indiscernible.]

10 THE COURT RECORDER: I'm sorry, Your Honor, I can't  
11 hear her.

12 THE COURT: Can you speak up?

13 DEFENDANT SEXTON: Yes, ma'am.

14 THE COURT: And you had a chance to discuss them with  
15 your lawyer?

16 DEFENDANT SEXTON: I did.

17 THE COURT: How do you plead to the charges in the  
18 Indictment?

19 DEFENDANT SEXTON: Not guilty.

20 THE COURT: You understand you have the right to be  
21 brought to trial within 60 days. Do you wish to invoke or waive that  
22 right?

23 DEFENDANT SEXTON: May I speak with counsel?

24 Um -- wish to waive.

25 THE COURT: I'm sorry?

1                   DEFENDANT SEXTON: Waive.  
2                   THE COURT: Okay. Thank you.  
3                   Mr. Dean --  
4                   DEFENDANT DEAN: Yes.  
5                   THE COURT: -- your true and full name for the record?  
6                   DEFENDANT DEAN: Marland [indiscernible].  
7                   THE COURT: I'm sorry?  
8                   DEFENDANT DEAN: Marland Dean.  
9                   THE COURT: How old are you?  
10                  DEFENDANT DEAN: Twenty-two.  
11                  THE COURT: How far did you go in school?  
12                  DEFENDANT DEAN: I got a GED.  
13                  THE COURT: You do read, write and understand the English  
14                  language?  
15                  DEFENDANT DEAN: Yes, I do.  
16                  THE COURT: You received a copy of the Indictment in this  
17                  case charging you with conspiracy to commit robbery, Count 2, burglary  
18                  while in possession of a deadly weapon, Counts 3 and 4, first degree  
19                  kidnapping with use of a deadly weapon, 5 and 6, attempt robbery with  
20                  use of a deadly weapon, Count 7, battery with use of a deadly weapon  
21                  resulting in substantial bodily harm, and Count 8, impersonation of an  
22                  officer?  
23                  DEFENDANT DEAN: Yes.  
24                  THE COURT: Do you understand these charges against you?  
25                  DEFENDANT DEAN: Yes.

1 THE COURT: You discussed them with your lawyer?  
2 DEFENDANT DEAN: Yes.  
3 THE COURT: How do you plead to the charges in the  
4 Indictment?  
5 DEFENDANT DEAN: Not guilty.  
6 THE COURT: You understand you do have a right to be  
7 brought to trial within 60 days. Do you wish to invoke or waive that  
8 right?  
9 DEFENDANT DEAN: I waive that.  
10 THE COURT: Okay.  
11 So, all parties having waived, trial will be set in the ordinary  
12 course.  
13 MR. SCHWARTZER: Your Honor, we actually discussed with  
14 your clerk all five of our schedules and we came up with a date that all  
15 five of us --  
16 THE COURT: Okay.  
17 MR. SCHWARTZER: -- have available for us, which I believe  
18 is November 1<sup>st</sup>.  
19 THE COURT CLERK: Calendar call will be October 25 at  
20 8:30; jury trial November 1 at 1:30 for Defendants Wong, White, Sexton  
21 and Dean.  
22 MR. PRINTY: Thank you, Your Honor.  
23 MR. GRUBER: Thank you.  
24 MR. HUGHES: Thank you.  
25 MR. SHETLER: Thank you, Your Honor.



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MR. SCHWARTZER: Thank you, Your Honor.

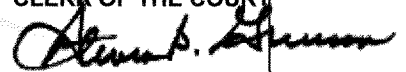
THE COURT: Thank you.

[Proceedings concluded at 9:02 a.m.]

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ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

  
SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2  
DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 THURSDAY, JANUARY 18, 2018

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **SENTENCING**

18 APPEARANCES:

19 For the State:

MICHAEL J. SCHWARTZER, ESQ.  
Chief Deputy District Attorney

20  
21 For the Defendant:

HARVEY GRUBER, ESQ.

22  
23  
24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Thursday, January 18, 2018

2

3 [Proceedings commenced at 9:39 a.m.]

4 THE COURT: State of Nevada versus Toney White,

5 C313216. He's not present.

6 Will the parties approach?

7 MR. GRUBER: Sure.

8 [Bench conference -- begins]

9 THE COURT: I didn't want to say this in front of Mr. Dean --

10 MR. GRUBER: Uh-huh.

11 THE COURT: -- because he's sitting up there.

12 Mr. White refused to come; correct?

13 THE COURT CLERK: Correct.

14 THE COURT: I'm assuming I know why he refused to come.

15 Pam said she sent you all that letter I got.

16 MR. SCHWARTZER: What letter?

17 THE COURT: Weren't you just so surprised? Uh, no.

18 MR. GRUBER: He sent a letter apologizing for his last

19 appearance --

20 MR. SCHWARTZER: No.

21 MR. GRUBER: -- his non-appearance at the last court

22 hearing --

23 THE COURT: Yeah. He's --

24 MR. GRUBER: -- saying he's being intimidated; I was being

25 pressured.

1 THE COURT: Oh, it's a doozer.

2 MR. SCHWARTZER: I haven't seen it.

3 THE COURT: It is basically a motion to withdraw his plea.

4 MR. SCHWARTZER: I've seen that. I've seen the motion to

5 withdraw his plea. And I also --

6 MR. GRUBER: He filed another one. That's set for the 30<sup>th</sup>.

7 THE COURT: Oh, you're kidding me.

8 MR. GRUBER: No.

9 THE COURT: He filed another motion?

10 MR. GRUBER: Here it is.

11 MR. SCHWARTZER: See, I have one from February 13<sup>th</sup>.

12 THE COURT: Okay.

13 MR. GRUBER: It's on January 30<sup>th</sup>.

14 MR. SCHWARTZER: Oh, okay. I have one that says

15 February 13<sup>th</sup>.

16 MR. GRUBER: I'm okay passing this till January 30<sup>th</sup>.

17 MR. SCHWARTZER: Well, I guess my question would be --

18 THE COURT: Okay. Basically his --

19 MR. SCHWARTZER: -- do you want me to --

20 THE COURT: -- intention is -- he did -- he says that Mr. Dean

21 threatened and coerced him, threatened family members, all kinds of

22 craziness. And like he didn't want to be trans -- like I didn't understand --

23 I don't understand their conflict. Okay --

24 MR. SCHWARTZER: Right.

25 THE COURT: -- co-defendants are complex, so I guess I get

1 that, but this is a little extreme.

