



## INSPECTOR GENERAL REPORT

2010-11-0290

December 13, 2010

### DOC PLAINFIELD INSPECTION REPORT

*Inspector General David O. Thomas reports as follows:*

This report addresses the compliance by the Plainfield Correctional Facility (Plainfield) of the Indiana Department of Corrections (DOC) with a previous review of it by the State Board of Accounts (SBOA) in Report Number B33616.

The SBOA periodically reviews state agencies for compliance with the SBOA Accounting and Uniform Compliance Guidelines Manuals (“Manuals”). IC 5-11-1-24. The SBOA may also review agencies for compliance with “any” law. IC 5-11-5-1(a).

The OIG is responsible for addressing fraud, waste, abuse, and wrongdoing in agencies. IC 4-2-7-2. The OIG is also charged to initiate, supervise, and coordinate investigations, recommend policies and carry out other activities designed to deter, detect, and eradicate fraud, waste, abuse, mismanagement, and misconduct in state government, and to provide advice to an

agency on developing, implementing, and enforcing policies and procedures to prevent or reduce the risk of fraudulent or wrongful acts within the agency. IC 4-2-7-3.

In this case, a previous SBOA finding was chosen that addressed the Recreation Fund at Plainfield. This area is controlled by statute and requires these funds to be used for the benefit of prison inmates and patients. IC 4-24-6-6.<sup>1</sup>

The Plainfield Superintendent and DOC Regional Finance Director cooperated with the OIG in this review. Various documents reflecting the purchasing through the recreation fund were examined. The fund requests appeared to be completed on the proper forms. It was revealed that the expenses

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<sup>1</sup> IC 4-24-6-6 reads:

Recreation funds; establishment

Sec. 6. (a) There is established in each psychiatric, benevolent, penal, and correctional institution a fund to be known as the:

- (1) patients' recreation fund;
- (2) students' recreation fund; or
- (3) inmates' recreation fund.

(b) These funds shall be used, at the discretion of the superintendent or warden subject to the approval of the chief administrative officer of the department, division, or state agency having administrative control and supervision over the institution, for the direct benefit of persons who are inmates or patients in such institutions, and shall not be used for any purposes which are covered by state appropriations.

(c) The funds shall be expended for purposes in accordance with the policies of the department, division, or state agency having administrative control over such institution. The expenditures may include, but are not limited to:

- (1) purchased entertainment;
  - (2) magazine subscriptions for the libraries, wards, or units of such institutions;
  - (3) special recreational equipment and supplies;
  - (4) special foods for parties or celebrations;
  - (5) educational materials;
  - (6) phonograph records, televisions, radios, and similar items when the items cannot be purchased from regular appropriations; and
  - (7) any other purposes not covered by regular appropriations;
- that will provide a direct benefit to or assist in the rehabilitation of the inmates or patients of such institutions.

were properly reviewed and approved first by the Superintendent, and then the requests were then forwarded to the appropriate accountant for additional review.

In compliance with the statute, the purchases reflected in the documents also appeared to be for the benefit of the inmates. The review of DOC emails also corroborated the purchases reflected in the “Request For Recreation Fund Purchase” forms.

These findings were verified by the samples attached as Exhibits A and B.

It is recommended that compliance with the SBOA Manuals continue. The OIG remains ready to assist DOC if it desires OIG advice or assistance. With our finding compliance with the statutory requirements, this investigation is closed.

Dated this 13<sup>th</sup> day of December, 2010.



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David O. Thomas, Inspector General

PO# 10R084



**REQUEST FOR RECREATION FUND PURCHASE**  
 State Form 45029 (R / 10-07)  
 Approved by the State Board of Accounts, 2008  
 INDIANA DEPARTMENT OF CORRECTION

Name of requester <b>WENDY KNIGHT</b>	Name of department <b>ADMINISTRATION</b>	Date of request (month, day, year) <b>11/12/2010</b>
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Purpose of request  
**TO PROVIDE RELIGIOUS STUDY MATERIAL TO OFFENDER POPULATION**

