



SCHOOL OF LAW
THE UNIVERSITY OF TEXAS AT AUSTIN

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June 29, 2022

The Honorable Greg Abbott
Governor of Texas
c/o Office of the General Counsel
1100 San Jacinto Street, Suite 412
Austin, Texas 78701

Re: Request for 30-day reprieve for Ramiro Felix Gonzales,
scheduled to be executed on July 13, 2022

Dear Governor Abbott:

We write to respectfully request a 30-day reprieve for Ramiro Felix Gonzales, who is scheduled to be executed on July 13, 2022, so that Mr. Gonzales may donate a kidney to someone awaiting this lifesaving procedure.

Over the past year and a half, in keeping with his efforts to atone for his crimes, Ramiro has actively sought to be considered as an *in vivo* (living) donor of a kidney to someone who is in urgent need of a kidney transplant. The idea originated through correspondence between Ramiro and Cantor Michael Zoosman, an ordained Jewish clergyman in Maryland, with whom Ramiro has corresponded about spiritual matters. In January 2021, Cantor Zoosman first reached out to Ramiro, who was then one of several inmates scheduled for execution. As Cantor Zoosman has explained in a letter submitted as an exhibit to Ramiro's clemency application:

Ramiro was the first person in Texas with whom I corresponded, and [he] has since been a faithful correspondent. He has sent me dozens of letters since January of last year.... It has been very clear to me from his first letter that Ramiro is a person of profound faith in his Messianic Christian tradition. He has

expressed sincere repentance for the life he took and has spoken with me with great interest of Jewish ideas about repentance and forgiveness. Upon his request, I have sent him religious materials and books on spiritual matters.

Early in our correspondence, it happened that a member of my home congregation – Adat Shalom Reconstructionist Synagogue in Bethesda, [Maryland] – informed us of her need for a kidney donor. I put the word out far and wide on email and social media, but there was no one who responded. When I mentioned this to Ramiro, he immediately and unequivocally indicated his hope of being able to do this. In his letters to me, he expressed his desire to be able to give life before his life is taken. It is my impression that his wish to do this has been out of his hope of saving a life after he has taken another. He knew that his altruistic action would not stop his execution. He only wanted the chance to help another human being in need. When this specific opportunity to donate to a member of our congregation was no longer available, Ramiro eagerly explored how he might be able to donate a kidney to another in need before his execution.

Letter of Cantor Michael Zoosman, attached as Appendix A.

Earlier this year, the Texas Department of Criminal Justice (“TDCJ”) permitted Ramiro to be evaluated as a potential kidney donor by the transplant team at the University of Texas Medical Branch Galveston (“UTMB”), and he was determined to be an “excellent candidate” for donation. At the same time, it was determined that Ramiro has a rare B blood type, meaning he is not a match for the person who was initially identified as a potential recipient. While Ramiro was disappointed by this setback, he remained keenly interested in donating a kidney to *anyone* in need with whom he is a medical match. In fact, precisely because Ramiro has a rare blood type, he may be able to provide a lifesaving organ donation to someone whose own rare blood type makes it particularly difficult to find a match.¹

¹ The average wait time for a person on the waiting list for kidney donation is three to five years. See Organ Donation and Transplantation Stats, attached as Appendix B (available at <https://www.kidney.org/news/newsroom/factsheets/Organ-Donation-and-Transplantation-Stats>). Our understanding is that the wait time is even longer – as much as 10 years – for

Since then, Ramiro has sought to be permitted to make an “altruistic donation” of a kidney to *any* person with whom he is a match. However, TDCJ has objected to these efforts because of the impending execution date.

The screening process for kidney donation is a substantial undertaking,² but it has been almost entirely completed in this case. Virtually all that remains is the surgery to remove Ramiro’s kidney. UTMB has confirmed that the procedure could be completed within a month.

The Texas Constitution empowers the Governor to grant a 30-day reprieve of a scheduled execution. We implore you to exercise this power in order to save a life, and to allow Ramiro to atone for the life he has taken.

We are grateful for your consideration of this request and stand ready to answer any questions or provide any additional information you or your staff may require in making this important decision.

Respectfully submitted,



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Raoul Schonemann
Counsel for Ramiro Felix Gonzales

someone with Ramiro’s blood type. Approximately 13 people die every day while awaiting a donor match. *Id.*

² See “Living Donor Evaluation,” National Kidney Foundation, attached as Appendix C (available at <https://www.kidney.org/transplantation/livingdonors/evaluation>).