2 MR. GRUBER: Judge.

3 THE COURT: He says Dean is threatening him in the jail. It's

4 crazy.

5 MR. SCHWARTZER: Okay. Can I get a copy of the letter?

6 MR. GRUBER: Oh, that's --

7 THE COURT: Yeah. Either Pam said she --

8 MR. GRUBER: -- my copy.

9 THE COURT: Will you get Pam to come in?

10 THE COURT CLERK: Yes, Your Honor.

11 THE COURT: I want to make sure you get a copy.

12 MR. SCHWARTZER: Okay.

13 THE COURT: I know Pam tries to --

14 MR. SCHWARTZER: Now usually I get them.

15 MR. GRUBER: I got it.

16 THE COURT: Get them.

17 MR. GRUBER: I got that.

18 THE COURT: Yeah.

19 MR. GRUBER: Yeah, I got that one.

20 THE COURT: Probably -- you know, just -- I'll have her come

21 in with a copy right now because it's a good one.

22 MR. SCHWARTZER: Okay.

23 THE COURT: I was thinking you need to review it.

24 MR. SCHWARTZER: Do you want me to --

25 THE COURT: But he refused. And I think he refused

1 because Mr. Dean was here today.

2 MR. SCHWARTZER: Sure.

3 THE COURT: But we got Dean sentenced.

4 MR. SCHWARTZER: Yeah, it seems done.

5 THE COURT: So he'll be going.

6 MR. GRUBER: I have a feeling on the 30<sup>th</sup> he'll probably  
7 withdraw everything and just get sentenced because he'll be apart from  
8 him. I have a feeling. I don't know. That's when he took the plea was  
9 when he was apart from him.

10 MR. SCHWARTZER: And he's filed two motions that are --

11 THE COURT: Yeah, so bizarre.

12 MR. SCHWARTZER: Do you want me to --

13 MR. GRUBER: Judge, can I have that back? That's my copy.

14 THE COURT: Oh, of course. Of course.

15 MR. SCHWARTZER: It's a fugitive -- obviously filing his own  
16 motion to withdraw is a fugitive document. Do you want me to respond?

17 THE COURT: This is -- this is a letter to me.

18 MR. SCHWARTZER: Okay.

19 THE COURT: But you're basically telling me there's a formal  
20 motion. Yeah, that would be a fugitive document. Okay, I agree that with  
21 that.

22 MR. SCHWARTZER: Okay. So I'll leave it alone.

23 THE COURT: You don't need to respond to that.

24 MR. SCHWARTZER: Okay.

25 THE COURT: And if he appears -- whenever we get him

1 here, I guess it will be on the 30<sup>th</sup> --

2 MR. SCHWARTZER: Okay.

3 THE COURT: -- I'll talk to him because -- I don't fear this. He  
4 makes allegations against Mr. Gruber too.

5 MR. GRUBER: Mm-hmm.

6 THE COURT: I mean, he says, I didn't do it, I'm innocent and  
7 then counsel didn't do all these things.

8 MR. SCHWARTZER: Okay.

9 MR. GRUBER: Judge, one more thing you need to be made  
10 aware of.

11 THE COURT: Oh, no. What is this?

12 MR. GRUBER: It's a notice of a formal complaint in federal  
13 court naming you, Michael and me as co-defendants.

14 THE COURT: Ooh, so what.

15 MR. SCHWARTZER: Yeah. It has the name of the  
16 Henderson detectives in the second one.

17 THE COURT: I haven't even been served. I don't even care.

18 MR. GRUBER: All right. I'm just saying it's coming down the  
19 pipe too.

20 THE COURT: Yeah, I don't even -- I mean, it is what it is.

21 MR. GRUBER: All right. So we just want to move this --

22 THE COURT: I haven't been served. I don't know anything  
23 about it.

24 MR. SCHWARTZER: Yeah, he got my name wrong. He puts  
25 me as Mark.

1 THE COURT: Well, at least they can get your name right.  
2 MR. GRUBER: Do we want it on the 30<sup>th</sup> then?  
3 THE COURT: Yeah.  
4 MR. GRUBER: Okay.  
5 THE COURT: I think -- yeah, because I think probably when  
6 Mr. Dean goes -- I don't really know if it's even true.  
7 MR. GRUBER: Yeah.  
8 THE COURT: You guys would need to know better than I  
9 would, but --  
10 MR. SCHWARTZER: I'm skeptical.  
11 THE COURT: I mean, they're co-conspirators; what's the  
12 problem?  
13 MR. SCHWARTZER: Okay.  
14 THE COURT: Okay.  
15 MR. SCHWARTZER: Thank you, Your Honor.  
16 MR. GRUBER: Thank you.  
17 [Bench conference -- concludes]  
18 THE COURT: Okay. If you want to just hang out while Pam  
19 comes back we'll make sure you get a copy of the document.  
20 MR. SCHWARTZER: Thank you, Your Honor.  
21 THE COURT: And then it appears though we'll -- we'll  
22 continue it till January 30<sup>th</sup> --  
23 MR. GRUBER: Thank you, Judge.  
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MR. SCHWARTZER: Thank you, Your Honor.

THE COURT: -- at 8:30.

[Proceedings concluded at 9:43 a.m.]

ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

  
SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2  
DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 TUESDAY, JANUARY 30, 2018

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **DEFENDANT'S MOTION FOR WITHDRAWAL OF GUILTY PLEA AND**  
18 **FOR APPOINTMENT OF NEW COUNSEL, OR ALTERNATIVELY, TO**  
19 **PROCEED IN PRO PER; SENTENCING**

20 APPEARANCES:

21 For the State: EKATERINA DERJAVINA, ESQ.  
22 Deputy District Attorney

23 For the Defendant: HARVEY GRUBER, ESQ.

24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

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Las Vegas, Nevada, Tuesday, January 30, 2018

[Proceedings commenced at 9:59 a.m.]

