

STATE OF ARKANSAS
EXECUTIVE DEPARTMENT
PROCLAMATION

TO ALL TO WHOM THESE PRESENTS SHALL COME GREETINGS:

WHEREAS, Julius M. Johnson, Jr., ADC# 70933, has applied for executive clemency, specifically a commutation; and

WHEREAS, Julius M. Johnson, Jr., ADC# 70933, was convicted in the Circuit Court of Pulaski County, Arkansas, on April 21, 1988 of burglary (Class B felony) and theft of property (Class B felony) (habitual offender) (CR-87-191); and;

WHEREAS, Julius M. Johnson, Jr., ADC# 70933, was convicted in the Circuit Court of Pulaski County, Arkansas, on May 23, 1988, of burglary (Class B felony) and theft of property (Class B felony) (habitual offender) (CR-87-2467); and

WHEREAS, Julius M. Johnson, Jr., ADC# 70933, was convicted in the Circuit Court of Pulaski County, Arkansas, on August 4, 1988 of six (6) counts burglary (Class B felony), one (1) count theft of property (Class B felony), four (4) counts theft of property (Class C felony) and theft of a credit card (Class C felony) (habitual offender) (CR-87-1341); and;

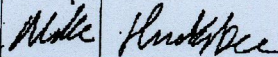
WHEREAS, Julius M. Johnson, Jr., ADC# 70933, was sentenced to 160 years in the Department of Correction; and

WHEREAS, Julius M. Johnson, Jr., ADC# 70933, was age 33 when convicted and is now 45; and

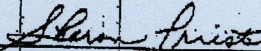
WHEREAS, the judicial and law enforcement officials of the Sixth Judicial District have raised no objections to applicant's request since receiving the notice of intent dated December 3, 1999; and;

NOW THEREFORE, I, Mike Huckabee, by virtue of the power and authority vested in me as Governor of the State of Arkansas, do hereby commute the sentence of Julius M. Johnson, Jr., ADC# 70933, for the above offense(s) making him parole eligible on August 4, 2008.

In Testimony Whereof, I hereunto set my hand and caused to be affixed hereto the Great Seal of the State of Arkansas in the Governor's Office, Little Rock, Arkansas, this 5th day of January, 2000.

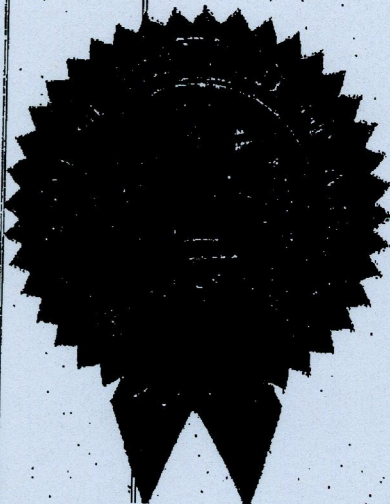


Mike Huckabee
Governor



Sharon Priest
Secretary of State

COPY



EXECUTIVE CLEMENCY INTERVIEW WORK SHEET

INMATE'S NAME: JOHNSON, JULIUS M.

ADC# 070933

UNIT: DIAGNOSTIC

DATE: 8/26/1999

RECOMMEND TO GOVERNOR THAT
APPLICATION IS WITH MERIT
WITH THE FOLLOWING
RECOMMENDATIONS:

RECOMMEND TO GOVERNOR THAT
APPLICATION IS WITHOUT MERIT
AT THIS TIME FOR THE FOLLOWING
REASONS:

commute sentence to _____ years

commute to parole eligible

insufficient time served

sentence is not considered excessive

prior criminal history

other: _____

X other: Recommend sentence be

Reduced.

COMMENTS: MOTHER - 2 sisters - Niece Present

INTERVIEWER: A Peroni 8/17/99

BOARD MEMBER

CONCUR

OTHER

Deborah Guttman

✓

R. H. State

✓

J. S.

✓

W. P.

✓

EXECUTIVE CLEMENCY APPLICATION

Name: JULIUS M. JOHNSON Date of Birth: 9/11/54
Address: 7500 CORRECTION CIRCLE Race/Sex: R/M
City: NORTH LITTLE ROCK, AR ADC or DCP #: 70933
State: ARKANSAS Zip: 71603 (If applicable)
Telephone (home): 851-6393 or 851-9780 (work): _____

Person preparing the application (if other than yourself):

Name: _____
Address: _____
State: _____ Zip: _____
Telephone (home): _____ (work): _____

I AM APPLYING FOR:

- ☒ COMMUTATION (time cut) (Please begin on Page 2)
- ☐ PARDON (Please begin on Page 3)
- ☐ FIREARM RESTORATION ONLY (Please begin on Page 3)

My reason(s) for applying for a commutation of my sentence (time cut):

Place an X in the appropriate ☐ below:

