Ohio Attorney General's Office
Bureau of Criminal Investigation
Investigative Report

2019-3029
Officer-Involved Critical Incident - Richland County Jail

Investigative Activity: Information Provided/Obtained

Involves: [redacted] (O)

Date of Activity: 11/27/2019

Activity Location: [redacted] - Business - 597 Park Ave E, Mansfield, OH 44905, Richland County

Author: SA Eric Lehnhart, #84

Narrative:

On Wednesday, November 27, 2019, Ohio Bureau of Criminal Investigation (BCI) Special Agent Eric Lehnhart received the personnel file for Corrections Officer [redacted] from Stephanie L. Schoolcraft of Fishel, Downey, Albrecht, and Riepenhoff, LLP's. Special Agent Eric Lehnhart reviewed the personnel file and noted the following:

The provided personnel file of Corrections Officer [redacted] contained 181 total pages.

Performance Evaluations

The Richland County Sheriff's Office's employee performance evaluation assigns points to the employee as follows; Above +2, Meets +1, and Does not meet +0. Throughout all of [redacted]s evaluations, he has received the rating of 'Above +2' and 'Meets +1.

Discipline

[redacted] has several documented instruction and cautioning reports and one (1) written reprimand.

The personnel file was attached to this report. Please refer to the attachment for further details.

Attachments:

Attachment # 01:2019-11-27 B. [redacted] Redacted from RCSO

This document is the property of the Ohio Bureau of Criminal Investigation and is confidential in nature. Neither the document nor its contents are to be disseminated outside your agency.

Gmail by Google

Spicer, Erika <e.spicer@richlandcountyoh.us>

change of address

1 message

[redacted]@richlandcountyoh.us> Tue, Apr 30, 2019 at 3:35 AM
To: Erika Spicer <e.spicer@richlandcountyoh.us>, [redacted]@richlandcountyoh.us>
[redacted]

Thank you
B Prendergast

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD CHANGE DELETE

Name [redacted]

A

City, State, Z

Tel

Bi

Social Security Number

Marital Status:

Sex

Race

Title

Department Number

Munis Org

Business Phone Number

Start Date

Rehire Date

Termination Date

Reason for Termination

Employee# [redacted]

Has this person ever been employed by Richland County in the past? Yes or No

Class #	
Account #	
Object#	

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status

Annual Salary

Salary/pay

Rate/hour

Alt Rate/hour

Longevity Payment

Annual Hours

Shift

Full/Part

STRS

PERS

Direct Dep. Route #

Direct Dep. Account #

NEW ADDRESS

Signature

5-29-15

Date

Comments

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD CHANGE DELETE

Name [redacted]

Employee# [redacted]

Ci [redacted]

Has this person ever been employed by Richland County in the past? Yes or No

Birthdate	
Social Security Number	
Marital Status:	
Sex	
Race	
Title	
Department Number	
Munis Org	
Business Phone Number	
Start Date	
Rehire Date	
Termination Date	
Reason for Termination	

Class #	
Account #	
Object#	

Salary/pay	
Rate/hour	
Alt Rate/hour	
Longevity Payment	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status	
Annual Salary	

NEW ADDRESS

Signature

5-29-15

Date

Comments

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

Name: [redacted]

Review Period: 10-4-18 to 4-4-19

Unit #: [redacted]

Review Deadline Date: 3-26-19

Rater Name: Sgt. Fellure

Bi-Annual Review

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 (✓) Meets +1 Does Not Meet + 0

   Explain: [redacted] is quick to identify any potential security issues to supervisors and fellow officers

2. Consistently completes required security rounds and documents as appropriate.

   Above + 2 Meets + 1 (✓) Does Not Meet + 0

   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 Meets + 1 (✓) Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

   [redacted] is Always Professional

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

   [redacted] Always communicates Facility Rules and Policies to Inmates

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain: [redacted] is Quick To complete Any special Assignment given To him

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    Above + 2 Meets + 1 Does Not Meet + 0

    Explain: [redacted] is Always Respectful and Professional

Any additional comments pertaining to GOAL Three (7-10):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

OVERALL EVALUATION

Total Points: 15

Rater: SGT. Fellure Date: 3-27-19
Comments: [redacted] is A good officer And has calmed down significantly when dealing with stressful situations.

Lieutenant: [redacted] Date: 4-22-19
Comments:

Staff Lieutenant: Date: 4-24
Comments:

Jail Administrator: Date: 4/1/19
Comments:

Chief Deputy: Date: 4/5/19
Comments:

Sheriff: Date: 4/07/19
Comments:

Employee Signature: [redacted] Date: 4-21-19
Comments:

I have read the above rating and choose to respond to this rating.

[redacted] I have read the above rating and choose **NOT** to respond under comments.

I am requesting to have a meeting with the Jail Administrator to discuss this evaluation.

My signature may not indicate agreement with the ratings.

RCSO 1001-A
2/6/13

2019 back pay	OLD REG	NEW REG	**OWED**	OLD OT	NEW OT	**OWED**	OLD HOLID	NEW HOLII	**OWED**	OLD VAC	NEW VAC	**OWED**
[redacted]	22.30	22.77		33.45	34.16		22.30	22.77			21.97	
1/18/2019	$1,784.00	$1,821.60	**$37.60**	$267.60	$273.28	**$5.68**	713.6	728.64	**$15.04**			**$0.00**
2/1/2019	$1,784.00	$1,821.60	**$37.60**	$535.20	$546.56	**$11.36**	267.6	273.24	**$5.64**			**$0.00**
2/15/2019	$1,784.00	$1,821.60	**$37.60**			**$0.00**			**$0.00**			**$0.00**
3/1/2019	$1,784.00	$1,821.60	**$37.60**			**$0.00**			**$0.00**			**$0.00**
3/15/2019	$1,784.00	$1,821.60	**$37.60**	$133.80	$136.64	**$2.84**			**$0.00**			**$0.00**
3/29/2019	$1,784.00	$1,821.60	**$37.60**			**$0.00**			**$0.00**			**$0.00**
			$225.60			$19.88			**$20.68**			**$0.00**

TOTAL OWED **$266.16**

BY EMPLOYEE NAME
01/18/2019 to 04/12/2019

[redacted]

LOC: 254 ORG: PAYROLL

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED TYPE	EMPLOYEE	EMPLOYER
CHECK DATE: 01/18/2019											
27525500	510200		254	2030	000127909	216 OT BLD	8.00	267.60			
27525500	510200		254	2030	000127909	552 HS	12.00	267.60			
27525500	510200		254	2030	000127909	552 HS	10.00	223.00			
27525500	510200		254	2030	000127909	552 HS	10.00	223.00			
27525500	510200		254	2030	000127909	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000127909	887 SB .80	8.00	178.40			
			254		000127909						
			254		000127909						
			254		000127909						
			254		000127909						
			254		000127909						
			254		000127909						
			254		000127909						
			254		000127909						
27525500	533530		254		000127909						
27525500	536300		254		000127909						
27525500	536400		254		000127909						
27525500	536500		254		000127909						
CHECK 01/18/2019 TOTALS:			NET:		1,808.16		128.00	2,765.20			
CHECK DATE: 02/01/2019											
27525500	510200		254	2030	000128947	216 OT BLD	8.00	267.60			
27525500	510200		254	2030	000128947	216 OT BLD	8.00	267.60			
27525500	510200		254	2030	000128947	552 HS	12.00	267.60			
27525500	510200		254	2030	000128947	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000128947	887 SB .80	8.00	178.40			
			254		000128947						
			254		000128947						
			254		000128947						
			254		000128947						

[redacted]

[redacted]

BY EMPLOYEE NAME
01/18/2019 to 04/12/2019

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED TYPE	EMPLOYEE	EMPLOYER
[redacted]									[redacted]		
			254		000128947						
			254		000128947						
			254		000128947						
			254		000128947						
27525500	533530		254		000128947						
27525500	536300		254		000128947						
27525500	536400		254		000128947						
27525500	536500		254		000128947						
CHECK 02/01/2019 TOTALS:			NET:		1,695.13		116.00	2,586.80			
CHECK DATE: 02/15/2019											
27525500	510200		254	2030	000129980	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000129980	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000129980	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000129980	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000129980	887 SB .80	8.00	178.40	[redacted]		
			254		000129980						
			254		000129980						
			254		000129980						
			254		000129980						
			254		000129980						
			254		000129980						
			254		000129980						
			254		000129980						
			254		000129980						
27525500	533530		254		000129980						
27525500	536300		254		000129980						
27525500	536400		254		000129980						
27525500	536500		254		000129980						
CHECK 02/15/2019 TOTALS:			NET:		1,160.18		88.00	1,784.00			
CHECK DATE: 03/01/2019											
27525500	510200		254	2030	000131019	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000131019	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000131019	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000131019	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000131019	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000131019	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000131019	567 COMPSH	8.00	178.40			
27525500	510200		254	2030	000131019	567 COMPSH	8.00	178.40			
27525500	510200		254	2030	000131019	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000131019	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000131019	887 SB .80	8.00	178.40	[redacted]		
			254		000131019						
			254		000131019						

BY EMPLOYEE NAME
01/18/2019 to 04/12/2019

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED TYPE	EMPLOYEE	EMPLOYER
[redacted]									[redacted]		
			254		000131019						
			254		000131019						
			254		000131019						
			254		000131019						
			254		000131019						
			254		000131019						
			254		000131019						
27525500	533530		254		000131019						
27525500	536300		254		000131019						
27525500	536400		254		000131019						
27525500	536500		254		000131019						
CHECK 03/01/2019 TOTALS:			NET:		1,160.19		88.00	1,784.00			
CHECK DATE: 03/15/2019											
27525500	510200		254	2030	000132062	216 OT BLD	4.00	133.80			
27525500	510200		254	2030	000132062	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000132062	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000132062	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000132062	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000132062	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000132062	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000132062	456 BRV SH	8.00	178.40			
27525500	510200		254	2030	000132062	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000132062	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000132062	887 SB .80	8.00	178.40			
			254		000132062				[redacted]		
			254		000132062						
			254		000132062						
			254		000132062						
			254		000132062						
			254		000132062						
			254		000132062						
			254		000132062						
			254		000132062						
27525500	533530		254		000132062						
27525500	536300		254		000132062						
27525500	536400		254		000132062						
27525500	536500		254		000132062						
CHECK 03/15/2019 TOTALS:			NET:		1,257.58		84.00	1,917.80			
CHECK DATE: 03/29/2019											
27525500	510200		254	2030	000133107	405 SICKSD	8.00	178.40			
27525500	510200		254	2030	000133107	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000133107	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000133107	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000133107	567 COMPSH	1.00	22.30			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000133107	887 SB .80	7.00	156.10			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			

BY EMPLOYEE NAME
01/18/2019 to 04/12/2019

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED TYPE	EMPLOYEE	EMPLOYER
[redacted]										LOC: 254	ORG: PAYROLL
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40			
27525500	510200		254	2030	000133107	887 SB .80	8.00	178.40	[redacted]		
			254		000133107						
			254		000133107						
			254		000133107						
			254		000133107						
			254		000133107						
			254		000133107						
27525500	536300		254		000133107						
27525500	536400		254		000133107						
CHECK 03/29/2019 TOTALS:			NET:		1,270.89		104.00	1,784.00			
CHECK DATE: 04/12/2019											
27525500	510200		254	2030	000134155	405 SICKSD	8.00	182.16			
27525500	510200		254	2030	000134155	481 IJ SH	8.00	182.16			
27525500	510200		254	2030	000134155	561 CTEA	8.00	0.00			
27525500	510200		254	2030	000134155	561 CTEA	2.50	0.00			
27525500	510200		254	2030	000134155	561 CTEA	3.00	0.00			
27525500	510200		254	2030	000134155	567 COMPSH	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16			
27525500	510200		254	2030	000134155	887 SB .80	8.00	182.16	[redacted]		
			254		000134155						
			254		000134155						
			254		000134155						
			254		000134155						
			254		000134155						
			254		000134155						
			254		000134155						
			254		000134155						
			254		000134155						
27525500	533530		254		000134155						
27525500	536300		254		000134155						
27525500	536400		254		000134155						
27525500	536500		254		000134155						
CHECK 04/12/2019 TOTALS:			NET:		1,187.58		93.50	1,821.60			
EMPLOYEE 009625 TOTALS:			NET:		9,539.71		701.50	14,443.40			
GRAND TOTALS:			NET:		9,539.71		701.50	14,443.40		14,443.40	5,837.72

** END OF REPORT - Generated by ERIKA SPICER **

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

Name: [redacted] Review Period: _10/5/17__ to _4/4/18__

Unit #: [redacted] Review Deadline Date: 4/6/18

Rater Name: ___Sgt. Moore_____X- Bi-Annual Review

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.
   ☐ Above + 2 X- Meets +1 ☐ Does Not Meet + 0
   Explain:

2. Consistently completes required security rounds and documents as appropriate.
   ☐ Above + 2 X-Meets + 1 ☐ Does Not Meet + 0
   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.
   ☐ Above +2 X- Meets + 1 ☐ Does Not Meet + 0
   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

Name: Officer [redacted] Review Period: 4-5-18 to 10-4-18

Unit #: [redacted] Review Deadline Date: 10-5-18

Rater Name: Lt Bigler Bi-Annual Review

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   (Above + 2) Meets +1 Does Not Meet + 0

   Explain:

   very good identifying safety and security issues

2. Consistently completes required security rounds and documents as appropriate.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   (Above +2) Meets + 1 Does Not Meet + 0

   Explain:

   Does good job not taking risks.