THE COURT: Mr. White, your attorney hasn't appeared. I have trial today, so I'm going to continue it a week.

THE CORRECTIONS OFFICER: Mr. White, stand up, please.

THE COURT: February --

THE COURT CLERK: February 6<sup>th</sup>, 8:30.

THE DEFENDENT: Thank you.

THE COURT: Okay. Thank you.

[Proceedings concluded at 10:00 a.m.]

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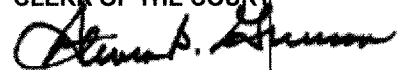
ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

Sandra A Pruchnic  
SANDRA PRUCHNIC  
Court Recorder/Transcriber

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2  
DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 TUESDAY, FEBRUARY 6, 2018

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **DEFENDANT'S MOTION FOR WITHDRAWAL OF GUILTY PLEA AND**  
18 **FOR APPOINTMENT OF NEW COUNSEL, OR ALTERNATIVELY, TO**  
19 **PROCEED IN PRO PER; SENTENCING**

20 APPEARANCES:

21 For the State:

MICHAEL J. SCHWARTZER, ESQ.  
Chief Deputy District Attorney

22 For the Defendant:

HARVEY GRUBER, ESQ.

23 ALSO PRESENT:

MICHAEL W. SANFT, ESQ.

24  
25 RECORDED BY: PATTI SLATTERY, COURT RECORDER

1 Las Vegas, Nevada, Tuesday, February 6, 2018

2  
3 [Proceedings commenced at 9:31 a.m.]

4 THE COURT: State of Nevada versus Toney White,  
5 C313216. Mr. White is present and he's in custody.

6 Good morning, sir.

7 THE DEFENDENT: Good morning.

8 THE COURT: Okay. So you've entered a plea. And then it  
9 appears as though pretty much immediately thereafter you started writing  
10 me letters. I've received them all. I've received the motions and I've  
11 read them. And it seems pretty clear to me that you want to move to  
12 withdraw your plea.

13 THE DEFENDENT: Yeah.

14 THE COURT: What?

15 THE DEFENDENT: Yes.

16 THE COURT: Okay. You said yes and then shook your head  
17 no. All right. And so at this time I'm going to appoint -- based on the  
18 allegations that you've made, I'm going to appoint another attorney to  
19 represent you to see if there's a legal basis to withdraw your plea. Do  
20 you understand that?

21 THE DEFENDENT: Yes.

22 THE COURT: Okay. And if your attorney -- your independent  
23 attorney thinks there's a legal basis he or she will file that motion. If they  
24 don't believe there's a legal basis we'll proceed with sentencing. Mr.  
25 Gruber will be back on the case and you can file any appeal or anything

1 else that you deem appropriate; okay?

2 So I'm going to put it on one week for appointment of Mr.  
3 Sanft to review the case and see if there's any legal basis.

4 MR. GRUBER: Judge, do you want me there at that -- do you  
5 need me here that --

6 THE COURT: That's okay. Can you just make sure Mr. Sanft  
7 gets the file?

8 MR. GRUBER: Sure.

9 THE COURT: Okay. Just make sure you give him a copy  
10 because you may be back on.

11 MR. GRUBER: It's a rather large file, Judge.

12 THE COURT: Okay. Well --

13 MR. GRUBER: I'll -- I don't mind --

14 THE COURT: -- I mean it is what it is.

15 MR. GRUBER: -- giving him -- I'll give him mine and, you  
16 know -- I assume if there's no basis to withdraw we're just going to do a  
17 sentencing at that point.

18 THE COURT: Sure.

19 MR. GRUBER: Okay.

20 THE COURT: But he's got to be able to look at the case.

21 MR. GRUBER: Yep.

22 THE COURT: Okay.

23 THE COURT CLERK: February 15, 8:30.

24 THE DEFENDENT: Thank you.

25 THE COURT: Anything else? I mean, we've addressed all

1 your issues?

2 THE DEFENDENT: Yes.

3 THE COURT: What happened to your arm?

4 THE DEFENDENT: It's broke.

5 THE COURT: It's broken?

6 THE DEFENDENT: Yeah.

7 THE COURT: Your hand or your arm?

8 THE DEFENDENT: My hand.

9 THE COURT: Oh. Okay.

10 MR. SCHWARTZER: Thank you, Your Honor.

11 MR. GRUBER: Thank you, Judge.

12 THE COURT: Thank you.

13 [Proceedings concluded at 9:33 a.m.]

14 [Proceedings recalled at 9:52 a.m.]

15 THE COURT: Mr. Sanft.

16 MR. SANFT: Hello.

17 THE COURT: Thank you. Thank you for coming back.

18 We're going to appoint you on page 15 to Toney White. He's

19 the gentleman sitting --

20 MR. SANFT: Yep.

21 THE COURT: -- in the first seat in the second row. I have  
22 continued it till February --

23 THE COURT CLERK: February 15<sup>th</sup>.

24 THE COURT: February 15<sup>th</sup> for you to confirm. But also, Mr.  
25 Gruber is his current attorney. I told him to give you a copy of the file.



1 He said it's quite large.

2 MR. SANFT: Voluminous.

3 THE COURT: Uh-uh. So I have it on for February 15<sup>th</sup>. Do  
4 you want more time?

5 MR. SANFT: No, Your Honor. What I would like though from  
6 the Court is I believe that the Court is the one that entered in the plea for  
7 him or you did the canvass for his --

8 THE COURT: Sure.

9 MR. SANFT: -- for his --

10 THE COURT: Uh-huh.

11 MR. SANFT: If I could get a copy of either the transcript or  
12 the JAVS, whatever's easier?

13 THE COURT: Sure. We'll give you that, but he's -- he's  
14 written quite a few documents since then and that doesn't appear to be  
15 the issue.