REC POLICY SEC 6, E

QUANTITY	ITEM AND NUMBER	BRAND	DESCRIPTION	VENDOR 1	VENDOR 2	VENDOR 3
1. 100 EA	UNCOMMON STUDIES			\$699.00	\$899.00	\$999
2. 1EA	Shipping			24.99		
3.						
4.				\$723.99	\$899.00	\$999

Is quotations attached?  Yes  No      Total cost **\$ 723.99**

1. Name of vendor <b>GROUP Publishing</b>	Name of contact person <b>See - E-mail</b>	Telephone number <b>635-0404</b>
Address (number and street, city, state and ZIP code) <b>PO Box 3661 Loveland, CO 80539</b>		Date of contact (month, day, year) <b>11-16-10</b>

2. Name of vendor <b>Barnes &amp; Noble</b>	Name of contact person <b>WEB</b>	Telephone number <b>WEB</b>
Address (number and street, city, state and ZIP code)		Date of contact (month, day, year) <b>11-16-10</b>

3. Name of vendor <b>Life Way Christian Stores</b>	Name of contact person <b>WEB</b>	Telephone number <b>WEB</b>
Address (number and street, city, state and ZIP code)		Date of contact (month, day, year) <b>11-16-10</b>

Justification for selection of vendor  
**Group Publishing Lowest Bid / Price**

Name of fund to be used <b>RECREATION</b>	Is purchase <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
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Signature of superintendent or designee <b>See E-mail</b>	Date of approval (month, day, year)
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Name of selected vendor <b>GROUP.COM</b>	Date items received (month, day, year)	Is shipment complete? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Approved for payment by <b>Wendy Knight</b>	Date approved for payment (month, day, year) <b>11-16-10</b>	Amount of payment <b>\$ 729.99</b>	Date of payment (month, day, year) <b>11-16-10</b>
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Check number <b>219</b>	Name of person making payment <b>TONY WRIGHT</b>
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# REQUEST FOR RECREATION FUND PURCHASE

State Form 45029 (R / 10-07)  
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INDIANA DEPARTMENT OF CORRECTION

PO# 10R084

Name of requester <b>WENDY KNIGHT</b>	Name of department <b>ADMINISTRATION</b>	Date of request (month, day, year) <b>11/12/2010</b>
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Purpose of request  
**TO PROVIDE RELIGIOUS STUDY MATERIAL TO OFFENDER POPULATION**

REC POLICY SEC 6, E

QUANTITY	ITEM AND NUMBER	BRAND	DESCRIPTION	VENDOR 1	VENDOR 2	VENDOR 3
1. 100 EA	UNCOMMON STUDIES			\$699.00	\$899.00	\$999
2. 1EA	Shipping			24.99		
3.						
4.				\$723.99	\$899.00	\$999

Is quotations attached?  Yes  No

Total cost **\$723.99**

1. Name of vendor <b>GROUP Publishing</b>	Name of contact person <b>See - E-mail</b>	Telephone number <b>635-0404</b>
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Address (number and street, city, state and ZIP code)  
**PO Box 3661 Loveland CO 80539**

Date of contact (month, day, year)  
**11-16-10**

2. Name of vendor <b>Barnes &amp; Noble</b>	Name of contact person <b>WEB</b>	Telephone number <b>WEB</b>
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Address (number and street, city, state and ZIP code)

Date of contact (month, day, year)  
**11-16-10**

3. Name of vendor <b>Life Way Christian Stores</b>	Name of contact person <b>WEB</b>	Telephone number <b>WEB</b>
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Address (number and street, city, state and ZIP code)

Date of contact (month, day, year)  
**11-16-10**

Justification for selection of vendor  
**Group Publishing Lowest Bid / Price**

Name of fund to be used  
**RECREATION**

Signature of superintendent or designee  
**See e-mail**

Date of approval (month, day, year)

Is purchase  Approved  Denied

Name of selected vendor <b>GROUP.COM</b>	Date items received (month, day, year)	Is shipment complete? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Approved for payment by <b>W</b>	Date approved for payment (month, day, year) <b>11-16-10</b>	Amount of payment <b>\$729.99</b>	Date of payment (month, day, year) <b>11-16-10</b>
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Check number <b>218</b>	Name of person making payment <b>TONY WRIGHT</b>
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# REQUEST FOR RECREATION FUND PURCHASE

