



WAIVER REQUEST FOR EXECUTIVE CLEMENCY

If you do not meet the requirements for executive clemency, you may not submit the application for executive clemency until your request for a waiver is granted. This document can be made available in alternate formats to individuals with disabilities upon request.

TYPE OR PRINT CLEARLY

1. Name (First, Middle, Last): DARRELL M. HARRIS
2. Date of Birth 8-30-63 3. Social Security Number XXXXXXXXXX
4. Type of executive clemency requested:  Pardon  Reprieve  Commutation
5. Have you applied for an eligibility rule waiver before?  Yes  No If yes, when? \_\_\_\_\_  
(You may not request a waiver unless 36 months have passed since your last waiver request.)
6. Reason why waiver is requested:  You were not convicted of a felony  
 You are currently incarcerated  
 It has been less than 8 years since you completed your sentence (including all parole and probation)
7. Mailing address (All correspondence will be sent here. Notify the Board of any change of address.)  
Street/P.O. Box/Route: OSCA, P.O. Box 3310  
City: Oshkosh State: WI Zip: 54903
8. Home address, if different from mailing address (Notify the Board of any change of address.)  
Street/P.O. Box/Route: \_\_\_\_\_  
City: Oshkosh State: \_\_\_\_\_ Zip: \_\_\_\_\_
9. Telephone number(s) Include Area Code) (You must notify the Board of any change of phone number.):  
Home: \_\_\_\_\_  
Work: (920) 231-4010  
Cell: \_\_\_\_\_

10. Crimes for which you will request executive clemency if waiver is granted (use extra sheet if needed)

Crime	Date of Conviction	Sentence and Sentence Length	Date of Sentence completion (including parole and probation)
(A) MANUFACTURE/DILIVER OF COCAINE	12-3-18	6-11 IN PRISON 5 OUT CT 2 YR STAY 5 OUT	6-24-29
(B)			
(C)			

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Describe (do not just list) the crime(s) identified in Question 9. Explain the circumstances surrounding the crime(s), and why you committed the crime(s). Attach additional sheets of paper if necessary.

I WAS SELLING AND USING DRUGS AT MY HOME IN WAUKESHA.  
I HAD RECEIVED 6 YEARS IN AND 5 OUT FOR CT 1. MANUFACTURE  
DELIVERY OF COCAINE. I GOT A 7 YR STAY FOR MANUFACTURE/DELIVER  
OF COCAINE CONCURRENT TO CT 1 WITH 5 YRS PROBATION.  
I WAS DOING WHAT I WAS DOING TO SUPPORT MY ADDICTION  
TO CRACK AND TO HAVE MONEY.

2. Explain the extraordinary circumstances that you believe warrant a waiver of the Governor's eligibility rules. For example, an extraordinary circumstance could be, but is not necessarily, the fact that the conviction prohibits you from obtaining specific employment. However, the desire to hunt or possess a firearm for hunting purposes does not constitute extraordinary circumstances.

I AM A 56 YEAR OLD BLACK MAN THAT IS AT HIGH RISK  
OF CATCHING THE CORONAVIRUS

I HAVE MULTIPLE HEALTH ISSUES INCLUDING -

1. HEART DISEASE

2. LUNG DISEASE COPD

3. LUPUS

4. SLEEP APNEA

5. AND I'M MHA-29 SERIOUS MENTAL ILLNESS (DIAGNOSTIC)

6. MY SON WOULD LET ME LIVE WITH HIM. HE WOULD  
COME FROM KANSAS TO PICK ME UP.

I certify that the information in this application is true to the best of my knowledge.

Applicant signature: Samuel Harris

Date: 4-15-20

Materials voluntarily submitted by, or on behalf of, the applicant during the executive clemency application process, may be used for purposes other than consideration for executive clemency and are subject to Wisconsin's open records laws. Stat. § 15.04(1)(m).