16 MR. SANFT: Oh, really. Okay.

17 THE COURT: He contends that there were outside forces  
18 that --

19 MR. SANFT: I understand that maybe the co-defendant in the  
20 case --

21 THE COURT: Uh-huh.

22 MR. SANFT: -- or there's some other party that had --

23 THE COURT: Right.

24 MR. SANFT: -- coerced him into taking this negotiation.

25 THE COURT: Right.

1 MR. SANFT: However, I think that the -- maybe the pauses in  
2 the canvass would've helped to determine whether he actually had a  
3 problem because I think one of the questions asked by the Court is have  
4 you been coerced, made promises, that kind of thing.

5 THE COURT: Okay. And he said no.

6 MR. SANFT: Yes, Your Honor.

7 THE COURT: But I'm certainly -- do you want the -- we'll give  
8 you both. Do you want the transcript? I can have the clerk -- I'm sorry,  
9 the recorder prepare the transcript as well.

10 MR. SANFT: Let's just do the JAVS. That will be easier --

11 THE COURT: Okay.

12 MR. SANFT: -- and I think that would help me.

13 THE COURT: All right. I'll make sure you get it as soon as  
14 possible and Mr. Gruber said he'll make sure you get that file.

15 MR. SANFT: Yes, Your Honor. Thank you.

16 THE COURT: But I'm just warning you, it's --

17 MR. SANFT: Voluminous.

18 THE COURT: According to him. So how much time would  
19 you like to review that?

20 MR. SANFT: Your Honor, if I could have a week.

21 THE COURT: Okay.

22 MR. SANFT: Well, because the issue --

23 THE COURT: Well, I'm just going to leave the date then. I  
24 gave you till February 15<sup>th</sup>. I was going to give you more time.

25 MR. SANFT: No. And I think the issue is -- once again, it's an

1 issue of whether or not he enters into a plea knowingly and voluntarily  
2 without the issue of coercion. I don't believe reading the entire file is  
3 going to be the issue. That [indiscernible] the fact pattern goes to  
4 something else, I'm specifically focusing on is entry of plea.

5 THE COURT: Okay.

6 So, Mr. White, Mr. Sanft is going to be appointed and I'll  
7 continue it till February 15<sup>th</sup>.

8 MR. SANFT: Thank you, Your Honor.

9 THE COURT: We'll just leave the date.

10 MR. SANFT: Yes, Your Honor.

11 THE COURT: If you need more time though I would be  
12 inclined to grant that.

13 MR. SANFT: Yes, Your Honor.

14 THE COURT: Thank you very much for taking this.

15 MR. SANFT: Thank you.

16 THE COURT: Thank you. Have a good day.

17 [Proceedings concluded at 9:55 a.m.]

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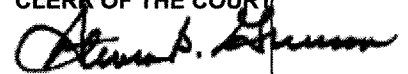
21 ATTEST: I do hereby certify that I have truly and correctly transcribed  
22 the audio/video proceedings in the above-entitled case to the best of my  
23 ability.

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SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

7  
8 THE STATE OF NEVADA,  
9 Plaintiff,

CASE#: C-16-313216-2

DEPT. XII

10 vs.

11 TONEY ANTHONY WHITE,  
12 Defendant.

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 THURSDAY, FEBRUARY 15, 2018

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **STATUS CHECK: DEFENDANT'S MOTION TO WITHDRAW GUILTY**  
18 **PLEA/CONFIRMATION OF APPOINTED COUNSEL MICHAEL SANFT;**  
19 **SENTENCING**

20 APPEARANCES:

21 For the State:

NOREEN C. DEMONTE, ESQ.  
Chief Deputy District Attorney

22 For the Defendant:

MICHAEL W. SANFT, ESQ.

23  
24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Thursday, February 15, 2018

2

3 [Proceedings commenced at 8:49 a.m.]

4 MR. SANFT: Can you call the White matter on page 10,  
5 please.

6 THE COURT: You bet.

7 MS. DEMONTE: Oh, we're in need of, I think, Ms. Heap.

8 THE COURT: Do we need to wait for another DA?

9 MR. SANFT: I --

10 MS. DEMONTE: Yeah, Mr. Schwartz or Ms. Heap.

11 MR. SANFT: I just need to set a briefing schedule because I  
12 had an opportunity to review the file to make a determination whether or  
13 not I can file a motion to --

14 THE COURT: Okay.

15 MS. DEMONTE: Oh, I can stand it for that. Okay.

16 MR. SANFT: -- to withdraw.

17 THE COURT: Okay. So you want to -- how much time do  
18 you want to file the motion?

19 MR. SANFT: Just -- two weeks is fine, Your Honor.

20 THE COURT: Are you sure?

21 MR. SANFT: Well, yeah, because we -- we verified the  
22 information that Mr. White gave me and I think that there is a basis to file  
23 a motion. So it's just a matter of putting everything together, but two  
24 weeks should be fine.

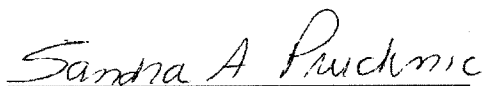
25 THE COURT: You bet. So two weeks.

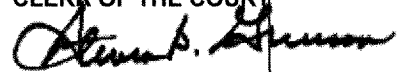
1 THE COURT CLERK: Two weeks will be March 1.  
2 THE COURT: And then how much time does the State want?  
3 Two weeks to respond?  
4 MS. DEMONTE: Please.  
5 THE COURT CLERK: March 15 for response.  
6 THE COURT: Can we give one week for a reply.  
7 THE COURT CLERK: March 22.  
8 THE COURT: For a reply from the defense. And then we'll  
9 set it for a hearing.  
10 THE COURT CLERK: Yes, Your Honor.  
11 March 29, 8:30.  
12 MR. SANFT: Thank you, Your Honor.  
13 THE COURT: Thank you very much.

14 [Proceedings concluded at 8:50 a.m.]

15 \* \* \* \* \*

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21 ATTEST: I do hereby certify that I have truly and correctly transcribed  
22 the audio/video proceedings in the above-entitled case to the best of my  
23 ability.

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25 SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA

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8 THE STATE OF NEVADA,

9 Plaintiff,

10 vs.