APPENDIX A

Letter of Cantor Michael Zoosman

To:

Mr. Raoul Schonemann
Clinical Professor
Capital Punishment Clinic
University of Texas School of Law
727 East Dean Keeton Street
Austin, Texas 78705
(512) 232-9391 office
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rschonemann@law.utexas.edu

From:

Cantor Michael Zoosman,
Board Certified Chaplain (NAJC)
(Pronouns: he, him, his)
cantormikezoos@gmail.com

Founder:

"L'chaim! Jews Against the Death Penalty"
<https://www.facebook.com/groups/996205437512710/?ref=share>

Advisory Board Member:

Death Penalty Action
<http://deathpenaltyaction.org/jewish-action>

RE: Spiritual Support for Execution Reprieve for Mr. Ramiro Gonzales

Shalom Mr. Schonemann,

My name is Cantor Michael Zoosman, and I write this message of wholehearted support for the petition for reprieve of my longtime pen pal Mr. Ramiro Gonzales.

A few words about me. I am ordained Jewish clergy (The Jewish Theological Seminary of New York, '08), a former Prison Chaplain, and a current multifaith federal hospital chaplain. I am a member in good standing of Neshama: Association of Jewish Chaplains. I also am a third-generation Holocaust survivor and the founder of "L'chaim! Jews Against the Death Penalty," a group that opposes state killing by any means, including via lethal injection, as first implemented by the Nazis as part of the Aktion T4 protocol.

I write letters and emails to anyone in our nation faced with imminent execution. Some respond - many do not. Ramiro responded eagerly to my first email to him on January 24, 2021 after I learned of his execution date in April of that year, which was set to take place on Hitler's birthday.

Ramiro was the first person in Texas with whom I corresponded, and has since been a faithful correspondent. He has sent me dozens of letters since January of last year, and I have responded to each via JPay. It has been very clear to me from his first letter that

Ramiro is a person of profound faith in his Messianic Christian tradition. He has expressed sincere repentance for the life he took and has spoken with me with great interest of Jewish ideas about repentance and forgiveness. Upon his request, I have sent him religious materials and books on spiritual matters.

Early in our correspondence, it happened that a member of my home congregation - Adat Shalom Reconstructionist Synagogue in Bethesda, MD - informed us of her need for a kidney donor. I put the word out far and wide on email and social media, but there was no one who responded. When I mentioned this to Ramiro, he immediately and unequivocally indicated his hope of being able to do this. In his letters to me, he expressed his desire to be able to give life before his life is taken. It is my impression that his wish to do this has been out of his hope of saving a life after he has taken another. He knew that his altruistic action would not stop his execution. He only wanted the chance to help another human being in need. When this specific opportunity to donate to a member of our congregation was no longer available, Ramiro eagerly explored how he might be able to donate a kidney to another in need before his execution.

I have known many convicted criminals in my time, both the innocent and - like Ramiro - the guilty. Some to be sure would attempt a maneuver like this to try to beat the executioner's sword. Nothing in this would convince me that this is the case with Ramiro. There has been no doubt in my mind that Ramiro's desire to be an altruistic kidney donor is not motivated by a last-minute attempt to stop or delay his execution. I will go to my grave believing in my heart that this is something that Ramiro wants to do to help make his soul right with his G-d.

For this reason, I respectfully and sincerely submit this letter of support for a reprieve of Ramiro's execution for however much time is necessary to allow him to be an altruistic kidney donor - before Texas takes his life.

Thank you for your time and consideration, and please feel free to contact me at this email or by phone at 860-830-0114 with any questions or concerns.

L'shalom uL'chaim - For Peace and For Life,

Cantor/Chaplain Michael Zoosman

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"With every cell of my being and with every fiber of my memory I oppose the death penalty in all forms. I do not believe any civilized society should be at the service of death. I don't think it's human to become an agent of the angel of death."

- Holocaust Survivor and Nobel Laureate Elie Wiesel (1928-2016)

"Whoever destroys a life, it is considered as if he destroyed an entire world. And whoever saves a life, it is considered as if he saved an entire world." - The Talmud (Jewish Oral Law) Sanhendrin 4:5)

APPENDIX B

Organ Donation & Transplantation Statistics

Organ Donation and Transplantation Statistics

- There are currently 121,678 people waiting for lifesaving organ transplants in the U.S. Of these, 100,791 await kidney transplants. (as of 1/11/16) ¹
- The median wait time for an individual's first kidney transplant is 3.6 years and can vary depending on health, compatibility and availability of organs. ²
- In 2014, 17,107 kidney transplants took place in the US. Of these, 11,570 came from deceased donors and 5,537 came from living donors. ¹

On average:

- Over **3,000** new patients are added to the kidney waiting list each month. ¹
- **13** people die each day while waiting for a life-saving kidney transplant. ¹
- Every **14** minutes someone is added to the kidney transplant list. ¹
- In 2014, **4,761** patients died while waiting for a kidney transplant. Another, **3,668** people became too sick to receive a kidney transplant. ¹