Any additional comments pertaining to GOAL ONE (1-3):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0
   Explain:

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0
   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0
   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

   very dependable

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    Above + 2 Meets + 1 Does Not Meet + 0

    Explain:

Any additional comments pertaining to GOAL Three (7-10):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

OVERALL EVALUATION

Total Points: 13

Rater: LT BA Date: 9-29-18
Comments:

Lieutenant: _____ Date: _____
Comments:

Staff Lieutenant: _____ Date: 10-11-18
Comments:

Jail Administrator: _____ Date: 10/10/18
Comments:

Chief Deputy: _____ Date: 10/25/18
Comments:

Sheriff: _____ Date: 10/29/18
Comments:

Employee Signature: [redacted] Date: 11-16-18
Comments:

I have read the above rating and choose to respond to this rating.

I have read the above rating and choose **NOT** to respond under comments.

I am requesting to have a meeting with the Jail Administrator to discuss this evaluation.

My signature may not indicate agreement with the ratings.

RCSO 1001-A
2/6/13

REQUEST FOR CHANGE OF ASSIGNMENT

Assignments are based on Availability of Position and Seniority for Position
Assignment procedure for Richland County Sheriff's Office, Mansfield, Ohio

Name: [redacted]
Last First Middle

Present
Rank/Classification CORRECTIONAL OFFICER

Request for Shift Preference:

First Choice: ~~[illegible]~~ "B"

Second Choice: ~~[illegible]~~ "C"

Third Choice: ~~[illegible]~~ "A"

Request for Rotation Preference:

A Watch: 1st: T 2nd: M 3rd: B

B Watch: 1st: T 2nd: M 3rd: B

C Watch: 1st: T 2nd: M 3rd: B

[redacted] 7C32 3-8-18
Of[redacted] Date

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

Name: [redacted] Review Period: 04/06/17 to 10/04/17

Unit #: [redacted] Review Deadline Date: 11/6/17

Rater Name: Sgt. Moore Bi-Annual Review

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 (Meets +1) Does Not Meet + 0

   Explain:

2. Consistently completes required security rounds and documents as appropriate.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 (Meets + 1) Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain: • Officer [redacted] Arrives to work Early EvergDAY, He Also performs The Early CARD For Second Shift
   • Officer Prensergast Recieved The Sheriff's $100.00 Attendance for no use of Sick Time.

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    Above + 2 (Meets + 1) Does Not Meet + 0

    Explain:

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

Total Points: 11

Rater: Sgt. Keith Moore Date: 10-31-17
Comments:

Lieutenant: Lt [illegible] Date: 10-31-17
Comments:

Staff Lieutenant: [illegible] Date: 11-6-17
Comments:

Jail Administrator: Capt. C [illegible] Date: 11/7/17
Comments:

Chief Deputy: [illegible] Date: 11/21/17
Comments:

Sheriff: [illegible] Date: 12/11/17
Comments:

Employee Signature: [redacted] Date: 12-12-17
Comments:

I have read the above rating and choose to respond to this rating.

[redacted] I have read the above rating and choose **NOT** to respond under comments.

I am requesting to have a meeting with the Jail Administrator to discuss this evaluation.

My signature may not indicate agreement with the ratings.

REQUEST TO REDACT PERSONAL INFORMATION

Under paragraph 149.45(C)(1) of the Ohio Revised Code, an individual may request that a public office or a person responsible for a public office's public records redact specified types of personal information of that individual from any record made available to the general public on the internet. An individual who makes a request for redaction "shall...provide any information that identifies the location of that personal information within a document that contains that personal information." O.R.C. 149.45(C)(1) If redaction is not practicable, the public officer or person responsible for the public office's public records shall verbally or in writing within five business days after receiving the written request explain to the individual why the redaction is impracticable. O.R.C. 149.45 (C) (3)

I, request that the

Office of RICHLAND COUNTY SHERIFFS OFFICE (Print full name) redact the following items of personal information from being made available to the public on the Internet:

(Please check all that apply)

- ✓ Social security number
- ✓ Checking account number
- ✓ Tax identification number
- ✓ State identification number as issued by the Ohio Bureau of Motor Vehicles
- ✓ Savings account number
- ✓ Driver's license number
- ✓ Credit card number

For each item of personal information checked above, please identify the location of that information within any record made available by this office to the public on the internet:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

(Use the back of this form to identify additional locations of personal information items)

Signature of Requester: [redacted]

The public office may need to contact you:

1) To request additional information to locate your specific personal information to be redacted or to identify the appropriate public office responsible for redacting your personal information.

2) To provide you with an explanation within five (5) business days after receiving your written request, if a requested redaction is impracticable. Please provide contact information below, or indicate that you will contact this office to receive any explanation. This form is a public record, and the information you provide may be released in response to a public records request.

[redacted]

E-mail address: [redacted] @richlandcountyoh.us

✓ I do not wish to provide contact information. I will contact the office for any explanation.

Date Request Received 12 / 15 / 17 (To be completed by the public office)

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

RICHLAND COUNTY
Enrollment/Change Form

Department Name: RCSO
Employee Number [redacted]

CHECK ONE: ☒ OPEN ENROLLMENT ☐ NEW HIRE ☐ CHANGE	Date of Change:	Date of Hire: 05-02-2013	Effective Date: 01-01-2017
OTHER CHANGES — CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			
☐ ADD/CANCEL DEPENDENT(S):			
☐ Marriage* ☐ Birth ☐ Adoption ☐ Court Order ☐ Divorce *if marriage, state previous name			
☐ CHANGE NAME/ADDRESS, state previous			
☐ Death ☐ Age Limit ☐ Change in student status ☐ Other (explain)			

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	[redacted]			[redacted]

[redacted]

[redacted]	REG	16.87	17.22			REG	17.22			NO SHIFT	25.83						
	SHIFT	17.67	18.02			SHIFT	18.02			W SHIFT	27.03				4.31		
check date	REG HOURS	reg paid	new reg	OWED	HOLIDAY HOUR	holiday pai	new holida	OWED	OT HOURS	OT paid	New OT	OWED	FT HOURS	FT PAID	FT NEW	OWED	
1/8/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	8	212.04	216.24	4.20	0			$0.00	$36.40
1/22/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	8	212.04	216.24	4.20	0			$0.00	$36.40
2/5/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
2/19/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	16	$424.08	$432.48	$8.40	0			$0.00	$36.40
3/4/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20				$0.00	0			$0.00	$32.20
3/18/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
4/1/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
4/15/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
4/29/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
5/13/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
5/27/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
6/10/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	16	$424.08	$432.48	$8.40	0			$0.00	$36.40
6/24/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
7/8/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	16	$424.08	$432.48	$8.40	0			$0.00	$36.40
7/22/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
8/5/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
8/19/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
9/2/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
9/16/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20				$0.00	0			$0.00	$32.20
9/30/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	216.24	$4.20	0			$0.00	$32.20
10/14/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	4	$106.02	$108.12	$2.10	0			$0.00	$30.10
10/28/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	8	$212.04	$216.24	$4.20	0			$0.00	$36.40
11/11/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	20	$530.10	$540.60	$10.50	0			$0.00	$38.50
11/25/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	9	$238.55	$243.27	$4.72	0			$0.00	$36.92
12/9/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
12/23/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
																	$833.52
		NO SHIFT	$18.74			NO SHIFT	18.74			NO SHIFT	28.11						
		SHIFT	$19.54		holiday rat	SHIFT	19.54			SHIFT	$29.31						
1/6/2017	80	$1,413.60	$1,563.20	$149.60	12	$212.04	234.48	$22.44	24	636.12	703.44	$67.32	0				$239.36
1/20/2017	80	$1,413.60	$1,563.20	$149.60	12	$212.04	$234.48	$22.44				$0.00	0				$172.04
2/3/2017	80	$1,413.60	$1,562.20	$148.60	12	$212.04	$234.48	$22.44	8	$212.04	234.48	$22.44	0			$0.00	$193.48
2/17/2017	80	$1,413.60	$1,562.20	$148.60				$0.00	16	424.08	468.96	$44.88	0				$193.48
3/3/2017	80	$1,413.60	$1,562.20	$148.60	12	$212.04	$234.48	$22.44	8	$212.04	$234.48	$22.44	0				$193.48
total due	**$1,825.36**																$991.84

REQUEST TO REDACT PERSONAL INFORMATION

Under paragraph 149.45(C)(1) of the Ohio Revised Code, an individual may request that a public office or a person responsible for a public office's public records redact specified types of personal information of that individual from any record made available to the general public on the internet. An individual who makes a request for redaction "shall...provide any information that identifies the location of that personal information within a document that contains that personal information." O.R.C. 149.45(C)(1) If redaction is not practicable, the public officer or person responsible for the public office's public records shall verbally or in writing within five business days after receiving the written request explain to the individual why the redaction is impracticable. O.R.C. 149.45 (C) (3)

I, request that the

Office of RICHLAND COUNTY SHERIFFS OFFICE (Print full name) redact the following items of personal information from being made available to the public on the Internet:

(Please check all that apply)

- ✓ Social security number
- ✓ Checking account number
- ✓ Tax identification number
- ✓ State identification number as issued by the Ohio Bureau of Motor Vehicles
- ✓ Savings account number
- ✓ Driver's license number
- ✓ Credit card number

For each item of personal information checked above, please identify the location of that information within any record made available by this office to the public on the internet:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

(Use the back of this form to identify additional locations of personal information items)

Signature of Requester: [redacted]

The public office may need to contact you:

1) To request additional information to locate your specific personal information to be redacted or to identify the appropriate public office responsible for redacting your personal information.

2) To provide you with an explanation within five (5) business days after receiving your written request, if a requested redaction is impracticable. Please provide contact information below, or indicate that you will contact this office to receive any explanation. This form is a public record, and the information you provide may be released in response to a public records request.

[redacted]

E-mail address: [redacted] @richlandcountyOH.us

✓ I do not wish to provide contact information. I will contact the office for any explanation.

