



**BOARD OF PROFESSIONAL RESPONSIBILITY
OF THE
SUPREME COURT OF TENNESSEE**

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RELEASE OF INFORMATION
RE: JOHN E. CLEMMONS, BPR# 018354
CONTACT: ALAN D. JOHNSON
BOARD OF PROFESSIONAL RESPONSIBILITY
615-361-7500

December 19, 2013

DAVIDSON COUNTY ATTORNEY SUSPENDED

On December 19, 2013, the Tennessee Supreme Court suspended the law license of John E. Clemmons pursuant to Section 14 of Tennessee Supreme Court Rule 9. The Court suspended Mr. Clemmons' law license based upon his plea of guilty to serious crimes, i.e. Theft in an amount over \$60,000.00, Aggravated Perjury and TennCare Fraud.

The Supreme Court further ordered the Board of Professional Responsibility to institute a formal proceeding to determine the extent of final discipline to be imposed as a result of the conviction. Mr. Clemmons was ordered to fully comply with the provisions of Tennessee Supreme Court Rule 9, Section 18, which requires, in part, withdrawal from representation and prohibits undertaking any new representation.

This suspension shall remain in effect until it is dissolved or amended by order of the Supreme Court of Tennessee.

Clemmons 2275-5 rel.doc

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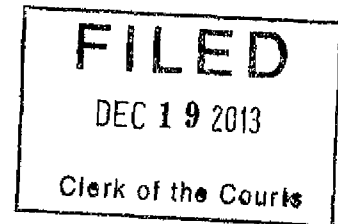
IN THE SUPREME COURT OF TENNESSEE
AT NASHVILLE

IN RE: JOHN E. CLEMMONS, BPR#018354

An Attorney Licensed in Tennessee
(Davidson County)

NO. M2013-02739-SC-BAR-BP

BOPR NO. 2013-2275-5-AJ (14)



ORDER OF ENFORCEMENT

This matter is before the Court pursuant to Tenn. Sup. Ct. R. 9, § 14, upon a certificate filed by Disciplinary Counsel for the Board of Professional Responsibility consisting of certified copies of the guilty pleas in State of Tennessee v. John E. Clemmons, Case No. F-69849 (attached as Exhibit A) filed in the Circuit Court for Rutherford County, Tennessee on November 27, 2013, and State of Tennessee v. John E. Clemmons, Case No. 2013-I-1315 (attached as Exhibit B) filed in the Criminal Court for Davidson County, Tennessee on November 15, 2013.

In State of Tennessee v. John E. Clemmons, Case No. F-69849, John E. Clemmons pled guilty to a violation of T. C. A. § 39-14-103, theft in an amount over \$60,000.00, based upon his theft of \$123,910.02 from Russell T. Church.

In State of Tennessee v. John E. Clemmons, Case No. 2013-I-1315 John E. Clemmons pled guilty to the following charges:

1. Violation of T. C. A. § 39-14-103, theft in an amount over \$60,000.00, based upon his theft of \$771,009.00 from the Estate of William C. Link;
2. Violation of T. C. A. § 39-14-103, theft in an amount over \$60,000.00, based upon his theft of \$172,506.35 from Donald E. Griggs;
3. Violation of T. C. A. § 39-14-103, theft in an amount over \$60,000.00, based upon his theft of \$370,312.24 from the Estate of Nannie P. Malone;
4. Violation of T. C. A. § 39-16-703, aggravated perjury; and
5. Violation of T. C. A. § 71-5-2601, TennCare Fraud.

On April 2, 2013, Mr. Clemmons was temporarily suspended by this Court pursuant to Tenn. Sup. Ct. R. 9, § 4.3 (Case. No. M2013-00787-SC-BPR-BP). To date, Mr. Clemmons has not requested, nor been granted reinstatement.

It is therefore, ordered, adjudged and decreed by the Court that:

1. John E. Clemmons is suspended from the practice of law on this date pending further orders of this Court, pursuant to Tenn. Sup. Ct. R. 9, § 14.

2. This matter shall be referred to the Board of Professional Responsibility for the institution of a formal proceeding in which the sole issue to be determined shall be the extent of the final discipline to be imposed as a result of the guilty plea.

3. John E. Clemmons shall fully comply with the provisions of Tenn. Sup. Ct. R. 9, § 18 concerning disbarred or suspended attorneys.

4. The Board of Professional Responsibility shall cause notice of this suspension to be published as required by Tenn. Sup. Ct. R. 9, § 18.10.