2014 Donor Profile¹

	Living	Deceased
Age	All living donors in the United States must be at least 18 years old to consent to donation. There were 5,538 living donors in 2014.	The total number of deceased donors (7,761) does not add up to the total number of deceased donor transplants because many deceased donors are able to give both of their kidneys.
	<1: 0	
	1-5: 0	<1: 100
	6-10: 0	1-5: 212
	11-17: 0	6-10: 103
	18-34: 1,627	11-17: 387
	35-49: 2,258	18-34: 2,328
	50-64: 1,492	35-49: 2,099
	65+: 161	50-64: 2,110

65+: 422

Gender	Male: 2,052	Male: 4,647
	Female: 3,486	Female: 3,114
Ethnicity	White/Caucasian: 3,895	White/Caucasian: 5,266
	Black: 592	Black: 1,101
	Hispanic: 762	Hispanic: 1,033
	Asian: 221	Asian: 196
	American Indian/Alaska Native: 19	American Indian/Alaska Native: 46
	Pacific Islander: 10	Pacific Islander: 28
	Multiracial: 39	Multiracial: 91
Column 1: Relationship to Recipient	Parent to Child: 453	Anoxia: 2,541
	Child to Parent: 772	Cerebro Vascular/Stroke: 2,419
Column 2: Deceased Donor Cause of Death	Identical Twin: 7	Head Trauma: 2,560
	Full Sibling: 1,071	CNS Tumor: 31
	Half Sibling: 54	Other: 210
	Other Relative: 336	
	Spouse or Life Partner: 700	
	Unrelated Paired Donation: 544	
	Unrelated Anonymous Donor: 181	
	Friends or Other Unrelated Non-Anonymous Donor: 1,278	

2014 Kidney Transplant Recipient Profile¹

	Received Kidney from Living Donor	Received Kidney from Deceased Donor
Age	<1: 0	<1: 0
	1-5: 63	1-5: 88
	6-10: 52	6-10: 75
	11-17: 127	11-17: 307

	18-34: 1,035	18-34: 1,033
	35-49: 1,590	35-49: 2,772
	50-64: 1,913	50-64: 4,732
	65+: 753	65+: 2,562
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Gender	Male: 3,464	Male: 7,068
	Female: 2,071	Female: 4,502
<hr/>		
Ethnicity	White/Caucasian: 3,705	White/Caucasian: 4,907
	Black: 702	Black: 3,614
	Hispanic: 776	Hispanic: 1,962
	Asian: 283	Asian: 814
	American Indian/Alaska Native: 22	American Indian/Alaska Native: 140
	Pacific Islander: 12	Pacific Islander: 59
	Multiracial: 35	Multiracial: 74
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Becoming a Donor

- [10 Frequently Asked Questions About Organ Donation.](#)
- [Find out how to become a living kidney donor.](#)
- Acceptable organ donors can range in age from newborns to 65 years or more.
- Donor organs are matched to waiting recipients by a national computer registry called the National Organ Procurement and Transplantation Network (OPTN). This computer registry is operated by an organization known as the United Network for Organ Sharing (UNOS), which is located in Richmond, Virginia.
- To identify yourself as an organ donor, visit the Donate Life America website at www.donatelife.net and choose your state of residence to learn about the options in your area, which might include:
 - Joining your state's online registry for donation, if one is available.
 - Declaring your intentions on your driver's license.
 - Signing a donor card.
- Signing a donor card, registry or driver's license is a good first step in designating your wishes about donation, but letting your family or other loved one's know about your decision is vitally important. That's because family members are often asked to give consent for a loved one's donation, so it's important that they know your wishes.

CITATIONS

1. <http://optn.transplant.hrsa.gov/>
2. http://www.usrds.org/2015/view/v2_07.aspx

Facts and statistics provided by the [United States Renal Data System](#), [UNOS](#), and the [U.S. Department of Health & Human Services Organ Procurement and Transplantation Network \(OPTN\)](#) and Scientific Registry of Transplant Recipients (SRTR) Annual Report.

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APPENDIX C

Living Donor Evaluation



National **Kidney** Foundation®

Living Donor Evaluation

The evaluation process is meant to protect you. It ensures that you are healthy enough to donate a kidney. While there are inherent risks of living donation and with any surgery, the rigorous evaluation process provides a systematic way of determining any specific, known risks to you.

You will meet with **multiple members of the living donor evaluation team**. This team is specially assigned to you, the potential living donor. All members of your team will have no interaction with the potential recipient. This is done on purpose to ensure that there are no conflicts of interest and that the evaluation is done in your best interests and without bias. There will be many opportunities and ample time to ask questions and address any concerns you may have. A living donor advocate will be an important member of your healthcare team who you can feel free to discuss any concerns or hesitations you may have. All conversations between the living donor and the transplant team and the results of medical testing will be kept confidential.

If at any point in the evaluation process you decide that you do not want to donate your kidney, your living donor transplant team can help you decline in a way that preserves the family relationships.