11 TONEY ANTHONY WHITE,

12 Defendant.

CASE#: C-16-313216-2

DEPT. XII

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 THURSDAY, MARCH 29, 2018

16 **RECORDER'S TRANSCRIPT OF PROCEEDINGS**  
17 **STATUS CHECK: DEFENDANT'S MOTION TO WITHDRAW GUILTY**  
18 **SENTENCING**

19 APPEARANCES:

20 For the State:

ADAM B. OSMAN, ESQ.  
Deputy District Attorney

21 For the Defendant:

MICHAEL W. SANFT, ESQ.

22  
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24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Thursday, March 29, 2018

2  
3 [Proceedings commenced at 10:47 a.m.]

4 THE COURT: State versus Toney White, page 4. C313216.

5 Mr. White is present. He's in custody.

6 Mr. Sanft.

7 MR. SANFT: Yes, Your Honor.

8 THE COURT: Okay. I'm assuming that you're seeking more  
9 time.

10 MR. SANFT: I am. I just want to make a record real quick.

11 THE COURT: Sure.

12 MR. SANFT: There -- I had an opportunity to review my  
13 client's issues with regards to why he wanted to file a motion to withdraw.  
14 I believe there was a basis.

15 THE COURT: Mm-hmm.

16 MR. SANFT: The basis though requires me to get an affidavit  
17 from a person who is in custody, and I can't find him right now, so that's  
18 the only reason why --

19 THE COURT: Can you --

20 MR. SANFT: -- we need a delay.

21 THE COURT: -- can you say who it is?

22 MR. SANFT: Uh.

23 THE COURT: Who is --

24 MR. SANFT: Who's the individual?

25 THE DEFENDENT: Inoye Jordan -- Jordan.



1 MR. SANFT: He's -- my investigator did speak with him and  
2 did verify the information that Mr. White told me. But the problem is that  
3 we need him to sign an affidavit so I can file that as part of my basis for  
4 filing a motion to withdraw. That's the reason for it.

5 THE COURT: And he's not in the detention center any  
6 longer?

7 MR. SANFT: I don't know where he's at, so I'm going to have  
8 to find out if he's still in there or what the deal is with that. But we sent  
9 him a document for him to review and we did not get a response. My  
10 investigator's been over there and I don't know if he's gotten anything  
11 from that. So I just need a week to verify that he's at CCDC --

12 THE COURT: Okay.

13 MR. SANFT: -- and what to do with that.

14 THE COURT: All right. One week.

15 THE COURT CLERK: April 5, 8:30.

16 MR. SANFT: Thank you, Your Honor.

17 THE COURT: And the record should reflect Mr. Sanft is now  
18 counsel for Mr. White. Mine still says Gruber.

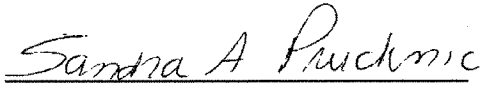
19 THE COURT CLERK: Right.

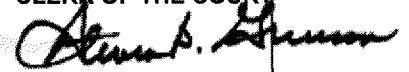
20 MR. SANFT: Thank you, Your Honor.

21 [Proceedings concluded at 10:48 a.m.]

22 ATTEST: I do hereby certify that I have truly and correctly transcribed  
23 the audio/video proceedings in the above-entitled case to the best of my  
24 ability.

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SANDRA PRUCHNIC  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA  
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8 THE STATE OF NEVADA,

9 Plaintiff,

10 vs.

11 TONEY ANTHONY WHITE,

12 Defendant.

CASE#: C-16-313216-2

DEPT. XII

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 TUESDAY, JUNE 5, 2018

16 **RECORDER'S TRANSCRIPT OF HEARING:**  
17 **ALL PENDING MOTIONS**  
18

19 APPEARANCES:

20 For the State:

SAMUEL R. KERN, ESQ.  
Deputy District Attorney

22 For the Defendant:

MICHAEL W. SANFT, ESQ.

23  
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25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Tuesday, June 5, 2018

2  
3 [Hearing began at 8:46 a.m.]

4 THE COURT: State versus Toney White, C313216. Mr.  
5 White is present. He's in custody. Good morning.

6 Mr. SANFT: Your Honor, I just gave Mr. White today a copy of  
7 the transcript of the -- of the canvas. I've reviewed it -- I -- my basis  
8 before was a basis in which there would be an issue of coercion that he  
9 was forced into taking the negotiation that he eventually took. There  
10 was an individual that we were going to have sign an affidavit to that  
11 effect. That person's attorney has come forward and said no.

12 THE COURT: Okay.

13 MR. SANFT: In addition to that, I believe that he does not  
14 want to sign it anymore for fear of retaliation. I spoke with Mr. White  
15 about that issue. He wants to go ahead and just put on an evidentiary  
16 hearing on the issue. But I've informed him and what I've looked at  
17 today is that the transcript of the canvas indicates that he says when you  
18 were asked -- when you asked him specifically about whether or not he  
19 was coerced, he says no.

20 I don't know how to get around that issue. I've spoken to a  
21 couple of other attorneys and I think it -- it's belied by the record that if  
22 there was any issue with coercion that should have been at least  
23 [indiscernible] at that point. But if the Court would allow for us to do an  
24 evidentiary hearing with this other individual, I don't even know if he's  
25 going to want to come forward and testify under oath as to what he had

1 heard happened with Mr. White.

2 THE COURT: Okay.

3 MR. KERN: And --

4 THE COURT: Well you can file a motion and I would --

5 MR. SANFT: For that issue?

6 THE COURT: Yeah, with that issue.

7 MR. SANFT: Okay.

8 THE COURT: And if everything you're telling me, I would  
9 probably grant that evidentiary hearing.

10 MR. SANFT: Okay.

11 THE COURT: Or at least give you an opportunity to bring that  
12 witness in.

13 MR. SANFT: My only concern is -- and what I've told Mr.  
14 White is usually in the past I've had an affidavit to support the motion to  
15 at least allow for an evidentiary hearing before. But if the Court is willing  
16 to just go on the flat basis of my factual assertions and then allow for the  
17 evidentiary hearing, then we'll do that.