Date Request Received 12 / 15 / 17 (To be completed by the public office)

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

Document Title and Description:
Specific Web Address (URL):
Location of information within document:

RICHLAND COUNTY
Enrollment/Change Form

Department Name: RCSO
Employee Number: [redacted]

CHECK ONE: ☒ OPEN ENROLLMENT ☐ NEW HIRE ☐ CHANGE	Date of Change:	Date of Hire: 05-02-2013	Effective Date: 01-01-2017
OTHER CHANGES — CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			
☐ ADD/CANCEL DEPENDENT(S):			
☐ Marriage* ☐ Birth ☐ Adoption ☐ Court Order ☐ Divorce *if marriage, state previous name			
☐ CHANGE NAME/ADDRESS, state previous			
☐ Death ☐ Age Limit ☐ Change in student status ☐ Other (explain)			

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	[redacted]			[redacted]

[redacted]

[redacted]	REG	16.87	17.22			REG	17.22			NO SHIFT	25.83						
	SHIFT	17.67	18.02			SHIFT	18.02			W SHIFT	27.03				4.31		
check date	REG HOURS	reg paid	new reg	OWED	HOLIDAY HOUR	holiday pai	new holida	OWED	OT HOURS	OT paid	New OT	OWED	FT HOURS	FT PAID	FT NEW	OWED	
1/8/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	8	212.04	216.24	4.20	0			$0.00	$36.40
1/22/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	8	212.04	216.24	4.20	0			$0.00	$36.40
2/5/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
2/19/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	16	$424.08	$432.48	$8.40	0			$0.00	$36.40
3/4/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20				$0.00	0			$0.00	$32.20
3/18/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
4/1/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
4/15/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
4/29/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
5/13/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
5/27/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
6/10/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	16	$424.08	$432.48	$8.40	0			$0.00	$36.40
6/24/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
7/8/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	16	$424.08	$432.48	$8.40	0			$0.00	$36.40
7/22/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
8/5/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
8/19/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
9/2/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
9/16/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20				$0.00	0			$0.00	$32.20
9/30/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	216.24	$4.20	0			$0.00	$32.20
10/14/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	4	$106.02	$108.12	$2.10	0			$0.00	$30.10
10/28/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	8	$212.04	$216.24	$4.20	0			$0.00	$36.40
11/11/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	20	$530.10	$540.60	$10.50	0			$0.00	$38.50
11/25/2016	80	$1,413.60	$1,441.60	$28.00	12	$212.04	$216.24	$4.20	9	$238.55	$243.27	$4.72	0			$0.00	$36.92
12/9/2016	80	$1,413.60	$1,441.60	$28.00				$0.00	8	$212.04	$216.24	$4.20	0			$0.00	$32.20
12/23/2016	80	$1,413.60	$1,441.60	$28.00				$0.00				$0.00	0			$0.00	$28.00
																	$833.52
		NO SHIFT	$18.74			NO SHIFT	18.74			NO SHIFT	28.11						
		SHIFT	$19.54		holiday rat	SHIFT	19.54			SHIFT	$29.31						
1/6/2017	80	$1,413.60	$1,563.20	$149.60	12	$212.04	234.48	$22.44	24	636.12	703.44	$67.32	0				$239.36
1/20/2017	80	$1,413.60	$1,563.20	$149.60	12	$212.04	$234.48	$22.44				$0.00	0				$172.04
2/3/2017	80	$1,413.60	$1,562.20	$148.60	12	$212.04	$234.48	$22.44	8	$212.04	234.48	$22.44	0			$0.00	$193.48
2/17/2017	80	$1,413.60	$1,562.20	$148.60				$0.00	16	424.08	468.96	$44.88	0				$193.48
3/3/2017	80	$1,413.60	$1,562.20	$148.60	12	$212.04	$234.48	$22.44	8	$212.04	$234.48	$22.44	0				$193.48
total due	**$1,825.36**																$991.84

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
Check Date: 01/08/2016												
27525500	510200		254	2030	000041083	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000041083	552 HS	12.00	212.04				
27525500	510200		254	2030	000041083	887 SB .80	48.00	848.16				
27525500	510200		254	2030	000041083	887 SB .80	32.00	565.44				
			254		000041083							
			254		000041083							
			254		000041083							
			254		000041083							
			254		000041083							
			254		000041083							
			254		000041083							
27525500	533530		254		000041083							
27525500	536300		254		000041083							
27525500	536400		254		000041083							
27525500	536500		254		000041083							
CHECK 01/08/2016 TOTALS:					NET:	1,242.15	100.00	1,837.68				
Check Date: 01/22/2016												
27525500	510200		254	2030	000042295	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000042295	552 HS	12.00	212.04				
27525500	510200		254	2030	000042295	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000042295	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000042295	887 SB .80	48.00	848.16				
27525500	510200		254	2030	000042295	887 SB .80	16.00	282.72				
27525500	510200		254	2030	000042295	935 SHR AT	0.00	200.00				
			254		000042295							
			254		000042295							
			254		000042295							
			254		000042295							
			254		000042295							
			254		000042295							
			254		000042295							
27525500	533530		254		000042295							
27525500	536300		254		000042295							
27525500	536400		254		000042295							
27525500	536500		254		000042295							
CHECK 01/22/2016 TOTALS:					NET:	1,377.21	100.00	2,037.68				
Check Date: 02/05/2016												
27525500	510200		254	2030	000043506	887 SB .80	32.00	565.44				
27525500	510200		254	2030	000043506	887 SB .80	48.00	848.16				
			254		000043506							
			254		000043506							
			254		000043506							
			254		000043506							
			254		000043506							
			254		000043506							
			254		000043506							
27525500	533530		254		000043506							
27525500	536300		254		000043506							

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
27525500	536400		254		000043506							
27525500	536500		254		000043506							
CHECK 02/05/2016 TOTALS:					NET:	947.60	80.00	1,413.60	[redacted]			
Check Date: 02/19/2016												
27525500	510200		254	2030	000044717	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000044717	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000044717	567 COMPSH	8.00	141.36				
27525500	510200		254	2030	000044717	887 SB .80	48.00	848.16				
27525500	510200		254	2030	000044717	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000044717	887 SB .80	16.00	282.72	[redacted]			
			254		000044717							
			254		000044717							
			254		000044717							
			254		000044717							
			254		000044717							
			254		000044717							
			254		000044717							
27525500	533530		254		000044717							
27525500	536300		254		000044717							
27525500	536400		254		000044717							
27525500	536500		254		000044717							
CHECK 02/19/2016 TOTALS:					NET:	1,242.15	96.00	1,837.68	[redacted]			
Check Date: 03/04/2016												
27525500	510200		254	2030	000045935	552 HS	12.00	212.04				
27525500	510200		254	2030	000045935	887 SB .80	16.00	282.72				
27525500	510200		254	2030	000045935	887 SB .80	48.00	848.16				
27525500	510200		254	2030	000045935	887 SB .80	16.00	282.72	[redacted]			
			254		000045935							
			254		000045935							
			254		000045935							
			254		000045935							
			254		000045935							
			254		000045935							
			254		000045935							
27525500	533530		254		000045935							
27525500	536300		254		000045935							
27525500	536400		254		000045935							
27525500	536500		254		000045935							
CHECK 03/04/2016 TOTALS:					NET:	1,095.93	92.00	1,625.64	[redacted]			
Check Date: 03/18/2016												
27525500	510200		254	2030	000047146	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000047146	405 SICKSD	24.00	424.08				
27525500	510200		254	2030	000047146	887 SB .80	32.00	565.44				
27525500	510200		254	2030	000047146	887 SB .80	24.00	424.08	[redacted]			
			254		000047146							
			254		000047146							
			254		000047146							
			254		000047146							
			254		000047146							

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
			254		000047146							
			254		000047146							
27525500	533530		254		000047146							
27525500	536300		254		000047146							
27525500	536400		254		000047146							
27525500	536500		254		000047146							
CHECK 03/18/2016 TOTALS:					NET:	1,095.93	88.00	1,625.6				
Check Date: 04/01/2016												
27525500	510200		254	2030	000048364	501 PE+SH	8.00	141.36				
27525500	510200		254	2030	000048364	561 CTEA	8.00	0.00				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000048364	887 SB .80	8.00	141.36				
			254		000048364							
			254		000048364							
			254		000048364							
			254		000048364							
			254		000048364							
			254		000048364							
			254		000048364							
27525500	533530		254		000048364							
27525500	536300		254		000048364							
27525500	536400		254		000048364							
27525500	536500		254		000048364							
CHECK 04/01/2016 TOTALS:					NET:	947.62	88.00	1,413.60				
Check Date: 04/15/2016												
27525500	510200		254	2030	000049569	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000049569	887 SB .80	8.00	141.36				
			254		000049569				2			
			254		000049569				2			
			254		000049569				3			
			254		000049569				4			
			254		000049569				5			
			254		000049569				8			
			254		000049569				9			

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
27525500	533530		254		000049569							
27525500	536300		254		000049569							
27525500	536400		254		000049569							
27525500	536500		254		000049569							
CHECK 04/15/2016 TOTALS:					NET:	1,095.93	88.00	1,625.6[redacted]				
Check Date: 04/29/2016												
27525500	510200		254	2030	000050775	561 CTEA	8.00	0.00				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000050775	887 SB .80	8.00	141.36				
			254		000050775							
			254		000050775							
			254		000050775							
			254		000050775							
			254		000050775							
27525500	536300		254		000050775							
27525500	536400		254		000050775							
CHECK 04/29/2016 TOTALS:					NET:	1,020.64	88.00	1,413.60				
Check Date: 05/13/2016												
27525500	510200		254	2030	000051975	405 SICKSD	5.00	88.35				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	3.00	53.01				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000051975	887 SB .80	8.00	141.36				
			254		000051975							
			254		000051975							
			254		000051975							
			254		000051975							
			254		000051975							
			254		000051975							
			254		000051975							
27525500	533530		254		000051975							
27525500	536300		254		000051975							
27525500	536400		254		000051975							
27525500	536500		254		000051975							
CHECK 05/13/2016 TOTALS:					NET:	947.61	80.00	1,413.60				

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254	ORG: PAYROLL			
Check Date: 05/27/2016												
27525500	510200		254	2030	000053175	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000053175	561 CTEA	2.00	0.00				
27525500	510200		254	2030	000053175	567 COMPSH	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000053175	887 SB .80	8.00	141.36				
			254		000053175							
			254		000053175							
			254		000053175							
			254		000053175							
			254		000053175							
			254		000053175							
			254		000053175							
27525500	533530		254		000053175							
27525500	536300		254		000053175							
27525500	536400		254		000053175							
27525500	536500		254		000053175							
CHECK 05/27/2016 TOTALS:					NET:	947.60	82.00	1,413.60				
Check Date: 06/10/2016												
27525500	510200		254	2030	000054391	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000054391	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000054391	501 PE+SH	8.00	141.36				
27525500	510200		254	2030	000054391	501 PE+SH	8.00	141.36				
27525500	510200		254	2030	000054391	552 HS	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000054391	887 SB .80	8.00	141.36				
			254		000054391				2			
			254		000054391				2			
			254		000054391				3			
			254		000054391				4			
			254		000054391				5			
			254		000054391				8			
			254		000054391				9			
27525500	533530		254		000054391				2			
27525500	536300		254		000054391				1			
27525500	536400		254		000054391				7			
27525500	536500		254		000054391				2			
CHECK 06/10/2016 TOTALS:					NET:	1,242.16	96.00	1,837.68				
Check Date: 06/24/2016												

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
27525500	510200		254	2030	000055589	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000055589	552 HS	8.00	141.36				
27525500	510200		254	2030	000055589	552 HS	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000055589	887 SB .80	8.00	141.36				
			254		000055589							
			254		000055589							
			254		000055589							
			254		000055589							
			254		000055589							
			254		000055589							
			254		000055589							
27525500	533530		254		000055589							
27525500	536300		254		000055589							
27525500	536400		254		000055589							
27525500	536500		254		000055589							
CHECK 06/24/2016 TOTALS:				NET:		947.60	80.00	1,413.60				
Check Date: 07/08/2016												
27525500	510200		254	2030	000056787	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000056787	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000056787	561 CTEA	0.50	0.00				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000056787	887 SB .80	8.00	141.36				
			254		000056787							
			254		000056787							
			254		000056787							
			254		000056787							
			254		000056787							
			254		000056787							
			254		000056787							
27525500	533530		254		000056787							
27525500	536300		254		000056787							
27525500	536400		254		000056787							
27525500	536500		254		000056787							
CHECK 07/08/2016 TOTALS:				NET:		1,242.16	96.50	1,837.68				
Check Date: 07/22/2016												
27525500	510200		254	2030	000057975	305 VACSD	8.00	141.36				