FOR THE COURT:

Cornelia A. Clark
CORNELIA A. CLARK, JUSTICE

IN THE CRIMINAL/CIRCUIT COURT FOR RUTHERFORD COUNTY, TENNESSEE

Case Number: F-59849 Count: 1 Counsel for the State: WILLIAM C. WHITESELL JR.
 Judicial District: 16th Judicial Division: 2 Counsel for the Defendant: BOB LYNCH/PAUL HUNGH
 State of Tennessee Retained Pub Def Appt Private Atty Appt
 vs. Counsel Waived Pro Se
 Defendant: JOHN B. CLEMMONS Alias: _____ Date of Birth: 9/13/47 Sex: Male
 Race: White SSN: _____ Driver License #: _____ Issuing State: _____
 State ID #: _____ County Offender ID # (if applicable): _____ TOMIS/TDOC #: _____
 Relationship to Victim: _____ Victim's Age: _____
 State Control #: _____ Arrest Date: _____ Indictment Filing Date: FILED 05/07/2013

JUDGMENT Original Amended Corrected

NOV 27 2013

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.
 On the 30 day of AUGUST, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 st <u>A</u> B C D E Indicted Offense Name <u>AND TCA §: 39-14-103 - THEFT OVER \$50,000</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>NOV 2011 - JAN 2013</u> County of Offense: <u>RUTHERFORD</u> Conviction Offense Name <u>AND TCA §: 39-14-103 - THEFT OVER \$50,000</u> Conviction: Class (circle one) 1 st <u>A</u> B C D E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: _____
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapiat 100% <input type="checkbox"/> Child Rapiat 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapiat 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> 1 st Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Consecutive to:
DAVIDSON CO.
2013-I-1315 CT. 1, 2,
3, 4, 5

Sentenced To: TDOC County Jail Workhouse
 Sentence Length: _____ Years _____ Months _____ Days _____ Hours Life Life w/out Parole Death
 Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 55-10-401 DUI 4th Offense
 or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry
 Period of Inarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours
 Minimum service prior to eligibility for work release, furlough, trusty status and rehabilitative programs: _____ % (Misdemeanor Only)
 Alternative Sentence: Sup Prob Unsup Prob Comm Corr (CHECK ONE BOX) _____ Years _____ Months _____ Days Effective: _____

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? Yes No

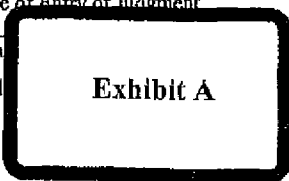
Court Ordered Fees and Fines: \$ <u>6,575.00</u> Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ <u>26.50</u> CICP \$ _____ Sex Offender Tax \$ _____ Other: _____	Restitution: Victim Name <u>RUSSELL T. CHURCH</u> Address _____ Total Amount \$ <u>123,910.02</u> Per Month \$ _____ * RESTITUTION HAS BEEN PAID IN FULL <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions
THE QUESTION OF ALTERNATIVE SENTENCING OR SUSPENSION OF SENTENCE IS RESERVED UNTIL SUCH TIME AS THE DEFENDANT IS ELIGIBLE FOR PAROLE
 Sentencing 11/27/13

JUDGE SISKIN/BRAGG
 Judge's Name: _____ Judge's Signature: _____ Date of Entry of Judgment: 11/27/13
 Counsel for State/Signature (optional): _____ Defendant/Defendant's Counsel/Signature: _____

I, _____, clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to _____ provide a signature above.
 CR-3419 (Rev. 4/1/13)



DA, CR, AOC, Jail

IN THE CRIMINAL COURT FOR DAVIDSON COUNTY, TENNESSEE

Case Number: 2013-I-1315 Count # 1 Counsel for the State: Jim Milam / Rob Mitchell
 Judicial District: 20th Judicial Division: I Counsel for the Defendant: Paul R. Hensel / Bob Lynch, Jr.
 State of Tennessee vs. Retained Pub Def Appt Private Atty Appt
 Counsel Waived Pro Se
 Defendant: John Ewing Clemmons Alias: _____ Date of Birth: _____ Sex: M and exact copy of State Criminal _____
 Race: W SSN: _____ Driver License #: _____
 State ID #: _____ County Offender ID # (if applicable): _____ TOMIS/DOC #: _____
 Relationship to Victim: conservator Victim's Age: _____
 State Control #: _____ Arrest Date: _____ Indictment Filing Date: Nov 15 2013

JUDGMENT Original Amended Corrected
 DISTRICT ATTORNEY GENERAL
 DISTRICT CLERK

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.
 On the 15 day of November, 20 13, the defendant; BY Paul R. Hensel DC