1. ☒ I wish to correct an injustice which may have occurred during the trial. I have attached letters or other documentation that will support this claim. If you wish to attach an explanation or statement to this application, it will be considered as a part of the application. Discuss results of appeals or Rule 37 or other post-conviction proceedings in an attached statement. see exhibit A-C
2. ☐ I have a life-threatening medical condition which does not qualify for Act 290. I have attached a statement explaining my condition. Your medical statement will be validated by ADC Medical Services before being sent to the Post Prison Transfer Board.
3. ☒ I want to adjust what may be considered an excessive sentence. see exhibit A-C
4. ☒ My institutional adjustment has been exemplary and the ends of justice have been achieved.
see exhibit D through _____

NOTE:

- A. All supporting documentation must be available when the Board considers your application.
- B. The Board will ordinarily not consider your application if your case is currently being appealed or if a Rule 37 petition or other petition of post-conviction relief is pending.
- C. If your application is based on your belief that your sentence is excessive or that your institutional adjustment has been exemplary and the ends of justice have been achieved, the application will ordinarily be denied if you have not served the portion of your sentence indicated by the following table:

Life Sentence	12 years
Over 30 years	7 years
25 - 30 years	6 years
22 - 24 years	5 years
19 - 21 years	4 years
16 - 18 years	3 years
11 - 15 years	2 years
Below 11 years	1 year

If you believe that this table should not apply in your case, you should attach a statement of your reasons to this application.

GENERAL INFORMATION:

1. Give the full name under which you were convicted and any alias names you have used:
JULIUS M. JOHNSON

2. List all crime(s) for which you have been convicted, the county of conviction, date of conviction, docket number, and sentence. (Sentence may include fines, probation*, suspended sentence or time incarcerated in the Arkansas Department of Correction or the Department of Community Punishment.)

Crime(s)	County	Conviction Date	Docket #	Sentence
Burglary, Theft of Property	Pulaski	4/21/88	87-1191	40 yrs (20&20 cs)
Burglary, T.O. Property	Pulaski	5/23/88	87-2467	20 & 20 yrs cs
Burglary, T.O. Property	Pulaski	8/4/88	87-1341	20 & 20 yrs cs

NOTE: Please attach a separate sheet if necessary to include all offenses.

* Please include a copy of any orders of probation or suspended sentence you may have received.

3. Are you currently:

☒ serving a sentence in the ADC or DCP? Discharge date: 5/15/2067

☐ on parole? Discharge date: _____

☐ on probation? Discharge date: _____

☐ serving a suspended sentence? Discharge date: _____

☐ discharged from your sentence? Discharge date: _____

4. Are you requesting the restoration of your right to own and possess firearms? ☐ Yes ☒ No

5. Were other person also involved in the crime? ☒ Yes ☐ No

If yes, list the names of your accomplices and what, if any, sentences they received.

Edward Smith / Suspended Sentence

6. Concerning the facts of the crime, briefly explain what happened.

Edward Smith and I had done some burglary's in his vehicle.

Smith turned State Witness and recieved a suspended sentence,

and I was sentenced to 160 years.

7. What is your reason for requesting executive clemency at this time?
I have served 12 years in exemplary fashion for a violation
of the criminal offense of Burglary, Theft of Property, and
I pray my excellent institutional record and good deeds will
any consideration offered in granting relief from a sentence
that may be considered an excessive sentence.

CRIMINAL HISTORY:

List all juvenile, misdemeanor, DWI, traffic violations, etc, or crimes committed outside the state of Arkansas. Do not include convictions listed in response to question 2 above.

Crime(s)	County / State	Conviction Date	Docket #	Sentence

PERSONAL BACKGROUND:

1. Are you: Single ☐ Married ☐ Separated ☐ Divorced ☒ Widowed ☐
 If married, what is your spouse's full name? _____

When and where were you married? _____

2. For any previous marriages, list the following information:

Name of Spouse	Date of Marriage	Date Marriage Ended	Reason (divorce, death, etc.)
Olivia Johnson	12/77	1987	adultery

My wife comitted adultery, and when my youngest son was 15 mo.
it was told to me that he was not my son. I was devistated
and it destroyed me. I was so hurt I just lost touch and focus
(see following page)

3. How many children do you have? 2. List the following information:

Name	Age	Address	
Julius Johnson III	16	8912 W.36th St., Little Rock, AR	72204
Javin Oliver Johnson	12	8912 W.36th St., Little Rock, AR	72204

(continued from page 4)

toward every thing. I was so ashamed at the time that something like that could happen to me and I couldn't face anyone, especially my family. No One. I was a hurt I would not, could not wish on any one, and because of this, I ended up doing something I should not have done, and I am sorry.

4. Have you ever served in the Armed Forces? ☒ Yes ☐ No
If so, which branch? U.S. Army
What type of discharge did you receive? ☒ Honorable ☐ Dishonorable ☐ Medical ☐ Other

EDUCATIONAL BACKGROUND:

List the following information about all schools you have attended, including any vocational-technical training:

Name & Address of School	Date of Attendance	Highest Grade Completed/Degree
Shaw Elementary	1961 - 1967	6th
Oak Grove Jr. High	1967 - 1969	8th
Oak Grove High	1969 - 1973	12th. Needed English to graduate.
University of Pine Bluff	1992 - 1995	Semester to Graduate

EMPLOYMENT BACKGROUND:

1. Please provide the following information about your current job:

Name of employer: Recreation Department, Coach T. Brock

Employer's address: 7500 Correction Circle, Diagnostic Unit ADC

When were you hired: 1992

Give a brief description of your job responsibilities: Recreation Clerk. Provide recreational activities for population. Keep up the department and recreation responsibilities for accreditation, file ADC paper of Policy, keep records. Employed 8 years.