18 THE COURT: Yeah. Sounds like it would be a short hearing.

19 MR. SANFT: It would be a very short hearing one way or the  
20 other.

21 THE COURT: Okay.

22 MR. SANFT: Okay.

23 THE COURT: So, how much time do you need to file your  
24 motion?

25 MR. SANFT: If I could have a week, Your Honor. I'll have it

1 filed then.

2 THE COURT: Okay. One week.

3 MR. SANFT: Thank you.

4 THE CLERK: June 14.

5 THE COURT: And then does the State -- how much time  
6 does the State want?

7 MR. KERN: And, Your Honor, this is actually a gang case.  
8 Michael Schwartzer should be coming up here on this. Apologies for --  
9 to Mr. Sanft for not jumping in with that earlier but -- so, if we could trail  
10 this briefly 'til I'm --

11 MR. SANFT: And --

12 MR. KERN: -- done making representations.

13 MR. SANFT: -- I think --

14 THE COURT: I don't --

15 MR. SANFT: -- Mr. Schwartzer will be fine with --

16 THE COURT: Right.

17 MR. SANFT: -- two weeks after that for a response.

18 MR. KERN: Two weeks.

19 THE COURT: Yeah. How about two weeks for a response?

20 MR. SANFT: And then a week for a reply.

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1 THE COURT: June 21. Okay. June 21. And then I'll set it for  
2 one week later for a hearing, June 28 --

3 MR. SANFT: Thank you, Your Honor.

4 THE COURT: -- at 10:30.

5 MR. SANFT: Thank you.

6 [Hearing concluded at 8:49 a.m.]

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21 ATTEST: I do hereby certify that I have truly and correctly transcribed  
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Rubina Feda  
Court Recorder/Transcriber



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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA  
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8 THE STATE OF NEVADA,

9 Plaintiff,

10 vs.

11 TONEY ANTHONY WHITE,

12 Defendant.

CASE#: C-16-313216-2

DEPT. XII

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 THURSDAY, JUNE 28, 2018

16 **RECORDER'S TRANSCRIPT OF HEARING:**  
17 **ALL MOTIONS PENDING**

18 APPEARANCES:

19 For the State:

MICHAEL DICKERSON, ESQ.  
Deputy District Attorney

21 For the Defendant:

MICHAEL W. SANFT, ESQ.

22  
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24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Thursday, June 28, 2018

2  
3 [Hearing began at 10:08 a.m.]

4 THE COURT: You want me to call Mr. White's case?

5 MR. SANFT: Yes, please.

6 THE COURT: State versus Toney White, C313216. He's  
7 present and he's in custody.

8 MR. SANFT: Good morning, Your Honor.

9 THE COURT: Good morning.

10 MR. SANFT: Your Honor, if the Court would recall the last  
11 time that we were here on Mr. White's case the Court had set a briefing  
12 schedule. I received a letter from your clerk a couple days after that  
13 from Mr. White that caused me some concern about filing any type of  
14 motion with regards to his motion to withdraw his plea. I don't know if  
15 the Court had read it, but it was a letter that was addressed to the Court,  
16 but it was given to me.

17 THE COURT: From Mr. White?

18 MR. SANFT: Yes.

19 THE COURT: Do you want to approach? Because what  
20 happens is is anything comes in, Pam copies it and sends it out.

21 MR. SANFT: And that's I think what happened here. I can  
22 approach. I highlighted this one because I thought maybe you had  
23 copies already, but --

24 THE COURT: Okay.

25 [Pause in the proceeding]



1 THE COURT: Okay.

2 MR. SANFT: So I had an opportunity to read the -- the letter  
3 and two things struck out in my mind when I first read it. First of all, Mr.  
4 White is exceptionally gifted at writing because --

5 THE COURT: He's got good handwriting. I like it so I can  
6 read it.

7 MR. SANFT: Yes. And what he wrote was very clear --

8 THE COURT: Mm-hmm.

9 MR. SANFT: -- and I think to the point.

10 The second part of the problem is though, is that what he has  
11 written basically if we had gone forward with that evidentiary hearing in  
12 this matter, I think I would have set myself up for some type of PCR in  
13 the future. He's alleging basically that there are other people that should  
14 be called that haven't been called. And that if you couldn't get to --

15 THE COURT: And you've decided not to.

16 MR. SANFT: Right. And the person that I wanted to call  
17 which I think is central to this issue who is the person that overheard the  
18 threats made to Mr. White, if he refused to come to court today, in his  
19 mind it would have been a farce and a -- and a sham to go forward with  
20 the hearing today.

21 I didn't want to set myself up for it. So after I read the -- the  
22 letter, I called the State Bar and I spoke to a couple of other attorneys  
23 and which has advised don't -- don't do a thing with regards with filing a  
24 motion, allow the Court to make a ruling with regards to what his  
25 representations are and worst case scenario to remove me from the

1 case to have somebody else come in to at least address those concerns  
2 'cause I didn't want to set it up for anything outside of that. So, that's the  
3 reason why we're here today.

4 THE COURT: Okay.

5 MR. SANFT: If it wasn't for the letter we would have filed -- I  
6 would have filed my motion then we would have been here on an  
7 evidentiary hearing, but he would have had the same issues.

8 THE COURT: Okay. But you believe there is a legal basis;  
9 right? You informed me that there is a legal basis to go forward.

10 MR. SANFT: Yes. My investigator interviewed the person  
11 that he had identified --

12 THE COURT: Okay.

13 MR. SANFT: -- as the witness in this matter. My investigator  
14 came back and told me he did confirm --

15 THE COURT: Okay.

16 MR. SANFT: -- that he had overheard some threat made to  
17 Mr. White, but then from that point forward refused to cooperate. And so  
18 that was the issue that we had in the very beginning was --

19 THE COURT: Okay.

20 MR. SANFT: -- I was trying to get him to sign an affidavit. He  
21 wouldn't sign the affidavit. You know, attesting to everything he told my  
22 investigator. And so I put that before the Court last time and the Court  
23 said go ahead and file your motion anyhow and we'll just have the  
24 evidentiary hearing.