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo Contendere <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of Insanity <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 st A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name AND TCA §: <u>Theft of Property > \$60,000 39-14-103</u> Amended Offense Name AND TCA §: _____ Offense Date: <u>7/12/04 - 4/24/13</u> County of Offense: <u>Davidson</u> Conviction Offense Name AND TCA §: <u>Theft - \$60,000 or more 39-14-103</u> Conviction: Class (circle one) 1 st A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>11-15-13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Alt 1 st Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment 70% <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 st Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Concurrent with: <u>chs. 2, 4, & 5</u> Consecutive to: <u>Ch. 3</u>	From <u>11/8/13</u> to <u>present</u> From _____ to _____ From _____ to _____

Sentenced To: TDOC County Jail Workhouse OCA
 Sentence Length: 9 Years _____ Months _____ Days _____ Hours Life Life w/out Parole Death
 Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 55-10-401 DUI 4th Offense or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry
 Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours
 Minimum service prior to eligibility for work release, furlough, trusty status and rehabilitative programs: _____ % (Misdemeanor Only)
 Alternative Sentence: Sup Prob Unsup Prob Comm Corr (CHECK ONE BOX) _____ Years _____ Months _____ Days Effective: _____
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? Yes No

Court Ordered Fees and Fines: _____ Costs to be Paid by: <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	Restitution: Victim Name <u>Estate of William C. Link of Jyco Link</u> Address <u>Paul Conterek Successor Conservator</u> <u>3319 Crossman Rd, Nashville, TN 37215</u> Total Amount \$ <u>771,009</u> Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions
Total Effective Sentence 18 years to TDOC; See Agreement to settle case on Criminal Information
No agreement re Rutherford County case

Hon. Steve Dozier Steve R. Dozier 11-15-13
 Judge's Name Judge's Signature Date of Entry of Judgment
James W. Milam Defendant/Defendant's Counsel/Signature (optional)
 Counsel for State/Signature (optional)

I, _____, clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party who did not provide a signature above.



IN THE CRIMINAL JUSTICE COURT FOR DAVIDSON COUNTY, TENNESSEE

Case Number: 2013-I-1315 Count # 2 Counsel for the State: Jim Melam/Rob Mitchell
 Judicial District: 20th Judicial Division: I Counsel for the Defendant: Paul T. Houck/Rob Lynch, Jr.
 State of Tennessee vs. Retained Pub Def Appt Private Atty Appt
 Counsel Waived Pro Se
 Defendant: John Ewing Clemmons Alias: _____ Date of Birth: 9/13/47 Sex: M
 Race: W SSN: _____ Driver License #: _____ Issuing State: _____
 State ID #: _____ County Offender ID # (if applicable): _____ TOMIS/TDOC #: _____
 Relationship to Victim: Conservator Victim's Age: _____
 State Control #: _____ Arrest Date: _____ Indictment Filing Date: _____

JUDGMENT Original Amended Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 15 day of November, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo Contendere <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of Insanity <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 st A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name AND TCA §: <u>Theft of Property 1st Degree 39-14-103</u> Amended Offense Name AND TCA §: _____ Offense Date: <u>12/21/05 - 4/24/13</u> County of Offense: <u>Davidson</u> Conviction Offense Name AND TCA §: <u>Theft - Receipt of Stolen Property 39-14-103</u> Conviction: Class (circle one) 1 st A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>11-15-13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> 1 st Degree Murder <input type="checkbox"/> Mitigated 30% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Drug Free Zone <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Gang Related <input checked="" type="checkbox"/> Multiple 35% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Career 60% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Att 1 st Degree Murder w/SBI 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Agg Child Neglect/Endangerment 70% <input type="checkbox"/> Repeat Viol 100% <input type="checkbox"/> Agg Assault w/Death 75%	Ct. 1 Ct. 3	From <u>11/8/13 to present</u> From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To: TDOC County Jail Workhouse CCA Life Life w/out Parole

Sentence Length: 9 Years 0 Months 0 Days 0 Hours

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry

Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours

Minimum service prior to eligibility for work release, furlough, trusty status and rehabilitative programs: _____ % (Misdemeanor Only)

Alternative Sentence: Sup Prob Unsup Prob Comm Corr (CHECK ONE BOX) _____ Years _____ Months _____ Days Effective: _____

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? Yes No

Court Ordered Fees and Fines: \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ C/CF \$ _____ Sex Offender Tax \$ _____ Other: _____	Restitution: Victim Name <u>Donald E. Griggs</u> Address <u>% Paul Groutek Successor Conservator</u> <u>2319 Westmoor Rd., Nashville, TN 37215</u> Total Amount \$ <u>172,506.35</u> Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions
Total Effective Sentence is 18 years to TDOC

