CENTER for JUDICIAL ACCOUNTABILITY, INC.

(914) 421-1200 • Fax (914) 684-6554 F-Mail: probono@delphi.com

Box 69, Gedney Station White Plains, New York 10605

By Fax: 212-949-8864

By Certified Mail: RRR P-801-449-640

March 20, 1995

State of New York Commission on Judicial Conduct 801 Second Avenue, 17th Floor New York, New York 10017

ATT: Gerald Stern, Administrator

RE: Information Request

Dear Mr. Stern:

Pursuant to 22 NYCRR §7001 et seq., as well as the Freedom of Information Law, request is hereby made for all information regarding promulgation of 22 NYCRR §7000 et seq., including any rule-making history relative thereto.

Request is also made for the captions and index numbers of any actions, state or federal, wherein the Commission on Judicial Conduct has been sued by reason of its failure to investigate and/or prosecute complaints of judicial misconduct filed by members of the public. We hereby further request that prompt access be afforded to the legal files of such actions for the purposes of inspection and copying.

Yours for a quality judiciary,

ELENA RUTH SASSOWER, Coordinator Center for Judicial Accountability, Inc.

Elena Rux Bassares

cc: Jack Newfield, New York Post Eric Hanan, Inside Edition

TIME: 03/20/1995 03:28 NAME: FAX: 9146846554 TEL:

DATE, TIME FAX NO./NAME' DURATION PAGE(S) RESULT MODE

03/20 03:28 12129498864 00:00:40 01 OK STANDARD

P 801 449 RECEIPT FOR CERTIF NO INSURANCE COVERAGE PR NOT FOR INTERNATIONAL-I (See Reverse)	IED MAIL
Sent to COMM ISSUE Street and No. Stock O FO., State and ZIP Code	Ave
Postage / Co	32
Certified Fee	110
Special Delivery Fee	Y
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	10
Return Receipt shows a whom. Date, and Address of Deliv	
Return Receipt show on a hom. Date, and Address of Delivery TOTAL Postage and Page 1998. Postmark of Date 1998.	150
(800)	

SENDER: Complete items 1 and/or 2 for additional service Complete items 3, and 4a & b. Complete items 3, and 4a & b. Print your rame and address on the reverse of the point your rame and address on the reverse of the point you rame and address on the mailpiece, or on the back if space on the form to the front of the mailpiece below the article number to the form the article number to the mailpiece below the article number to the delivered to the date to the delivered to the date to the form the article number to the mailpiece below the article number to the mailpiece below the article number to the delivered to the date to the delivered to the number to the mailpiece below the article number to the delivered to the date to the delivered to the delivered to the number to the mailpiece to the delivered to the date to the delivered to the delivered to the delivered to the number to the mailpiece. The Return Receipt for the the date to the date to the delivered and the date to the delivered to the delivered to the number to the mailpiece to the delivered	Straver Side?
Thank you for using Return Receipt Service:	Complete items 1 and/or 2 for additional service Complete items 3, and 4a & b. Complete items and address on the reverse of Print your name and address of the mailpiece, or on the back if significant in the mailpiece, or on the back if significant items and the mailpiece below the article write "Return Receipt will show to whom the article was delivered and the Return Receipt will show to whom the article was delivered and colored in the Return Receipt will show to whom the article was delivered and colored in the Return Receipt will show to whom the article was delivered and colored in the reverse of the article was delivered and the reverse of the article was delivered and the reverse of the article was delivered and the reverse of the reverse
	Thank you for using neturn nosely