2. If you are currently unemployed, but on disability, please list how you became disabled (work-related injury, etc.) _____

3. For previous jobs you have held, list the following information:

Name & Address of Employer	Type of work	Dates employed	Reason for Leaving
McCroskey Sht. Mtl. Sheet Metal		1978-1986	Co. Closed
Little Rock Water Works, Water Utility Co.		86-87	Didn't leave, was given 30 days off to work out marital problems, but instead come to ADC.
Arkmo Lumber Co,	Delivery while laid off.		

MISCELLANEOUS INFORMATION:

1. How is your health? ☐ Excellent ☒ Good ☐ Fair ☐ Poor
2. Have you ever been confined to a mental hospital? ☐ Yes ☒ No
If yes, list the following information:

Name & Address of Institution	Date committed	Date released

3. Do you use any type of drugs, including prescription drugs? ☐ Yes ☐ No
If yes, list the type of drugs and the reason for their use:

4. Do you use alcohol? ☐ Yes ☒ No.

If yes, how often: ☐ Periodically ☐ Regularly ☐ Socially ☐ Heavily
Did then because of the problems I was having, but never have been a drug or alcohol abuser.

5. Have you ever received treatment for alcohol or drug problems (example: Alcoholics Anonymous)? ☒ Yes ☐ No

If yes, please provide a brief explanation: Was in the program for some meetings, but got in other programs the ADC offered and completed every one. There are no other programs available, have been in every program in order to better myself in order to be a better person in society.

REFERENCES:

List three (3) people not related to you who have known you for at least five (5) years:

Name	Address/City/State/Zip (8912 W. 36th St.)	Phone
Olivia Durbin,	3207 Dartmouth, Little Rock, AR 72204	219-1344
Fred Hokes	Watershed	3780177
Wayne Wright,	NLR Police Officer	

By signing this application, I hereby swear that the information provided is true and accurate to the best of my knowledge.

Julius M Johnson
Applicant's Signature

3-15-99
Date of application

DOR0170
PAGE 1

DATE 03/23/99
TIME 10.58.07

POST PRISON TRANSFER BOARD
EXECUTIVE CLEMENCY
LEGAL NOTICE - FORM 153

Received

APR 01 1999

Institutional Parole

TO: PROSECUTING ATTORNEY JEGLEY

RE: JOHNSON, JULIUS M. JR ADC#: 070933 LOCATION: D01 - DIAGNOSTIC PERM

BOARD MO: 06
PE DATE: 03/01/27

PERSUANT TO ARKANSAS CODE ANN 5-4-607 ATTACHED IS THE ABOVE NAMED INMATES'S APPLICATION FOR EXECUTIVE CLEMENCY.

OUR FILE CONTAINS THE FOLLOWING INFORMATION:

COUNTY	DOCKET	CRIME	COUNTS	SENTENCE DATE
PULASKI	871191	BURGLARY	1	04/21/88
PULASKI	871191	THEFT OF PROPERTY	1	04/21/88
PULASKI	872467	BURGLARY	1	05/23/88
PULASKI	872467	THEFT OF PROPERTY	1	05/23/88
PULASKI	871341	BURGLARY	6	08/04/88
PULASKI	871341	THEFT OF PROPERTY	6	08/04/88

TOTAL SENTENCE LENGTH 160 YRS 0 MOS 0 DAYS MINIMUM RELEASE DATE 03/01/67

THE INMATE'S APPLICATION WILL BE REVIEWED BY THE POST PRISON TRANSFER BOARD DURING THE MONTH NOTED ABOVE. AT PRESENT, THIS IS ONLY A RECORD REVIEW. HOWEVER, THE INMATE MAY LATER BE SCHEDULED FOR AN INTERVIEW (HEARING) AT THE REQUEST OF THE BOARD. IF YOU WISH TO COMMENT OR EXPRESS AN OPINION REGARDING THIS APPLICATION, PLEASE RESPOND NOW. THIS IS THE ONLY NOTIFICATION YOU WILL RECEIVE PERTAINING TO "THIS" APPLICATION. YOUR COMMENTS WILL BE PLACED IN THE FILE AND CONSIDERED WHENEVER "THIS" APPLICATION IS REVIEWED BY THE BOARD.

REPLY TO:

PAROLE ADMINISTRATOR
P. O. BOX 8707
PINE BLUFF, AR 71611

RESPONSE:

*No objection to clemency by this
Office of the Board finds that
Mr. Johnson is a good candidate based on
information they have available.*

(SIGNED) Melody H. Piazza
DATE 3-29-99