Hon. Steve Dozier
 Judge's Name Steve Dozier Judge's Signature [Signature] Date of Entry of Judgment 11-15-13
 Counsel for State/Signature (optional) _____ Defendant/Defendant's Counsel/Signature (optional) _____

I, _____, clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.
 CR-3419 (Rev. 7/1/13) RDA 1167

IN THE CRIMINAL JUSTICE COURT FOR DAVIDSON COUNTY, TENNESSEE

Case Number: 2013-I-1315 Count # 3 Counsel for the State: Jim Melan / Rob Mitchell
 Judicial District: 20th Judicial Division: I Counsel for the Defendant: Paul T. Housch / Bob Lynch, Jr.
 State of Tennessee Retained Pub Def Appt Private Atty Appt
 vs. Counsel Waived Pro Se
 Defendant: John Ewing Clemons Alias: _____ Date of Birth: 9/13/47 Sex: M
 Race: W SSN: _____ Driver License #: _____ Issuing State: _____
 State ID #: _____ County Offender ID # (if applicable): _____ TOMIS/TDOC #: _____
 Relationship to Victim: Conservator Victim's Age: _____
 State Control #: _____ Arrest Date: _____ Indictment Filing Date: _____

JUDGMENT Original Amended Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.
 On the 15 day of November, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo Contendere <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of Insanity <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 st A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name AND TCA #: <u>Theft of Property \$460,000 39-14-103</u> Amended Offense Name AND TCA #: _____ Offense Date: <u>1/29/08 - 4/24/13</u> County of Offense: <u>Davidson</u> Conviction Offense Name AND TCA #: <u>Theft - \$60,000 or more 39-14-103</u> Conviction: Class (circle one) 1 st A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>11-15-13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One) <input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	Release Eligibility (Check One) <input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100% <input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Multi 39-17-1324 100% <input type="checkbox"/> Att 1 st Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment 70% <input type="checkbox"/> Agg Assault w/Death 75% <input type="checkbox"/> 1 st Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	Concurrent with: Consecutive to: <u>et al</u>	Pretrial Jail Credit Period(s): From <u>11/8/13</u> to <u>date</u> From _____ to _____ I hereby certify that this is a true and exact copy of the original.
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Sentenced To: TDOC County Jail Workhouse CCA
 Sentence Length: 9 Years _____ Months _____ Days _____ Hours Life Life w/out Parole
 Mandatory Minimum Sentence Length: _____ 39-17-117, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Register
 Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours
 Minimum service prior to eligibility for work release, furlough, trusty status and rehabilitative programs: _____ % (Misdemeanor Only)
 Alternative Sentence: Sup Prob Unsup Prob Comm Corr (CHECK ONE BOX) _____ Years _____ Months _____ Days Effective: _____
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? Yes No

Court Ordered Fees and Fines: \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	Restitution: Victim Name <u>Estate of Naumia B. Malone; Teresa Kyle Malone</u> Address <u>Hix Rd</u> <u>Jackson, TN 37080</u> Total Amount \$ <u>370,312.24</u> Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions
Total Effective Sentence - 18 years to TDOC

Hon. Steve Dozier
 Judge's Name James W. Melan Judge's Signature [Signature] Date of Entry of Judgment 11-15-13
 Counsel for State/Signature (optional) _____ Defendant/Defendant's Counsel/Signature (optional) _____

I, _____, clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.
 CR-3419 (Rev. 7/1/13) RDA 1167

IN THE CRIMINAL JUSTICE COURT FOR DAVIDSON COUNTY, TENNESSEE

Case Number: 2013-I-1315 Count # 4 Counsel for the State: Jim Milam / Rob Mitchell
 Judicial District: 20th Judicial Division: I Counsel for the Defendant: Paul T. Hovick / Rob Lynch, Jr.
 State of Tennessee Retained Pub Def Appt Private Atty Appt
 Counsel Waived Pro Se
 vs.
 Defendant: John Ewing Clemmings Alias: _____ Date of Birth: 9/13/47 Sex: M
 Race: W SSN: _____ Driver License #: _____ Issuing State: _____
 State ID #: _____ County Offender ID # (if applicable): _____ TOMIS/TDOC #: _____
 Relationship to Victim: _____ Victim's Age: _____
 State Control #: _____ Arrest Date: _____ Indictment Filing Date: _____