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
27525500	510200		254	2030	000057975	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000057975	561 CTEA	2.00	0.00				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000057975	887 SB .80	8.00	141.36				
			254		000057975							
			254		000057975							
			254		000057975							
			254		000057975							
			254		000057975							
			254		000057975							
			254		000057975							
27525500	533530		254		000057975							
27525500	536300		254		000057975							
27525500	536400		254		000057975							
27525500	536500		254		000057975							
CHECK 07/22/2016 TOTALS:				NET:		947.60	82.00	1,413.60				
Check Date: 08/05/2016												
27525500	510200		254	2030	000059171	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000059171	567 COMPSH	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000059171	887 SB .80	8.00	141.36				
			254		000059171							
			254		000059171							
			254		000059171							
			254		000059171							
			254		000059171							
			254		000059171							
			254		000059171							
27525500	533530		254		000059171							
27525500	536300		254		000059171							
27525500	536400		254		000059171							
27525500	536500		254		000059171							
CHECK 08/05/2016 TOTALS:				NET:		1,095.93	88.00	1,625.64				
Check Date: 08/19/2016												
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000060369	887 SB .80	8.00	141.36				
			254		000060369							
			254		000060369							
			254		000060369							
			254		000060369							
			254		000060369							
			254		000060369							
			254		000060369							
27525500	533530		254		000060369							
27525500	536300		254		000060369							
27525500	536400		254		000060369							
27525500	536500		254		000060369							
CHECK 08/19/2016 TOTALS:				NET:		947.60	80.00	1,413.60				
Check Date: 09/02/2016												
27525500	510200		254	2030	000061566	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000061566	887 SB .80	8.00	141.36				
			254		000061566							
			254		000061566							
			254		000061566							
			254		000061566							
			254		000061566							
			254		000061566							
			254		000061566							
27525500	533530		254		000061566							
27525500	536300		254		000061566							
27525500	536400		254		000061566							
27525500	536500		254		000061566							
CHECK 09/02/2016 TOTALS:				NET:		1,095.93	88.00	1,625.64				
Check Date: 09/16/2016												
27525500	510200		254	2030	000062756	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]								LOC: 254 ORG: PAYROLL				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	12.00	212.04				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000062756	887 SB .80	8.00	141.36				
			254		000062756							
			254		000062756							
			254		000062756							
			254		000062756							
			254		000062756							
			254		000062756							
			254		000062756							
27525500	533530		254		000062756							
27525500	536300		254		000062756							
27525500	536400		254		000062756							
27525500	536500		254		000062756							
CHECK 09/16/2016 TOTALS:					NET:	1,095.93	92.00	1,625.64				
Check Date: 09/30/2016												
27525500	510200		254	2030	000063947	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000063947	887 SB .80	8.00	141.36				
			254		000063947							
			254		000063947							
			254		000063947							
			254		000063947							
			254		000063947							
27525500	536300		254		000063947							
27525500	536400		254		000063947							
CHECK 09/30/2016 TOTALS:					NET:	1,168.96	88.00	1,625.64				
Check Date: 10/14/2016												
27525500	510200		254	2030	000065137	216 OT BLD	4.00	106.02				
27525500	510200		254	2030	000065137	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000065137	501 PE+SH	8.00	141.36				
27525500	510200		254	2030	000065137	552 HS	8.00	141.36				
27525500	510200		254	2030	000065137	567 COMPSH	8.00	141.36				
27525500	510200		254	2030	000065137	567 COMPSH	8.00	141.36				
27525500	510200		254	2030	000065137	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000065137	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000065137	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000065137	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000065137	887 SB .80	8.00	141.36				
			254		000065137							

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]											LOC: 254	ORG: PAYROLL
			254		000065137						[redacted]	
			254		000065137							
			254		000065137							
			254		000065137							
			254		000065137							
			254		000065137							
27525500	533530		254		000065137							
27525500	536300		254		000065137							
27525500	536400		254		000065137							
27525500	536500		254		000065137							
CHECK 10/14/2016 TOTALS:					NET:	1,021.77	84.00	1,519.				
Check Date: 10/28/2016												
27525500	510200		254	2030	000066329	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000066329	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000066329	552 HS	12.00	212.04				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000066329	887 SB .80	8.00	141.36				
			254		000066329						[redacted]	
			254		000066329							
			254		000066329							
			254		000066329							
			254		000066329							
			254		000066329							
			254		000066329							
27525500	533530		254		000066329							
27525500	536300		254		000066329							
27525500	536400		254		000066329							
27525500	536500		254		000066329							
CHECK 10/28/2016 TOTALS:					NET:	1,242.15	100.00	1,837.68				
Check Date: 11/10/2016												
27525500	510200		254	2030	000067515	216 OT BLD	4.00	106.02				
27525500	510200		254	2030	000067515	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000067515	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000067515	552 HS	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000067515	887 SB .80	8.00	141.36				

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

LOC: 254 ORG: PAYROLL

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]												
			254		000067515							
			254		000067515							
			254		000067515							
			254		000067515							
			254		000067515							
			254		000067515							
			254		000067515							
27525500	533530		254		000067515							
27525500	536300		254		000067515							
27525500	536400		254		000067515							
27525500	536500		254		000067515							
CHECK 11/10/2016 TOTALS:					NET:	1,306.22	100.00	1,943.70				
Check Date: 11/25/2016												
27525500	510200		254	2030	000068706	216 OT BLD	9.00	238.55				
27525500	510200		254	2030	000068706	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000068706	552 HS	8.00	141.36				
27525500	510200		254	2030	000068706	766 TR SH	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	12.00	212.04				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000068706	887 SB .80	8.00	141.36				
			254		000068706							
			254		000068706							
			254		000068706							
			254		000068706							
			254		000068706							
			254		000068706							
			254		000068706							
27525500	533530		254		000068706							
27525500	536300		254		000068706							
27525500	536400		254		000068706							
27525500	536500		254		000068706							
CHECK 11/25/2016 TOTALS:					NET:	1,258.17	101.00	1,864.19				
Check Date: 12/09/2016												
27525500	510200		254	2030	000069874	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000069874	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000069874	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000069874	501 PE+SH	8.00	141.36				
27525500	510200		254	2030	000069874	552 HS	8.00	141.36				
27525500	510200		254	2030	000069874	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000069874	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000069874	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000069874	887 SB .80	8.00	141.3[redacted]				
27525500	510200		254	2030	000069874	887 SB .80	8.00	141.3[redacted]				
27525500	510200		254	2030	000069874	887 SB .80	8.00	141.3[redacted]				
			254		000069874							

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]												
								LOC: 254 ORG: PAYROLL				
			254		000069874							
			254		000069874							
			254		000069874							
			254		000069874							
			254		000069874							
			254		000069874							
27525500	536300		254		000069874							
27525500	536400		254		000069874							
27525500	536500		254		000069874							
CHECK 12/09/2016 TOTALS:					NET:	1,108.11	88.00	1,625.6				
Check Date: 12/23/2016												
27525500	510200		254	2030	000070978	305 VACSD	8.00	141.3				
27525500	510200		254	2030	000070978	405 SICKSD	8.00	141.3				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000070978	887 SB .80	8.00	141.36				
			254		000070978							
			254		000070978							
			254		000070978							
			254		000070978							
			254		000070978							
			254		000070978							
			254		000070978							
27525500	536300		254		000070978							
27525500	536400		254		000070978							
27525500	536500		254		000070978							
CHECK 12/23/2016 TOTALS:					NET:	959.79	80.00	1,413.60				
Check Date: 01/06/2017												
27525500	510200		254	2030	000072052	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000072052	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000072052	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000072052	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000072052	305 VACSD	8.00	141.36				
27525500	510200		254	2030	000072052	552 HS	12.00	212.04				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000072052	887 SB .80	8.00	141.36				
			254		000072052							
			254		000072052							
			254		000072052							

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

LOC: 254 ORG: PAYROLL

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]												
			254		000072052							
			254		000072052							
			254		000072052							
			254		000072052							
27525500	533530		254		000072052							
27525500	536300		254		000072052							
27525500	536400		254		000072052							
27525500	536500		254		000072052							
CHECK 01/06/2017 TOTALS:					NET:	1,492.99	116.00	2,261.[redacted]				
Check Date: 01/20/2017												
27525500	510200		254	2030	000073130	305 VACSD	8.00	141.[redacted]				
27525500	510200		254	2030	000073130	552 HS	12.00	212.[redacted]				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000073130	887 SB .80	8.00	141.36				
			254		000073130							
			254		000073130							
			254		000073130							
			254		000073130							
			254		000073130							
			254		000073130							
			254		000073130							
27525500	533530		254		000073130							
27525500	536300		254		000073130							
27525500	536400		254		000073130							
27525500	536500		254		000073130							
CHECK 01/20/2017 TOTALS:					NET:	1,088.02	92.00	1,625.64				
Check Date: 02/03/2017												
27525500	510200		254	2030	000074219	216 OT BLD	8.00	212.04				
27525500	510200		254	2030	000074219	552 HS	12.00	212.04				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	887 SB .80	8.00	141.36				
27525500	510200		254	2030	000074219	935 SHR AT	0.00	100.00				
			254		000074219							
			254		000074219							
			254		000074219							

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

LOC: 254 ORG: PAYROLL

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED TYPE	EMPLOYEE	EMPLOYER
[redacted]											
			254		000074219						
			254		000074219						
			254		000074219						
			254		000074219						
			254		000074219						
27525500	533530		254		000074219						
27525500	536300		254		000074219						
27525500	536400		254		000074219						
27525500	536500		254		000074219						
CHECK 02/03/2017 TOTALS:					NET:	1,285.29	100.00	1,93			
Check Date: 02/17/2017											
27525500	510200		254	2030	000075304	216 OT BLD	8.00	21			
27525500	510200		254	2030	000075304	216 OT BLD	8.00	212.04			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000075304	887 SB .80	8.00	141.36			
			254		000075304						
			254		000075304						
			254		000075304						
			254		000075304						
			254		000075304						
			254		000075304						
			254		000075304						
27525500	533530		254		000075304						
27525500	536300		254		000075304						
27525500	536400		254		000075304						
27525500	536500		254		000075304						
CHECK 02/17/2017 TOTALS:					NET:	1,236.31	96.00	1,837.68			
Check Date: 03/03/2017											
27525500	510200		254	2030	000076386	216 OT BLD	8.00	212.04			
27525500	510200		254	2030	000076386	305 VACSD	8.00	141.36			
27525500	510200		254	2030	000076386	552 HS	12.00	212.04			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.36			
27525500	510200		254	2030	000076386	887 SB .80	8.00	141.3			
			254		000076386						
			254		000076386						

BY EMPLOYEE NAME
01/08/2016 to 03/03/2017

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
[redacted]											LOC: 254 ORG: PAYROLL	
			254		000076386						[redacted]	
			254		000076386							
			254		000076386							
			254		000076386							
			254		000076386							
27525500	533530		254		000076386							
27525500	536300		254		000076386							
27525500	536400		254		000076386							
27525500	536500		254		000076386							
CHECK 03/03/2017 TOTALS:					NET:	1,207.81	100.00	1,837.6				
EMPLOYEE TOTALS:					NET:	34,950.87	2,829.50	51,781.5				
GRAND TOTALS:					NET:	34,950.87	2,829.50	51,781.5				

** END OF REPORT - Generated by ERIKA SPICER **

REQUEST FOR CHANGE OF ASSIGNMENT

Assignments are based on Availability of Position and Seniority for Position
Assignment procedure for Richland County Sheriff's Office, Mansfield, Ohio

Name: [redacted]
Last First Middle

Present Rank/Classification: C/O

Request for Shift Preference:

First Choice: 2ND "B"

Second Choice: 3RD "C"

Third Choice: 1ST "A"

Request for Rotation Preference:

A Watch: 1st: TOP 2nd: MID 3rd: BOT

B Watch: 1st: TOP 2nd: MID 3rd: BOT

C Watch: 1st: TOP 2nd: MID 3rd: BOT

[redacted] 9-11-17

Offi[redacted] Date

17-88

RICHLAND COUNTY SHERIFF'S OFFICE
INSTRUCTION & CAUTIONING

Employee's Name: [redacted] Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 8-30-17

VIOLATION

Date Violation Occurred: July 12, 2017 Personnel Complaint Number: 2017-088

Location Where Violation Occurred: Richland County Jail

Type of Violation Policy Group I Number 17

Description of Violation:
That on the date listed, you exhibited unsatisfactory work performance and failed to maintain a required standard of performance when you gave the wrong property to an inmate. This is your 1st Group I # 17 violation.

(Attach Additional sheets if necessary)

This Instruction and Cautioning was issued as a corrective measure in an effort to help you improve your conduct and work performance. A copy of this Instruction and Cautioning will be considered active by management for six (6) months, and will be considered inactive thereafter, provided that you have no additional disciplinary actions during that time period. Any further violations could result in more severe disciplinary actions.

Capt. C B

Signature of Person Issuing Reprimand

Jail Administrator

Title

I hereby acknowledge that a copy of the above record of Instruction and Cautioning has been given to me on this date.

[redacted]

Emplo

8-30-17

Date

cc: Employee
Appointing Authority

Name: Officer [redacted]
Unit #: [redacted]
Bi-Annual Review

Review Period: 10-1-16 to 4-1-17
Review Deadline Date: 3-17-17

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.
   (Above + 2) Meets +1 Does Not Meet + 0
   Explain:
   Officer [redacted] does a great job of Identifying problems and addressing them.

2. Consistently completes required security rounds and documents as appropriate.
   Above + 2 (Meets + 1) Does Not Meet + 0
   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.
   Above +2 (Meets + 1) Does Not Meet + 0
   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain:

   very dependable showing up to work.