25 But his argument is -- and I think it's a valid argument is that

1 you have one shot really at this and if the person doesn't show up for  
2 this particular evidentiary hearing then all we have is us looking at each  
3 other and then you make your ruling.

4 THE COURT: Well Mr. White can testify too.

5 MR. SANFT: Yes. He could testify.

6 THE COURT: I mean -- or you could -- where's that other --  
7 you could subpoena that witness.

8 MR. SANFT: The -- yes. We could. I mean, we could bring  
9 him in, but if he refuses to -- our understanding is he's refusing to testify  
10 at this particular point. He's refusing to cooperate because he's afraid of  
11 retaliation by other people.

12 THE COURT: Okay. Well you can refuse to cooperate and  
13 still be brought here by court order.

14 MR. SANFT: Yes, Your Honor.

15 THE COURT: Is he in custody?

16 MR. SANFT: I believe he still is in custody, yes.

17 THE COURT: Okay. All right. So I'm not sure what you're  
18 asking?

19 MR. SANFT: Well what I'm asking the Court to do at this  
20 particular point --

21 THE COURT: Because Mr. White doesn't get to direct the  
22 way -- what your strategy is and how you move forward.

23 MR. SANFT: I know and --

24 THE COURT: Just because he thinks you should talk to other  
25 witness doesn't mean you have to.

1 MR. SANFT: No. I totally agree with that. But my -- my  
2 concern was that I read his letter and to be quite honest I was very  
3 impressed with it. I read this thing and I'm like he's articulate --

4 THE COURT: He is.

5 MR. SANFT: -- and he's, you know, I think his basis is well  
6 founded and quite honestly what he told -- what he laid out in the letter, I  
7 think set the record for something else.

8 And so, before I move forward with what I was going to do I  
9 want to make sure that the Court understood what was happening, what  
10 his position is and if the Court orders made a continued to do what I was  
11 supposed to do then I will do it. But I didn't want to go forward with this -  
12 -

13 THE COURT: Okay.

14 MR. SANFT: -- and have this be an issue down the line on a  
15 PCR.

16 THE COURT: Okay. Well what I can do, Mr. White, is I can  
17 make this a part of the record and Mr. Sanft is going to continue to  
18 represent you. Okay. You need to discuss everything with Mr. Sanft,  
19 but he gets to determine what the legal strategy is. I'm happy to make  
20 this a part of the record, but you can't keep stalling the case going  
21 forward by claiming every attorney that I give you doesn't do what you  
22 think they're -- they're supposed to do. I mean, I have a guilty plea in  
23 front of me when you stood in front of me and plead guilty. Okay.

24 THE DEFENDANT: Your Honor, I'm not saying --

25 THE COURT: You want to move to withdraw it that's fine.

1 Okay. I'm happy to make this a part of the record, but your attorney they  
2 -- you talk to your attorney, you take advice in counsel, but you do not  
3 direct the legal strategy; that's what your attorney does. You can  
4 disagree all you want. I'm never going to order him to say do exactly  
5 what Mr. White tells you to do. He's the lawyer. You're not.

6 THE DEFENDANT: Okay. My issue is not with him, it's with  
7 the investigator.

8 THE COURT: Okay.

9 THE DEFENDANT: I don't understand why the investigator  
10 only --

11 THE COURT: Sounds like your issue is with him.

12 THE DEFENDANT: Huh? Nah.

13 MR. SANFT: Well --

14 THE COURT: Who do you think tells the investigator what to  
15 do? You think the investigator is out there willy-nilly on their own.

16 THE DEFENDANT: Well in this case the investigator came  
17 and talked to me. I gave him the names of the witnesses.

18 THE COURT: Got it.

19 THE DEFENDANT: And only one of those witnesses got  
20 interviewed and none of the other witnesses got interviewed. And I don't  
21 understand that.

22 MR. SANFT: And, Your Honor, I have --

23 [Colloquy between the Court and the clerk]

24 MR. SANFT: -- I have -- my investigator always drafts reports  
25 whenever he does something on a case including interviewing people

1 and so forth. My initial interview or my investigators interview with Mr.  
2 White he does identify people in here. But with regards to what my  
3 investigator did is he followed up with the person that we thought was  
4 the main person involved and that was --

5 THE COURT: Sure.

6 MR. SANFT: -- the actual witness. My understanding is the  
7 other people that Mr. White want to call are people that are peripheral in  
8 that they may have heard something, but it may have been hearsay  
9 information. I'm not quite sure what the veracity is of that information. If  
10 -- and once again, based upon the letter and if the Court would like for  
11 me to do so, I'll follow up with those other individuals and make sure that  
12 my investigator goes and speaks with them. One of them is his sister  
13 and the other one is his mother.

14 THE COURT: Oh no. I'm not going to direct you either; that's  
15 not appropriate for me to do. I mean, --

16 MR. SANFT: I just want to -- I just want to be --

17 THE COURT: -- you're a competent attorney.

18 MR. SANFT: Thank you.

19 THE COURT: Very competent attorney.

20 MR. SANFT: But I think --

21 THE COURT: The Court has faith in you.

22 MR. SANFT: Well, I guess my main issue is is that once  
23 again I read a lot of complaints that are lodged against me and most  
24 times I don't regard them for anything more than what they are. But in  
25 this regard with regards to what Mr. White wrote I just -- I was impressed

1 and so I -- if -- I was a little bit afraid as well, but with regards to a  
2 possible PCR coming back with some validity or some issue that I  
3 should have not stepped into. And that's through --

4 THE COURT: Well if you think that his claims are righteous  
5 then obviously you should go do whatever you think you have to do.

6 MR. SANFT: Well, yes. But once again, I think the problem  
7 I'm having with all of this is that I just didn't want to go forward with the  
8 motion and doing the evidentiary hearing today --

9 THE COURT: Okay.

10 MR. SANFT: -- and set in concrete basically without giving an  
11 opportunity for Mr. White to at least have this discussion with the Court.