How do I start the process to see if I can donate a kidney?

If you have two healthy kidneys, you may be able to donate one to save someone's life. Visit the **How to Donate** page to learn more.

What will happen after I'm connected with a transplant center?

After you are connected with a transplant center, they will begin a basic medical screening. They will ask you questions about your medical history to find out if you have any conditions that would prevent you from donating. You may be sent a health questionnaire to fill out. This initial screening is followed by a blood test to find out whether you are compatible with the recipient.

You will also be assigned an Independent Living Donor Advocate (ILDA), who will assist you during the donation process. This person's sole job is to look after your best interest. They will answer your questions and help you get information. They will also make sure you understand the possible risks and benefits of donation, and any impact it may have on your emotional life, finances, family, future employment, and health. Everything that is discussed between you and the ILDA is kept private and confidential.

If you are interested in donating a kidney, you will start a full evaluation process.

What does a “full evaluation” involve?

You must complete a financial consultation, a psychological evaluation, and extensive medical tests. The results will be kept completely confidential. They will not be shared with the recipient.

Financial consultation

Staff at your transplant center will ask about your finances and insurance coverage. In general, if you are donating to a family member or friend, the recipient's insurance will pay your expenses for testing and surgery. However, you may be responsible for travel expenses, lost wages, and some follow-up care. If any health problems that require treatment are discovered during your medical tests, you or your health insurance will be responsible for them.

Psychological evaluation

The transplant team makes sure that each donor is in good mental health and understands the donation process. They will educate you about all aspects of living donation and make sure you are able to make an informed decision. One reason this is done is to make sure there is no pressure from friends or family, no promise of financial incentive, and that your expectations are realistic. This is also an opportunity for you to express yourself more fully than you might be able to with family or the recipient present.

Medical Tests

- **Medical history.** You will be asked to give a complete and thorough history of any illnesses, surgeries, and treatments you've had in the past. You will also be asked about your family's medical history. If any problems or abnormalities are found, they will be investigated further.
- **Physical exam.** You will be given a physical examination to make sure you are healthy enough to donate a kidney.
- **Chest X-ray and electrocardiogram (EKG).** These tests are done to check for heart or lung disease.
- **Radiological testing.** These tests allow physicians to look at your kidney, including its blood vessel supply.
- **Urine testing.** A 24-hour urine sample is collected to make sure you have good kidney function. If it is found that your kidney function is low, they will most likely advise against donation.
- **Gynecological examination.** Female donors may need to have a gynecological exam and mammography.
- **Cancer screening.** You may also be given some cancer screening tests, which may include a colonoscopy, prostate exam, and skin cancer screening.

Compatibility Tests

A blood sample will be taken to check for compatibility between you and the recipient. This includes: Blood typing. Your blood type will be checked to see if it is compatible with the recipient.

- **Tissue typing.** This blood test checks the tissue match between your white blood cells and the recipient's white blood cells.
- **Crossmatching.** In this test, blood cells from the donor and recipient are mixed. If the recipient's cells attack and destroy the donor cells, the crossmatch is

positive. A “positive” crossmatch means that your organ will not match the recipient’s. A “negative” crossmatch means that your organ is compatible with the recipient’s.

Other Blood Tests

Additional blood tests are done to check for any viral activity or transmissible diseases (like HIV/AIDS, hepatitis, cancer, or others), glucose intolerance, electrolyte balance, and to assess your kidney function.

Learn more detailed information on the [Testing Involved in the Living Donor Evaluation Process](#) page.

What if my kidney is not compatible with my intended recipient?

You may consider a “[paired exchange](#).” A paired exchange involves two pairs of living donors and their recipients. The two recipients “swap” donors so that each receives a kidney from a compatible donor. If this is an option for you, your transplant team will coordinate the entire process, including finding the matching pair.

How long does the evaluation process take?

The length of time it takes to complete the evaluation process is different for each person. It will depend on your availability for testing, the results of your tests, and the individual policies and procedures of the transplant center involved. If the recipient’s transplant center is far away, you may be able to complete some tests at a hospital or lab near your home.

What happens after the evaluation is complete?

Your test results will be sent to the transplant team, who will review them carefully. They will make a decision about your physical health and suitability as a donor. If you are a suitable candidate for living donation, and you decide to go ahead with it, an operation will be scheduled. The final decision to proceed will be a group decision among you, your recipient, and the transplant team.

**A CONVERSATION CAN SAVE A
LIFE.**



[Learn more](#)

Kidney Donation



If you have two healthy kidneys, you may be able to donate one to improve or even save someone else's life. Ready to take the first step?

[How to Donate](#)

Need help getting the conversation started?

Call our hotline

1.855.653.2273

Or email us at

nkfcares@kidney.org

[About NKF Cares](#)