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    (Above + 2) Meets + 1 Does Not Meet + 0

    Explain:

    Shows Respect to everyone no matter how they treat him.

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

Total Points: 13

Rater: Lt BS Date: 3-2-17 Comments:

Lieutenant/Staff Lieutenant: [illegible] Date: 3-16-17 Comments:

Jail Administrator: Capt. CB[illegible] Date: 3/24/17 Comments:

Great Job!

Employee Signature: [redacted] Date: 3-27-17 Comments:

I have read the above: I have I have not responded under comments. My signature may not indicate agreement with the ratings.

Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

AUTHORIZATION FOR DUES DEDUCTION

FRATERNAL ORDER OF POLICE, OHIO LABOR COUNCIL, INC.

222 E. Town St., Columbus, Ohio 43215

1-800-FOP-OLCI

I, the undersigned, hereby authorize my Employer to check off and deduct from my payroll an amount equal to dues, remitting directly to the F.O.P. Ohio Labor Council, Inc.

(PLEASE PRINT)

Place of Employment RCSO

Name [redacted]

Classification CORRECTIONS

Department CORRECTIONS

Signature [redacted] Date 1-20-17

E-mail [redacted]@richlandcountyoh.us

Mail white copy to FOP-OLC at above address

Present card to your Auditor

RICHLAND county OHIO

Employee Maintenance

(circle c

ADD CHANGE

Name	[redacted]	Employee#	[redacted]
Add	[redacted]		
City, State, Zip			
Telephone		Has this person ever been employed by	
Birthdate		Richland County in the past? Yes or No	
Social Security Number			
Marital Status:			
Sex			
Race			
Title		Class #	
Department Number	JAIL	Account #	[redacted]
Munis Org		Object#	510200
Business Phone Number			
Start Date			
Rehire Date			
Termination Date			
Reason for Termination			

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status	
Annual Salary	

Salary/p
Rate/ho
Alt Rate/ho
Longevity Paym
Annual Ho
S
Full/P
ST
PE
Direct Dep. Rout
Direct Dep. Accou

NEW ADDRESS

Signature

3/8/17
Date

Comments

Spicer, Erika <e.spicer@richlandcountyoh.us>

Change of address

2 messages

[redacted]@richlandcountyoh.us> Tue, Feb 21, 2017 at 4:51 PM
To: Erika Spicer <e.spicer@richlandcountyoh.us>

Dear Erika,

[redacted]ve to sign

Nothing else has changed.
Thank You
[redacted]

Spicer, Erika <e.spicer@richlandcountyoh.us> Wed, Feb 22, 2017 at 1:59 PM
To: "[redacted]@richlandcountyoh.us>

[redacted]

Erika Hornyak- Spicer
Payroll Supervisor

Richland County Sheriff's Office
597 Park Ave. East
Mansfield, Ohio 44905
Phone (419) 774-3559
Fax (419) 522-8153

http://www.richlandcountyoh.us/Sheriff/Sheriff.html

fw4.pdf
106K

Spicer, Erika <e.spicer@richlandcountyoh.us>

Change of address

1 message

[redacted]@richlandcountyoh.us> Tue, Feb 21, 2017 at 4:51 PM
To: Erika Spicer <e.spicer@richlandcountyoh.us>

Dear Erika

[redacted]

Nothing else has changed.
Thank You
[redacted]

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD | Change

Nan	[redacted]
Address	
City, State, Zip Code	
Telephone	
Birthdate	
Social Security Number	
Marital Status:	
Sex	
Race	
Title	
Department Number	349
Munis Org	27525500
Business Phone Number	
Start Date	
Rehire Date	
Termination Date	
Reason for Termination	
Status	
Annual Salary	

Employee# [redacted]

Has this person ever been employed by Richland County in the past? Yes or No

Class #	
Account #	[redacted]
Object#	510200

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Salary/pay	
Rate/hour	15.98
Alt Rate/hour	
Longevity Payment	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

EFFECTIVE 12-18-2014

Signature

12/23/14

Date

Comments

Name: Officer [redacted]
Unit #: [redacted]
Bi-Annual Review

Review Period: 4-6-16 to 10-6-16
Review Deadline Date: 9-30-16

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 Meets +1 Does Not Meet + 0

   Explain:

   Officer [redacted] does a good job of seeking information if needed.

2. Consistently completes required security rounds and documents as appropriate.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

   officer [redacted] has good rapport with inmates.

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

   Officer [redacted] is very reliable showing up to work.

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    Above + 2 Meets + 1 Does Not Meet + 0

    Explain:

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

Total Points: 13

Rater: Lt Bigler Date: 9-17-16 Comments:

Lieutenant/Staff Lieutenant: [signature] Date: 9-28-16 Comments:

Jail Administrator: Capt. [signature] Date: 9/28/16 Comments:

Employee Signature: [redacted] Date: 9-17-16 Comments:

NO COMM[redacted]

I have read the above: I have / I have not responded under comments. My signature may not indicate agreement with the ratings.

Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

OFFICIAL USE ONLY

Medical Premium Amount Bi-Weekly_____

Dental Premium Amount Bi-Weekly_____

DEDUCTIBLE

High_____

Low_____

RICHLAND county OHIO

RICHLAND COUNTY
Enrollment/Change Form

Department Name: 349 - Jail

Employee Number: [redacted]

CHECK ONE: ☒ OPEN ENROLLMENT ☐ NEW HIRE ☐ CHANGE	Date of Change:	Date of Hire: 05-02-2015	Effective Date: 1-1-16

OTHER CHANGES

CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE

☐ ADD/CANCEL DEPENDENT(S):

☐ Marriage* ☐ Birth ☐ Adoption ☐ Court Order ☐ Divorce *if marriage, state previous name

☐ CHANGE NAME/ADDRESS, state previous

☐ Death ☐ Age Limit ☐ Change in student status ☐ Other (explain)

NAME OF EMPLOYEE: First: Middle: Last: Social Security #: [redacted]

[redacted]

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD CHANGE DELETE

Name	[redacted]
Address	
City, State, Zip Code	
Telephone	
Birthdate	
Social Security Number	
Marital Status:	
Sex	
Race	
Title	CORRECTIONS OFFICER
Department Number	349 JAIL
Munis Org	27525500
Business Phone Number	
Start Date	
Rehire Date	
Termination Date	
Reason for Termination	
Status	
Annual Salary	

Employee# [redacted]

Has this person ever been employed by Richland County in the past? Yes or No

Class #	
Account #	
Object#	510200

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Salary/pay	
Rate/hour	16.8700
Alt Rate/hour	
Longevity Payment	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

Increase effective 12-17-2015

Signature

Date 12/30/15

Comments

Name: Officer [redacted] Review Period: 4-1-15 to 9-30-15
Unit #: [redacted] Review Deadline Date: 10-8-15

Bi-Annual Review

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 (Meets +1) Does Not Meet + 0
   Explain:

2. Consistently completes required security rounds and documents as appropriate.

   (Above + 2) Meets + 1 Does Not Meet + 0
   Explain: Officer [redacted] routinely takes the initiative to complete observation checks. He is also willing to assist other officers in performing observation checks when needed.

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 (Meets + 1) Does Not Meet + 0
   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

OFFICIAL USE ONLY

Medical Premium Amount Bi-Weekly_____

Dental Premium Amount Bi-Weekly_____

DEDUCTIBLE

High_____

Low_____

RICHLAND COUNTY OHIO

RICHLAND COUNTY
Enrollment/Change Form

Department Name: 349 - Jail

Employee Number: [redacted]

CHECK ONE: ☒ OPEN ENROLLMENT ☐ NEW HIRE ☐ CHANGE	Date of Change:	Date of Hire: 05-02-2015	Effective Date: 1-1-16

OTHER CHANGES

CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE

☐ ADD/CANCEL DEPENDENT(S):

☐ Marriage* ☐ Birth ☐ Adoption ☐ Court Order ☐ Divorce *if marriage, state previous name

☐ CHANGE NAME/ADDRESS, state previous

☐ Death ☐ Age Limit ☐ Change in student status ☐ Other (explain)

NAME OF EMPLOYEE: First: [redacted] Middle: [redacted] Last: [redacted] Social Security #: [redacted]

[redacted]

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD CHANGE DELETE

Name	[redacted]	Employee#	[redacted]
Address			
City, State, Zip Code			
Telephone		Has this person ever been employed by	
Birthdate		Richland County in the past? Yes or No	
Social Security Number			
Marital Status:			
Sex			
Race			
Title	CORRECTIONS OFFICER	Class #	
Department Number	349 JAIL	Account #	
Munis Org	27525500	Object#	510200
Business Phone Number			
Start Date			
Rehire Date			
Termination Date			
Reason for Termination			

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status	
Annual Salary	

Salary/pay	
Rate/hour	16.8700
Alt Rate/hour	
Longevity Payment	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

Increase effective 12-17-2015

Signature: Eric Spoon

Date: 12/30/15

Comments

Name: Officer [redacted]
Unit #: [redacted]

Review Period: 4-1-15 to 9-30-15
Review Deadline Date: 10-8-15

Bi-Annual Review

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 (Meets +1) Does Not Meet + 0

   Explain:

2. Consistently completes required security rounds and documents as appropriate.

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain: Officer [redacted] routinely takes the initiative to complete observation checks. He is also willing to assist other officers in performing observation checks when needed.

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 (Meets + 1) Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain: Officer [redacted] has a very good attendance record. He rarely calls off sick and is extremely dependable.

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    (Above + 2) Meets + 1 Does Not Meet + 0

    Explain: Officer [redacted] works very well with his co-workers. He is very respectful to both his co-workers and his supervisors. Officer [redacted] works hard to be professional with those inside and outside of the facility

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

Total Points: 13

Rater: Sgt. [redacted] Date: 10-4-15 Comments: Officer [redacted] is a very pleasant officer to supervise. I enjoy getting input from him and he works to be a quality officer with great initiative and work ethic..

Lieutenant/Staff Lieutenant: [signature] Date: 10-5-15 Comments:

Jail Administrator: [signature] Date: 10/14/15 Comments:

Employee Signature: [redacted] Date: 10-4-15 Comments:

NO COMMENT.

I have read the above: (I have) I have not responded under comments. My signature may not indicate agreement with the ratings.

Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

Name: Officer [redacted]
Unit #: [redacted]
Bi-Annual Review

Review Period: 10-8-15 to 4-6-16
Review Deadline Date: 4-28-16

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   (Above + 2) Meets +1 Does Not Meet + 0

   Explain:

   Officer [redacted] is very safety and security oriented.

2. Consistently completes required security rounds and documents as appropriate.

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain:

   Does a great job with POC's.

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 (Meets + 1) Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain:

   very good at being professional around inmates.

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   (Above + 2) Meets + 1 Does Not Meet + 0

   Explain:

   very dependable showing up for work.

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    Above + 2 (Meets + 1) Does Not Meet + 0

    Explain:

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

Total Points: 14

Rater: Sgt [illegible] Date: 4-8-16 Comments:

Lieutenant/Staff Lieutenant: [illegible] Date: 5-4-16 Comments:

Jail Administrator: [illegible] Date: 5/5/16 Comments:

Employee Signature: [redacted] Date: 4-8-16 Comments:

I have read the above: I have X I have not responded under comments. My signature may not indicate agreement with the ratings.

Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

Name: [redacted] Review Period: _____ to _____
Unit #: [redacted] Review Deadline Date: 4·25·15
Bi-Annual Review

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 (Meets +1) Does Not Meet + 0
   Explain: Always asks questions & gets clarification

2. Consistently completes required security rounds and documents as appropriate.

   Above + 2 (Meets + 1) Does Not Meet + 0
   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 (Meets + 1) Does Not Meet + 0
   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain: Always professional with inmates

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL TWO (4-6):

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 Meets + 1 , Does Not Meet + 0

   Explain: Was written for missing thumbprint on DNA packet.

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain: Always early for his shift.

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 Meets + 1 Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    Above + 2 Meets + 1 Does Not Meet + 0

    Explain:

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

Total Points: 10

Rater: Sgt. Fletcher Date: 4-23-15 Comments:

Lieutenant/Staff Lieutenant: [signature] Date: 4-27-15 Comments:

Jail Administrator: Capt-C Blue Date: 4/24/15 Comments:

Employee Signature: [redacted] Date: 4-23-15 Comments:

NO COMMENT

I have read the above: I have I have not responded under comments. My signature may not indicate agreement with the ratings.

Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

Form R-8

RICHLAND COUNTY SHERIFF'S OFFICE
WRITTEN REPRIMAND

Employee's Name: [redacted] Employee's Classification: Correction Officer

Date Written Reprimand was Issued: 3-11-15

VIOLATION

Date Violation Occurred: February 22, 2015

Location Where Violation Occurred: Richland County Jail

Type of Violation Group I Number 17

Description of Violation:
That on the date listed, you exhibited unsatisfactory work and failed to maintain a required standard of performance when you didn't properly collect DNA from an inmate. This is your 2nd Group I # 17 violation.

(Attach Additional sheets if necessary)

This written reprimand was issued as a corrective measure in an effort to help you improve your conduct and work performance. A copy of this Written Reprimand will be maintained by management for twelve (12) months, and will be destroyed thereafter, provided that you have no additional disciplinary actions during that time period. Any further violations could result in more severe disciplinary actions.

Signature of Supervisor Issuing Reprimand

JAIL ADMIN.
Title

I hereby acknowledge that a copy of the above record of the Written Reprimand has been given to me on this date.

[redacted]
Emp

3-11-15
Date

cc: Employee
Supervisor
Appointing Authority

Form R-8

RICHLAND COUNTY SHERIFF'S OFFICE
WRITTEN REPRIMAND

Employee's Name: [redacted] Employee's Classification: Correction Officer

Date Written Reprimand was Issued: 3-11-15

VIOLATION

Date Violation Occurred: February 22, 2015

Location Where Violation Occurred: Richland County Jail

Type of Violation Group I Number 17

Description of Violation:
That on the date listed, you exhibited unsatisfactory work and failed to maintain a required standard of performance when you didn't properly collect DNA from an inmate. This is your 2nd Group I # 17 violation.

(Attach Additional sheets if necessary)

This written reprimand was issued as a corrective measure in an effort to help you improve your conduct and work performance. A copy of this Written Reprimand will be maintained by management for twelve (12) months, and will be destroyed thereafter, provided that you have no additional disciplinary actions during that time period. Any further violations could result in more severe disciplinary actions.

Signature of Supervisor Issuing Reprimand

JAIL ADMIN.
Title

I hereby acknowledge that a copy of the above record of the Written Reprimand has been given to me on this date.

[redacted]
Em

3-11-15
Date

cc: Employee
Supervisor
Appointing Authority

Form R-7

RICHLAND COUNTY SHERIFF'S OFFICE
INSTRUCTION & CAUTIONING

Employee's Name: [redacted] Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 11-13-14

VIOLATION

Date Violation Occurred: October 19, 2014

Location Where Violation Occurred: Richland County Jail

Type of Violation Group I Number 17

Description of Violation: That on the date listed, you exhibited unsatisfactory work and failed to maintain a required standard of performance by allowing an inmate to have more than one visit. This is your 1st Group I # 17 violation.

(Attach Additional sheets if necessary)

This Instruction and Cautioning was issued as a corrective measure in an effort to help you improve your conduct and work performance. A copy of this Instruction and Cautioning will be maintained by management for six (6) months, and will be destroyed thereafter, provided that you have no additional disciplinary actions during that time period. Any further violations could result in more severe disciplinary actions.

Signature of person issuing reprimand

Lieutenant

Title

I hereby acknowledge that a copy of the above record of Instruction and Cautioning has been given to me on this date.

[redacted] 7032

Empl[redacted]

11-13-14

Date

cc: Employee
Supervisor
Appointing Authority

Name: [redacted] Review Period: 4-14 to 9-14
Unit #: [redacted] Review Deadline Date: 10-3-14

Bi-Annual Review

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION

This evaluation consists of three (3) strategic goals tied to the RCSO values of safety and security, and operational effectiveness. Each goal is evaluated through specific objectives. Rate your direct report as: Above, Meets, or Does Not Meet. A rating of "Does Not Meet" requires justification and must include a Performance Action Plan.

GOAL ONE: *Correction Officers will uphold the highest standards of security and safety for staff, facilities, inmates and visitors consistent with the mission of the facility.*

1. Identifies and addresses safety and security problems in a timely and appropriate manner. Seeks information/advice from the correct sources as appropriate and provides pertinent information to his/her supervisor and relieving shift officers.

   Above + 2 (Meets +1) Does Not Meet + 0

   Explain:

   [redacted] does a good Job of Finding out Information he doesnt Know

2. Consistently completes required security rounds and documents as appropriate.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

3. Takes only appropriate and/or reasonable risks and understands the importance of boundaries between inmates and Correction Officers.

   Above +2 (Meets + 1) Does Not Meet + 0

   Explain:

Any additional comments pertaining to GOAL ONE (1-3):

GOAL TWO: *Correction Officers will conduct themselves professionally and support the organization's mission by treating inmates in a firm, fair and consistent manner.*

4. Develops and maintains professional interactions and appropriate rapport and credibility with inmates.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

   [redacted] tries to be professional at all times.

5. Clearly and consistently communicates facility rules and expectations to inmates and responds to questions in a professional manner. Ensures that inmates have timely and complete access to Grievance forms and the Inmate Kite system.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

6. Makes prudent and sound decisions and takes appropriate action to diffuse problem situations.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

   [redacted] Needs to work on Reacting to stressfull situations and not overreacting

Any additional comments pertaining to GOAL TWO (4-6):

GOAL THREE: *Correction Officers will contribute to the efficiency and effectiveness of the facility in carrying out their duties.*

7. Consistently follows post orders, policies and procedures.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

8. Arrives on time for his/her shift, is dependable, and has a good attendance record. (Exclude from consideration any leave taken under the Family Medical Leave Act-FMLA).

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

   [redacted] is dependable and arrives to work ontime

9. Completes required documentation timely, thoroughly and accurately, meets deadlines and completes special assignments or duties on time.

   Above + 2 (Meets + 1) Does Not Meet + 0

   Explain:

10. Demonstrates appropriate respect for co-workers and supervisors, especially in the presence of inmates, and displays a professional and courteous demeanor when communicating with inmate visitors and others within the facility.

    (Above + 2) Meets + 1 Does Not Meet + 0

    Explain:

    Officer [redacted] is very courteous to staff and the public

Any additional comments pertaining to GOAL Three (7-10):

OVERALL EVALUATION

Total Points: 11

Rater: Sgt [illegible] Date: 9-18-14 Comments:
officer [redacted] is a hard worker.

Lieutenant/Staff Lieutenant: [illegible] Date: 9-24-14 Comments:

Jail Administrator: [illegible] Date: 9/24/14 Comments:

Employee Signature: [redacted] Date: 9-23-14 Comments:
NO COMMENT

I have read the above: (I have) I have not responded under comments. My signature may not indicate agreement with the ratings.

Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

RICHLAND COUNTY Enrollment/Change Form

(use ballpoint pen and press firmly)

Department Number: 349

Employee Number: [redacted]

CHECK ONE: ☐ OPEN ENROLLMENT ☐ NEW HIRE ☒ CHANGE	Date of Change: 10-21-13	Date of Hire: 05-02-13	Effective Date: ~~10-21-13~~ 1-1-14

OTHER CHANGES	
	CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE
	☐ CHANGE NAME/ADDRESS, state previous
	☒ ADD/CANCEL DEPENDENT(S): ☐ Marriage* ☐ Birth ☐ Adoption ☐ Court Order ☒ Divorce *If marriage, state previous name
	☐ Death ☐ Age Limit ☐ Change in student status ☐ Other (explain)

NAME OF EMPLOYEE: [redacted] Social Security #: [redacted]

[redacted]

Form R-7

RICHLAND COUNTY SHERIFF'S OFFICE
INSTRUCTION & CAUTIONING

Employee's Name: [redacted] Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 2-18-14

VIOLATION

Date Violation Occurred: February 7, 2014

Location Where Violation Occurred: Richland County Jail

Type of Violation Group I Number 17

Description of Violation: that on the date listed above, you exhibited unsatisfactory work and failed to maintain a required standard of performance by not properly conducting personal observation checks on inmates in the jail as required. This is your 1st Group I # 17 offense.

(Attach Additional sheets if necessary)

This Instruction and Cautioning was issued as a corrective measure in an effort to help you improve your conduct and work performance. A copy of this Instruction and Cautioning will be maintained by management for six (6) months, and will be destroyed thereafter, provided that you have no additional disciplinary actions during that time period. Any further violations could result in more severe disciplinary actions.

Signature of person issuing reprimand

LT.

Title

I hereby acknowledge that a copy of the above record of Instruction and Cautioning has been given to me on this date.

[redacted]

Employee's Signature

2-18-14

Date

cc: Employee
Supervisor
Appointing Authority

Form R-7

RICHLAND COUNTY SHERIFF'S OFFICE
INSTRUCTION & CAUTIONING

Employee's Name: [redacted] Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 2-18-14

VIOLATION

Date Violation Occurred: February 7, 2014

Location Where Violation Occurred: Richland County Jail

Type of Violation Group I Number 17

Description of Violation: that on the date listed above, you exhibited unsatisfactory work and failed to maintain a required standard of performance by not properly conducting personal observation checks on inmates in the jail as required. This is your 1st Group I # 17 offense.

(Attach Additional sheets if necessary)

This Instruction and Cautioning was issued as a corrective measure in an effort to help you improve your conduct and work performance. A copy of this Instruction and Cautioning will be maintained by management for six (6) months, and will be destroyed thereafter, provided that you have no additional disciplinary actions during that time period. Any further violations could result in more severe disciplinary actions.

Signature of person issuing reprimand

LT.
Title

I hereby acknowledge that a copy of the above record of Instruction and Cautioning has been given to me on this date.

[redacted]
Employee's Signature

2-18-14
Date

cc: Employee
Supervisor
Appointing Authority

RICHLAND COUNTY SHERIFF'S OFFICE
"PERSONNEL COMPLAINT REPORT"

x Internal Complaint
☐ External Complaint

14-010

DATE/ TIME REPORTED	DATE/TIME OF INCIDENT	DATE/TIME BECAME AWARE OF INCIDENT
02/12/14 @ 20:52	02/07/14 Between 20:26 and 21:46	02/09/14 @ 21:02

COMPLAINANT'S NAME	ADDRESS	PHONE NUMBER:
Lt. Douglas	RCSO	567-307-2004

TYPE OF COMPLAINT	PLACE OF OCCURRENCE
This Officer did not follow policy	2nd Floor

DESCRIPTION OF COMPLAINT:
On the above date and time Officer [redacted] did not log his POC check on time, and failed to give an explanation as to why it was late.

PERSON(S) INVOLVED IN INCIDENT:

NAME:	VIOLATOR	WITNESS	CIVILIAN
Officer [redacted]	x	☐	☐
Lt. Douglas #7c31	☐	x	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐
	☐	☐	☐

NUMBER AND SEGREGATE THE FOLLOWING (1) DETAILS OF COMPLAINT AS STATED BY COMPLAINANT (2) INTERVIEWER'S REMARKS (3) INVESTIGATION SUGGESTIONS.

1. Officer [redacted] was late on his POC check with no explanation as to why.
2. Officer [redacted] advised that he just forgot to log it, and will be more careful next time.
3. I suggest that Officer [redacted] Logs his checks immediately after he is done, to avoid further discipline.