12 THE COURT: No problem. Do you want a continuance?

13 MR. SANFT: Well, yes. Well we'll need a continuance so at  
14 least I can --

15 THE COURT: Okay.

16 MR. SANFT: -- get -- get it together.

17 THE COURT: Okay. I just want to make sure it's very clear,  
18 Mr. White, I will make this a part of the record, but Mr. Sanft is the  
19 attorney. You should discuss everything with him. But he gets to  
20 decide, you know, what witnesses he should bring forward. What  
21 affidavits if any he should bring forward based on what you tell him.  
22 You're entitled to an explanation as to those things, but it's -- it's  
23 ultimately his decision. He's -- he's driving the bus. You understand  
24 that; right?

25 THE DEFENDANT: I understand that.

1 THE COURT: Okay.

2 MR. SANFT: Thank you.

3 THE COURT: He's asked for a continuance 'cause he thinks  
4 some of your issues may be appropriate, so I'm going to grant the  
5 continuance. Do you want me to make this a part of the record?

6 THE DEFENDANT: Yeah.

7 THE COURT: Okay.

8 MR. SANFT: Thank you, Your Honor.

9 THE COURT: So it'll be marked as Court's exhibit and made  
10 part of the record. How much time, 45 days?

11 MR. SANFT: Same -- same timeframe that we had before,  
12 Your Honor. The motions already done. I just stalled on filing it because  
13 of this issue with the letter, so if you want me to file it today I'll file it  
14 today or tomorrow even. And then I think we need two weeks for the  
15 State to respond.

16 THE COURT: Okay. I'm getting this briefing schedule.

17 THE CLERK: July 19<sup>th</sup>.

18 THE COURT: And you're opening brief and then the State's  
19 response 30 days.

20 THE CLERK: August 9.

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THE COURT: And then a reply two weeks.

THE CLERK: August 23.

THE COURT: And then we'll set it for hearing.

THE CLERK: September 6, 10:30.

[Colloquy between the Court and the court staff]

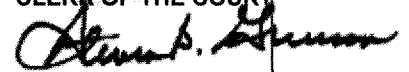
[Hearing concluded at 10:21 a.m.]

ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.



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Rubina Feda  
Court Recorder/Transcriber



1 RTRAN

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5 DISTRICT COURT  
6 CLARK COUNTY, NEVADA  
7

8 THE STATE OF NEVADA,

9 Plaintiff,

10 vs.

11 TONEY ANTHONY WHITE,

12 Defendant.

CASE#: C-16-313216-2

DEPT. XII

13  
14 BEFORE THE HONORABLE MICHELLE LEAVITT, DISTRICT COURT JUDGE  
15 THURSDAY, DECEMBER 20, 2018

16 **RECORDER'S TRANSCRIPT OF HEARING:**  
17 **ALL PENDING MOTIONS**  
18

19 **APPEARANCES:**

20 For the State:

MICHAEL J. SCHWARTZER, ESQ.  
NOREEN C. DEMONTE, ESQ.  
Chief Deputy District Attorneys

23 For the Defendant:

BENJAMIN J. NADIG, ESQ.

24  
25 RECORDED BY: KRISTINE SANTI, COURT RECORDER

1 Las Vegas, Nevada, Thursday, December 20, 2018

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3 [Hearing began at 9:06 a.m.]

4 MR. SCHWARTZER: Your Honor, I assume Mr. White wasn't  
5 transported with this group?

6 THE CORRECTIONS OFFICER: No. He wasn't.

7 THE COURT: Oh and I -- and Mr. Sanft isn't going to be here.

8 MR. SCHWARTZER: Right.

9 THE COURT: It's my understanding you're not going to  
10 oppose it.

11 MR. SCHWARTZER: I'm --

12 THE COURT: That's interesting. He's -- he's got an  
13 evidentiary hearing on and he's not going to be here.

14 [Colloquy]

15 [Proceedings trailed at 9:06 a.m.]

16 [Proceedings recalled at 10:57 a.m.]

17 THE COURT: State versus Toney White, C313216. He's  
18 present and he's in custody and this is on for his motion to withdraw  
19 guilty plea. It's my understanding the State is have -- going to have no  
20 opposition to that motion.

21 MS. DEMONTE: That's correct.

22 THE COURT: Okay. At this time I'm going to grant  
23 Defendant's motion to withdraw his guilty plea. You understand the  
24 State's going to file an amended information reinstating all the --

25 MS. DEMONTE: If we can -- actually if we could just strike the

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2 THE MARSHAL: Ben or [indiscernible] are going to be here  
3 for him.

4 THE COURT: Oh, okay.

5 MR. SCHWARTZER: So unfortunately as you heard from Mr.  
6 Claus, I'm in -- I'm in trial starting at 10:30. Could I just leave that with  
7 Mr. -- I'm sorry --

8 THE COURT: You can leave it with Mr. Dickerson.

9 MR. SCHWARTZER: Okay.

10 THE COURT: It's my understanding the State's going to have  
11 no opposition.

12 MR. SCHWARTZER: They were just going to ask for a trial  
13 date as soon as we can.

14 THE COURT: Okay. Yeah. Leave it with --

15 MR. SCHWARTZER: Thank you.

16 THE COURT: -- Mr. Dickerson, that's fine. Yeah. We'll strike  
17 the amended and the original --

18 MS. DEMONTE: -- amended indictment that was filed. Yes.  
19 And revert to the March 9<sup>th</sup> indictment.

20 THE COURT: Sure.

21 MS. DEMONTE: Okay.

22 THE COURT: The original indictment will be reinstated and I'll  
23 set it for trial. Do you have his trial schedule?

24 MR. NADIG: My understanding is he said as quickly as you  
25 can possibly set it. So he has said he's open to whenever. The quickest

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it possibly can go.

THE CLERK: Calendar Call February 12, 8:30. Jury trial  
February 19, 1:30.

MR. NADIG: Thank you, Your Honor.

THE COURT: Thank you.

[Hearing concluded at 10:58 a.m.]

ATTEST: I do hereby certify that I have truly and correctly transcribed  
the audio/video proceedings in the above-entitled case to the best of my  
ability.



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Rubina Feda  
Court Recorder/Transcriber