State Form 45029 (R / 10-07)  
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INDIANA DEPARTMENT OF CORRECTION

10R079  
Page 1 of 2

PSPO# 11538394

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Name of requester <b>DIAN DAVIS</b>	Name of department <b>LAW LIBRARY</b>	Date of request (month, day, year) <b>11/15/2010</b>
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Purpose of request  
**TO PROVIDE SUPPLIES FOR THE LAW LIBRARY**

REC POLICY SEC 6,N

	QUANTITY	ITEM AND NUMBER	BRAND	DESCRIPTION	VENDOR 1	VENDOR 2	VENDOR 3
1.	2 PCK	WRITING PAPER			16.42		
2.	3 BX	STANDARD STAPLES 504183			1.26		
3.	3 EA	ROYAL ALPHA 600 TYPEWRITER RIBBON			11.16		
4.							

Is quotations attached?  Yes  No

Total cost ~~30.84~~ **67.88**

1. Name of vendor <b>STAPLES</b>	Name of contact person <b>WEB</b>	Telephone number
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Address (number and street, city, state and ZIP code)

Date of contact (month, day, year)

2. Name of vendor	Name of contact person	Telephone number
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Address (number and street, city, state and ZIP code)

Date of contact (month, day, year)

3. Name of vendor	Name of contact person	Telephone number
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Address (number and street, city, state and ZIP code)

Date of contact (month, day, year)

Justification for selection of vendor  
**QPA VENDOR**

Name of fund to be used  
**RECREATIION**

Is purchase  Approved  Denied

Signature of superintendent or designee <i>[Signature]</i>	Date of approval (month, day, year) <b>11-15-10</b>
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Name of selected vendor <b>STAPLES</b>	Date items received (month, day, year) <b>11-19-10</b>	Is shipment complete? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Approved for payment by <i>[Signature]</i>	Date approved for payment (month, day, year) <b>11-24-10</b>	Amount of payment <b>67.89</b>	Date of payment (month, day, year) <b>11-24-10</b>
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Check number <b>224</b>	Name of person making payment <b>TONY WRIGHT</b>
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# REQUEST FOR RECREATION FUND PURCHASE

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INDIANA DEPARTMENT OF CORRECTION

PO# 10R079

Page 2 of 2

Name of requester <b>TONY WRIGHT</b>		Name of department <b>ADMIN</b>		Date of request (month, day, year) <b>11/15/2010</b>			
Purpose of request <b>TO PROVIDE PENCILS/CARD STOCK FOR TONY DUNGY PROGRAM- FOR OFFENDER USE</b>							
REC POLICY SEC 6,B							
	QUANTITY	ITEM AND NUMBER	BRAND	DESCRIPTION	VENDOR 1	VENDOR 2	VENDOR 3
1.	4 BX	GOLF PENCILS 116012			16.48		
2.	1 RM	CARD STOCK 490887			4.93		
3.							
4.							
Is quotations attached? <input type="checkbox"/> Yes <input type="checkbox"/> No				Total cost <b>21.41</b>			
1. Name of vendor <b>STAPLES</b>			Name of contact person <b>WEB</b>		Telephone number		
Address (number and street, city, state and ZIP code)						Date of contact (month, day, year)	
2. Name of vendor			Name of contact person		Telephone number		
Address (number and street, city, state and ZIP code)						Date of contact (month, day, year)	
3. Name of vendor			Name of contact person		Telephone number		
Address (number and street, city, state and ZIP code)						Date of contact (month, day, year)	
Justification for selection of vendor <b>QPA VENDOR</b>							
Name of fund to be used <b>RECREATIION</b>				Is purchase <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied			
Signature of superintendent or designee <i>See attached</i>						Date of approval (month, day, year)	
Name of selected vendor <b>STAPLES</b>			Date items received (month, day, year)		Is shipment complete? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Approved for payment by			Date approved for payment (month, day, year)		Amount of payment		Date of payment (month, day, year)
Check number <i>Ante Hill</i>			Name of person making payment <b>TONY WRIGHT</b>				