***NOTICE: UNDER SECTION 2921.13 OF THE OHIO REVISED CODE, FALSIFICATION IS A CRIMINAL ACT, WHICH MAY BE SUBJECT TO PROSECUTION. PUNISHABLE BY UP TO 6 MONTHS CONFINEMENT AND A FINE OF $1,000.**

COMPLAINANT'S SIGNATURE	INVESTIGATING OFFICER	DATE
[signature]		2-12-14

ADMINISTRATION USE ONLY:

Complaint Number: 14-010

Employee: _____ Group _____ Number _____

Prior Active Discipline: Yes ☐ No ☐ Date: _____ Group _____ Number _____

Shift Log Report

Event POC - Location JAL2

Run Date/Time : 02/12/2014 - 20:59
From 02/07/2014 - To 02/07/2014
From (time) 13:30 - To (time) 22:00

Date-Time Event	Officer Description	Location Comment
02/07/2014-21:46 **Personalobservationchecks/Security Check**	Tosbun **2ND FLR WEST BY C75**	Jail 2nd Floor **HEAD COUNT**
02/07/2014-21:44 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C75**	Jail 2nd Floor **HEAD COUNT**
02/07/2014-21:13 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C46 AND 7C60**	Jail 2nd Floor
02/07/2014-20:26 **Personalobservationchecks/Security Check**	Tosbun **2ND FLOOR WEST CHECK BY 7C81**	Jail 2nd Floor
02/07/2014-20:15 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C81**	Jail 2nd Floor **MEDS PASSED EAST END**
02/07/2014-19:55 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C2**	Jail 2nd Floor
02/07/2014-19:30 **Personalobservationchecks/Security Check**	Tosbun **2ND FLOOR WEST CHECK BY 7C81**	Jail 2nd Floor
02/07/2014-19:06 **Personalobservationchecks/Security Check**	Tosbun **2ND WEST 81**	Jail 2nd Floor
02/07/2014-19:02 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C2**	Jail 2nd Floor
02/07/2014-18:08 **Personalobservationchecks/Security Check**	Tosbun **2ND WEST 32**	Jail 2nd Floor
02/07/2014-18:07 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C2**	Jail 2nd Floor
02/07/2014-17:09 **Personalobservationchecks/Security Check**	Saldridge **2ND FLOOR EAST END BY 7C2**	Jail 2nd Floor
02/07/2014-17:09	Tosbun	Jail 2nd Floor

Shift Log Report

Event POC - Location JAL2

Run Date/Time : 02/12/2014 - 20:59
From 02/07/2014 - To 02/07/2014
From (time) 13:30 - To (time) 22:00

Date-Time Event	Officer Description	Location Comment
Personalobservationchecks/Security Check	**2ND FLR WEST END BY 32**	
02/07/2014-16:18 **Personalobservationchecks/Security Check**	Dhillier **2ND FLOOR EAST BY 2**	Jail 2nd Floor
02/07/2014-16:18 **Personalobservationchecks/Security Check**	Dhillier **2ND FLOOR WEST BY 32 AND 81**	Jail 2nd Floor
02/07/2014-15:33 **Personalobservationchecks/Security Check**	Dhillier **2ND FLOOR WEST BY 81**	Jail 2nd Floor
02/07/2014-15:29 **Personalobservationchecks/Security Check**	Dhillier **2ND FLOOR EAST END BY 2**	Jail 2nd Floor
02/07/2014-14:41 **Personalobservationchecks/Security Check**	Dhillier **2ND FLOOR WEST BY 81 AND 32**	Jail 2nd Floor
02/07/2014-14:39 **Personalobservationchecks/Security Check**	[redacted] **2ND FLOOR EAST END BY** [redacted]	Jail 2nd Floor
02/07/2014-13:43 **Personalobservationchecks/Security Check**	Ashaw **EAST END OFC** [redacted]	Jail 2nd Floor
02/07/2014-13:42 **Personalobservationchecks/Security Check**	Kgillis **WEST END SECOND FLOOR BY** [redacted]	Jail 2nd Floor

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD **Change** **Delete**

Name	[redacted]
Address	
City, State, Zip Code	
Telephone	
Birthdate	
ocial Security Number	
Marital Status:	
Sex	
Race	
Title	
Department Number	349
usiness Phone Number	
Start Date	
Rehire Date	
Termination Date	
eason for Termination	
Status	
Annual Salary	

Employee # [redacted]

Has this person ever been employeed by Richland County in the past? Yes or No

Account #

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Salary/pay	
Rate/hour	$ 14.3000
Alt Rate/hour	R 80 SHIFT
Wage Factor	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

EFFECTIVE 12/19/13

Steve Sheldon
Signature

12/19/13
Date

Comments

CERTIFICATE OF APPOINTMENT

OF [redacted]

As Correctinal Officer

Office Sheriff
RICHLAND COUNTY

THIS IS TO CERTIFY, that the undersigned being of opinion that the business of this office requires it, has appointed [redacted]

a suitable and competent person as Correctional Officer

Therein, beginning on the 2 day of May-13
and continuing until otherwise ordered.

Said [redacted]

as compensation the sum of $13.2970 dollars
per hour payable bi-weekly from the County Treasury upon the warrant of the County Auditor.

Witness my signature and seal of office, this 2nd day of May-13

Sheriff J Steve Sheldon
RICHLAND COUNTY
J. STEVE SHELDON SHERIFF

OATH OF OFFICE

Rev Code Secs 3.22, 3-23

The State of Ohio, Richland County, ss.

[redacted] being duly sworn, says that he/she will support the Constitution of the United States and the Constitution of the State of Ohio, and that he will faithfully discharge the duties of Deputy in the office of the Sheriff of said County.

[redacted]

Sworn to before me and signed in my presence, this 2nd day of May 2013

Sheriff J Steve Sheldon
J. STEVE SHELDON SHERIFF
Richland County

Future Changes

Mike DeWine
Ohio Attorney General

October 28, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO BCI&I RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006

The Ohio Bureau of Criminal Identification and Investigation (BCI&I) has completed a criminal history record check on the applicant listed below. Based upon information furnished by your agency, BCI&I has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]

BCI Completion Date:	**April 10, 2013**
Reason Fingerprinted:	**Law Enforcement Employment**
Agency ID:	**CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
Telephone: (740) 845-2000
Facsimile: (740) 845-2020

An Internationally Certified Law Enforcement Agency
www.ag.state.oh.us

Mike DeWine
Ohio Attorney General

October 28, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO FBI RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006
ICN: E2013101000000131367

The Federal Bureau of Investigation (FBI) has completed a criminal history record check on the applicant listed below. Based upon the information furnished by your agency, the FBI has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]

FBI Completion Date:	**April 11, 2013**
Reason Fingerprinted:	**LAW**
Agency ID:	**CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
Telephone: (740) 845-2000
Facsimile: (740) 845-2020

An Internationally Certified Law Enforcement Agency
www.ag.state.oh.us

Mike DeWine
Ohio Attorney General

October 03, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO BCI&I RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006

The Ohio Bureau of Criminal Identification and Investigation (BCI&I) has completed a criminal history record check on the applicant listed below. Based upon information furnished by your agency, BCI&I has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]

BCI Completion Date:	**April 10, 2013**
Reason Fingerprinted:	**Law Enforcement Employment**
Agency ID:	**CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
Telephone: (740) 845-2000
Facsimile: (740) 845-2020

An Internationally Certified Law Enforcement Agency
www.ag.state.oh.us

Mike DeWine
Ohio Attorney General

October 03, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO FBI RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006
ICN: E2013101000000131367

The Federal Bureau of Investigation (FBI) has completed a criminal history record check on the applicant listed below. Based upon the information furnished by your agency, the FBI has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]

FBI Completion Date:	**April 11, 2013**
Reason Fingerprinted:	**LAW**
Agency ID:	**CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
Telephone: (740) 845-2000
Facsimile: (740) 845-2020

An Internationally Certified Law Enforcement Agency
www.ag.state.oh.us

To Sheriff Sheldon,

I am writing with great pleasure to inform you that Officer [redacted] has successfully completed the 12 week FTO Training Program here at RCSO. I have been Officer [redacted]'s FTO and Direct supervisor for the past 7 weeks, and I am very proud of the progress he has made as an officer. Officer [redacted] successfully completed and passed the required mid-term exam scoring a 94.5% and has also successfully completed and passed the required final exam scoring an 88%. Officer [redacted] has performed very well under my direct supervision in all areas as a solo corrections officer. These areas include working the control rooms, roving the jail floor, computer operation of all required programs, and in bookin. Officer [redacted] to date has done approximately 86 bookins and has a good knowledge of the paperwork required to perform there. Officer [redacted]'s greatest strength is the fact that he is a very safe and security minded officer. Officer [redacted] also has a great ability to treat people with the respect that they are entitled to. He is very consistent, polite, and fair when dealing with the inmates and fellow officers. Officer [redacted] is a hard worker, takes pride in his duties and is a great asset to the jail staff here at RCSO. Officer [redacted] has earned the respect of this FTO and his fellow officers. It has been a pleasure training and teaching Officer [redacted], I am proud to call him partner.

Thank you,

7c17

Field Training Officer, Rodney Clark 7c17

cc. Major Fortney

cc. Capt. Masi

cc. Staff Ly. Blunk

cc. FTO Supervisor Sgt Young

cc. Officer [redacted]

Barrington Properties, Ltd.

F A X C O V E R S H E E T

Send to:	Records	From:	Diana Lambert
Attention:		Office location:	Ontario, OH
Office location:		Date:	5/13/13
Fax number:	419-522-8153	Phone number:	419-529-9509

	URGENT		REPLY ASAP	X	PLEASE COMMENT		PLEASE REVIEW		FYI

TOTAL PAGES, INCLUDING COVER: 2

Comments:

Please advise employment information on [redacted] The assigned authorization is attached.

~~Employee date~~ Hire date: 5/2/13 Current Position: corrections

Length of time at company: _____ in current position: 5/2/13

Salary: 13.2970 Hour Full time. bi-weekly

Expected continued employment next 12 months? Good X Fair __ Poor __

Comments: Probation 1 year.

Completed by: Erika Spicer Position payroll

99 Glenview Dr.
Mansfield, OH 44906

Barrington Properties, Ltd.

Phone & Fax: 419-529-9509

Barrington Properties, Ltd.

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Comments: Probation 1 year.

Completed by: Erika Spicer Position payroll

99 Glenview Dr.
Mansfield, OH 44906

Barrington Properties, Ltd.

Phone & Fax: 419-529-9509

CREDIT AUTHORIZATION: I/we hereby authorize Barrington Properties Ltd. to verify my past and present employment earnings records. I further authorize Barrington Properties, Ltd. to request a consumer report and verify other credit information, including past and present mortgage, landlord references and any other information necessary to establish eligibility for and continued participation as a qualified resident. It is understoo that a copy of this form will also serve as authorization and release without liability for same and we may share this information with the owner or landlord of the subject property.

X [redacted] 5-10-2013

Appl[redacted] Date:

X

Applicant Signature: Date:

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD | Change | Delete

Name [redacted]

Employee#

City, State [redacted]

n the past? Yes or No

ocial Securi

Mari

Race White

Title Correction's Officer

Department Number 349

Account # [redacted]

Business Phone Number

Start Date 05/02/13

Rehire Date

Termination Date

eason for Termination

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status

Annual Salary

Salary/pay

Rate/hour $ 13.2970

Alt Rate/hour WTA

Wage Factor

Annual Hours

Shift

Full/Part

STRS

PERS

Direct Dep. Route #

Direct Dep. Account #

Signature [signature]

Date 5/8/13

Comments

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD Change Delete

Name	[redacted]
Address	
City, State, Zip Code	
Telephone	
Birthdate	
ocial Security Number	
Marital Status:	
Sex	
Race	
Title	
Department Number	349
usiness Phone Number	
Start Date	
Rehire Date	
Termination Date	
eason for Termination	
Status	
Annual Salary	

Employee # [redacted]

Has this person ever been employeed by Richland County in the past? Yes or No

Account #

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Salary/pay	
Rate/hour	$ 14.3000
Alt Rate/hour	R 80 SHIFT
Wage Factor	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

Steve Sheldon
Signature

12/19/13
Date

EFFECTIVE 12/19/13

Comments

RICHLAND county OHIO

Employee Maintenance

(circle one)

ADD Change Delete

Name [redacted]

Employee#

[redacted]

and County in the past? Yes or No

Sex Male

Race White

Title Correction's Officer

Department Number 349

Account # [redacted]

Business Phone Number

Start Date 05/02/13

Rehire Date

Termination Date

Reason for Termination

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status

Annual Salary

Salary/pay

Rate/hour $ 13.2970

Alt Rate/hour

Wage Factor

Annual Hours

Shift

Full/Part

STRS

PERS

Direct Dep. Route #

Direct Dep. Account #

Signature

Date 5/8/13

Comments

RICHLAND COUNTY Enrollment/Change Form

(use ballpoint pen and press firmly)

Department Number: Jail

Employee Number:

CHECK ONE: ❑ OPEN ENROLLMENT ☑ NEW HIRE ❑ CHANGE	Date of Change:	Date of Hire: 05-02-13	Effective Date: 6-1-13

OTHER CHANGES

CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE

❑ CHANGE NAME/ADDRESS, state previous

❑ ADD/CANCEL DEPENDENT(S): ☑ Marriage* ❑ Birth ❑ Adoption ❑ Court Order ❑ Divorce *If marriage, state previous name

❑ Death ❑ Age Limit ❑ Change in student status ❑ Other (explain)

NAME OF EMPLOYEE: First: Middle: Last: [redacted] Social Security #: [redacted]

[redacted]

"NEW EMPLOYEE" PROCESSING
PERSONAL DATA

The following information is required in order to correctly process new employees:

1. NAME: [redacted]

DATE: 5-2-13 SIGNATURE: [redacted]

Statement Concerning Your Employment in a Job Not Covered by Social Security

[redacted]

Employee Name RICHLAND COUNTY SHERIFF Employee ID# [redacted]

Employer Name RICHLAND COUNTY SHERIFF Employer ID# 34-6002296

Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.