JUDGMENT Original Amended Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 15 day of November, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/No Prosequi <input type="checkbox"/> Pled Nolo Contendere <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of Insanity <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 st A B C <u>(D)</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name AND TCA #: <u>Aggravated Perjury 39-16-703</u> Amended Offense Name AND TCA #: _____ Offense Date: <u>11/9/2010</u> County of Offense: <u>Davidson</u> Conviction Offense Name AND TCA #: _____ Conviction: Class (circle one) 1 st A B C <u>(D)</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>11-15-13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One) <input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	Release Eligibility (Check One) <input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> All 1 st Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment 70% <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 st Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	Concurrent with: <u>et. 1</u> Pretrial Jail Credit Period(s): From <u>11/8/13</u> to <u>date</u> From _____ to _____ Consecutive to: _____ I hereby certify that this is a true and exact copy of the original to _____
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Sentenced To: TDOC County Jail Workhouse CCA

Sentence Length: 3 Years _____ Months _____ Days _____ Hours Life Life w/Parole Death DOE 2013

Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Possession of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry or _____ 39-17-1324 Possession/Employment of Firearm or _____

Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours

Minimum service prior to eligibility for work release, furlough, trusty status and rehabilitative programs: _____ Months _____ Days _____ Hours

Alternative Sentence: Sup Prob Unsup Prob Comm Corr (CHECK ONE BOX) _____ Years _____ Months _____ Days Effective: _____

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? Yes No

Court Ordered Fees and Fines: \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	Restitution: Victim Name <u>Davidson County Probate Court Clerk</u> Address _____ Total Amount \$ <u>N/A</u> Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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- The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.
- Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.
- Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.
- Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions

* Sentence is to TDOC b/c concurrent with et. 1; Effective Sentence - 18 years to TDOC

Hon. Steve Dozier

Judge's Name

Jim Milam
Counsel for State/Signature (optional)

Judge's Signature

Paul T. Hovick
Defendant/Defendant's Counsel/Signature (optional)

Date of Entry of Judgment

11-15-13

I, _____, clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

IN THE CRIMINAL JUSTICE COURT FOR DAVIDSON COUNTY, TENNESSEE

Case Number: 2013-I-1315 Count # 5 Counsel for the State: Jim Milam / Rob Mitchell
 Judicial District: 20th Judicial Division: I Counsel for the Defendant: Paul T. Howsley / Rob Lynch, Jr.
 State of Tennessee
 vs.
 Defendant: John Ewing Clemens Alias: _____ Date of Birth: 9/13/47 Sex: M
 Race: W SSN: _____ Driver License #: _____ Issuing State: _____
 State ID #: _____ County Offender ID # (if applicable): _____ TOMIS/DOC #: _____
 Relationship to Victim: _____ Victim's Age: _____
 State Control #: _____ Arrest Date: _____ Indictment Filing Date: _____

JUDGMENT Original Amended Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.
 On the 15 day of November, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Pled Nolo Contendere <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of Insanity <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 st A B <input checked="" type="radio"/> D E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name AND TCA #: <u>Tenn Care Fraud 71-5-2601</u> Amended Offense Name AND TCA #: _____ Offense Date: <u>9/11/11-10/25/12</u> County of Offense: <u>Davidson</u> Conviction Offense Name AND TCA #: <u>Tenn Care Fraud 71-5-2601</u> Conviction: Class (circle one) 1 st A B <input checked="" type="radio"/> D E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>11-15-13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> All 1 st Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment 70% <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 st Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
Concurrent with: <u>Ch. 1</u>		Pretrial Jail Credit Period(s): From <u>11/8/12</u> to <u>date</u>	

Sentenced To: TDOC County Jail Workhouse CCA
 Sentence Length: 3 Years _____ Months _____ Days _____ Hours Life Life w/out Parole Death
 Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 39-17-401, DWI Offense or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry
 Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours
 Minimum service prior to eligibility for work release, furlough, trusty status and rehabilitative programs: _____ % (Misdemeanor Only)
 Alternative Sentence: Sup Prob Unsup Prob Comm Corr (CHECK ONE BOX) _____ Years _____ Months _____ Days Effective: _____
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? Yes No

Court Ordered Fees and Fines: Costs to be Paid by \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	Restitution: Victim Name <u>State of TN, Tenn Care Bureau</u> Address <u>4700 Medical Fraud Unit</u> <u>901 R.S. Cross Blvd., Nashville, TN 37216</u> Total Amount \$ <u>TAD</u> Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions
X Sentence is to TDOC w/ Concurrent w/ Ch. 1; Total Effective Sentence is 18 yrs RTDOC

Hon. Steve Dozier
 Judge's Name Steve Dozier Judge's Signature [Signature] Date of Entry of Judgment 11-15-13
 Counsel for State/Signature (optional) _____ Defendant/Defendant's Counsel/Signature (optional) _____

I _____, clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.
 CR-3419 (Rev. 7/1/13) RDA 1167