Windfall Elimination Provision

Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2005, the maximum monthly reduction in your Social Security benefit as a result of this provision is $313.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to Social Security Publication, "Windfall Elimination Provision."

Government Pension Offset Provision

Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled will be offset if you also receive a Federal, State or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension.

For example, if you get a monthly pension of $600 based on earnings that are not covered under Social Security, two-thirds of that amount, $400, is used to offset your Social Security spouse or widow(er) benefit. If you are eligible for a $500 widow(er) benefit, you will receive $100 per month from Social Security ($500 - $400=$100). Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65. For additional information, please refer to Social Security Publication, "Government Pension Offset."

For More Information

Social Security publications and additional information, including information about exceptions to each provision, are available at www.socialsecurity.gov. You may also call toll free 1-800-772-1213, or for the deaf or hard of hearing call the TTY number 1-800-325-0778, or contact your local Social Security office.

I certify that I have received Form SSA-1945 that contains information about the possible effects of the Windfall Elimination Provision and the Government Pension Offset Provision on my potential future Social Security benefits.

Signature of Employee [redacted] **Date** 5-2-13

Employment Eligibility Verification

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
OMB No. 1615-0047
Expires 03/31/2016

▶START HERE. Read instructions carefully before completing this form. The instructions must be available during completion of this form.
ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the **first day of employment**, but not before accepting a job offer.)*

Last Name *(Family Name)*	[redacted]	[redacted]itial	Other Names Used *(if any)*
[redacted]			

[redacted] connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following):

☒ A citizen of the United States

☐ A noncitizen national of the United States *(See instructions)*

☐ A lawful permanent resident (Alien Registration Number/USCIS Number): _____

☐ An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) _____. Some aliens may write "N/A" in this field. *(See instructions)*

*For aliens authorized to work, provide your Alien Registration Number/USCIS Number **OR** Form I-94 Admission Number:*

1. Alien Registration Number/USCIS Number: _____

OR

2. Form I-94 Admission Number: _____

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

Foreign Passport Number: _____

Country of Issuance: _____

Some aliens may write "N/A" on the Foreign Passport Number and Country of Issuance fields. (*See instructions*)

3-D Barcode
Do Not Write in This Space

Signature of Employee:	[redacted]	Date *(mm/dd/yyyy)*: 05/02/2013

Preparer and/or Translator Certification *(To be completed and signed if Section 1 is prepared by a person other than the employee.)*

I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator:			Date *(mm/dd/yyyy)*:
Last Name *(Family Name)*	First Name *(Given Name)*		
Address *(Street Number and Name)*	City or Town	State	Zip Code

STOP ***Employer Completes Next Page*** STOP

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)

Employee Last Name, First Name and Middle Initial from Section 1:

List A Identity and Employment Authorization	**OR**	**List B** Identity	**AND**	**List C** Employment Authorization
[redacted]		cument Title:		Document Title:
		uing Authority:		Issuing Authority:
		cument Number:		Document Number:
		piration Date *(if any)(mm/dd/yyyy)*:		Expiration Date *(if any)(mm/dd/yyyy)*:
Document Number:				
Expiration Date *(if any)(mm/dd/yyyy)*:				
Document Title:				
Issuing Authority:				
Document Number:				
Expiration Date *(if any)(mm/dd/yyyy)*:				

3-D Barcode
Do Not Write in This Space

Certification

I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment *(mm/dd/yyyy)*: _____ *(See instructions for exemptions.)*

Signature of Employer or Authorized Representative	Date *(mm/dd/yyyy)*	Title of Employer or Authorized Representative	
Last Name *(Family Name)*	First Name *(Given Name)*	Employer's Business or Organization Name	
Employer's Business or Organization Address *(Street Number and Name)*	City or Town	State	Zip Code

Section 3. Reverification and Rehires *(To be completed and signed by employer or authorized representative.)*

A. New Name *(if applicable)* Last Name *(Family Name)*	First Name *(Given Name)*	Middle Initial	**B.** Date of Rehire *(if applicable) (mm/dd/yyyy)*:

C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.

Document Title:	Document Number:	Expiration Date *(if any)(mm/dd/yyyy)*:

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative:	Date *(mm/dd/yyyy)*:	Print Name of Employer or Authorized Representative:

Ohio Public Employees Retirement System

277 East Town Street, Columbus, Ohio 43215-4642
1-800-222-PERS (7377) www.opers.org

OPERS

Personal History Record

INSTRUCTIONS

1. As a public employee you are required to complete and file this Form within 30 days of commencing employment. Failure to do so may limit the options available to you as well as delay transactions. Please fill out the form in **blue or black ink.**
2. For elected officials: An elected official, or person appointed to a publicly elected position, who is not retired from an Ohio retirement system and does not have contributions on deposit with OPERS through previous elected service, has the option of contributing to OPERS or Social Security. Elected officials who choose OPERS membership are required to contribute to OPERS for all subsequent elected positions.
3. Be sure your date of birth and Social Security Number, which are used to identify your account, are entered correctly.
4. Sign the form in SECTION 4 - EMPLOYEE CERTIFICATION. DO NOT print or type.
5. The employer is required to complete SECTION 5 - EMPLOYER CERTIFICATION.
6. The employer is required to mail the *completed* form to OPERS at the above address immediately upon hire.

Section 1 - Personal Information

[redacted]

Last Name [redacted]

First Name [redacted]

MI [redacted]

Apt. Number

[redacted]

Section 2 - Current Employment Information

Job Title

CORRECTIONAL OFFICER

If this is an elected position or if you have been appointed to an elected position, provide date present elective service began.

05 02 2013

Please turn page to complete remainder of form

Section 3 - Prior Service Information

1. Have you previously worked in public employment in Ohio? Yes [ ] No [X] If "yes," give first date of public service:

If "yes," list employer(s)

2. Do you have previous public service for which OPERS contributions were not submitted? Yes [ ] No [X]
If "Yes" and you wish to request a determination relative to your non-contributing service, please provide OPERS with a completed *Certification of Unreported Public Service (Form AA)*.

3. Are you currently a member of, have you been a member of, or are you receiving a disability benefit from any of the following retirement systems? *(If applicable, check Refunded, Receiving a Disability Benefit or Receiving a Retirement Benefit.)*

	Yes	No	Refunded	Receiving a Disability Benefit	Receiving a Retirement Benefit
Ohio Public Employees Retirement Systems (OPERS)		X			
State Teachers Retirement Systems (STRS)		X			
School Employees Retirement System (SERS)		X			
Ohio Police and Fire Pension Fund (OP&F)		X			
State Highway Patrol Retirement System (HPRS)		X			
Cincinnati Retirement System (CRS)		X			

Section 4 - Employee Certification

I state that the information contained in this form is complete and true to the best of my knowledge and belief.

[redacted] (Do not print or type.)

Today's Date 05-02-13

Section 5 - Employer Certification

Employer Code [ ] - [ ] Start Date

Is this an elected position? Yes [ ] No [ ] If "yes," provide Employer Code for elected position [ ] - [ ]

Elected Position Title

Is this a law enforcement position? Yes [ ] No [ ] Full-Time [ ] Part-Time [ ]

I hereby certify that _____ began earning salary from which OPERS
Employee Name

retirement contributions are deducted with the above employer on the start date indicated above and the statements set forth are true and accurate as disclosed by the records of

_____
Signature of Certifying Officer

Print Certifying Officer's Name

Acknowledgement of receipt of Auditor of State fraud-reporting system information

Pursuant to Ohio Revised Code 117.103(B)(1), a public office shall provide information about the Ohio fraud-reporting system and the means of reporting fraud to each new employee upon employment with the public office.

Each new employee has thirty days after beginning employment to confirm receipt of this information.

By signing below you are acknowledging (insert public employer) provided you information about the fraud-reporting system as described by Section 117.103(A) of the Revised Code, and that you read and understand the information provided. You are also acknowledging you have received and read the information regarding Section 124.341 of the Revised Code and the protections you are provided as a classified or unclassified employee if you use the before-mentioned fraud-reporting system.

I [redacted], have read the information provided by my employer regarding the fraud-reporting system operated by the Ohio Auditor of State's office. I further state that the undersigned signature acknowledges receipt of this information.

[redacted] CORRECTIONAL OFFICER
PRINT NAME, TITLE, AND DEPARTMENT RICHLAND COUNTY SHERIFF

[redacted] 05-02-13
DATE

OHIO DEFERRED
COMPENSATION

APPLICANT SCHEDULE C

Department Submitting Schedule C: _____

Full Name of Applicant: [redacted]

I understand that, as a condition of driving a county-owned/leased vehicle or my personal vehicle on County business, I must have a current and valid Ohio Driver License and an acceptable driving record, which meets the standards of the County's auto liability insurer. I further understand that I may be required to provide proof of personal auto liability insurance that meets the requirements of the State of Ohio and existing County minimum requirements. I also understand that I may be required to provide a copy of the Bureau of Motor Vehicles report showing my driving record for all states in which I have resided during the last three (3)-year period.

QUESTIONNAIRE:

During the previous thirty-six month (3-year) period, have you been involved in any of the following:

1. Had automobile insurance rejected, cancelled, refused or been in a high-risk insurance program?

   NO

2. Been involved in any accidents, either at-fault or not-at-fault?

   NO

3. Been arrested for any traffic-related incidents?

   NO

4. Had any traffic violations other than overtime parking?

   NO

Please provide all details including date and location for any question answered "yes".

I understand that, by giving incorrect information or by omitting information, I am falsifying my application; and, therefore, subject to dismissal if hired. I further agree that the County, as my employer, may check my driving record at any time. I further agree to report to my supervisor any accidents, arrests, violations, or cancellation of personal insurance within twenty-four (24) hours or the next working day after they occur and prior to driving any vehicle on behalf of the County.

Prior to driving on behalf of the County, I acknowledge that I am familiar with the County resolution requiring driving suspensions for a poor driving record. I understand all of the above and agree to all requirements. I further attest that all statements made by me in this report are true to the best of my knowledge.

X [redacted] _____ 05-02-2013

Risk M[redacted]ule C

MANSFIELD CITY INCOME TAX

I hereby authorize the Richland County Auditor to make the proper deduction for the Mansfield City Income Tax from my compensation beginning with my first pay period.

[redacted]

05-02-2013
DATE

CORRECTIONAL OFFICER
POSITION

[redacted]

Notice to Employee

1. For state purposes, an individual may claim only natural dependency exemptions. This includes the taxpayer, spouse and each dependent. Dependents are the same as defined in the Internal Revenue Code and as claimed in the taxpayer's federal income tax return for the taxable year, or which the taxpayer would have been permitted to claim had the taxpayer filed such a return.

2. You may file a new certificate at any time if the number of your exempts ***increases.***

   You must file a new certificate within 10 days if the number of exemptions previously claimed by you ***decreases*** because:
   (a) Your spouse for whom you have been claiming exemption is divorced or legally separated, or claims her (or his) own exemption on a separate certificate.
   (b) The support of a dependent for whom you claimed exemption is taken over by someone else.
   (c) You find that a dependent for whom you claimed exemption must be dropped for federal purposes.

   The death of a spouse or a dependent does not affect your withholding until the next year but requires the filing of a new certificate. If possible, file a new certificate by Dec. 1st of the year in which the death occurs.

   For further information, consult the Ohio Department of Taxation, Income Tax Division, or your employer.

3. If you expect to owe more Ohio income tax than will be withheld, you may claim a smaller number of exemptions; or under an agreement with your employer, you may have an additional amount withheld each pay period.

4. A married couple with both spouses working and filing a joint return will, in many cases, be required to file an individual estimated income tax form IT 1040ES even though Ohio income tax is being withheld from their wages. This result may occur because the tax on their combined income will be greater than the sum of the taxes withheld from the husband's wages and the wife's wages. This requirement to file an individual estimated income tax form IT 1040ES may also apply to an individual who has two jobs, both of which are subject to withholding. In lieu of filing the individual estimated income tax form IT 1040ES, the individual may provide for additional withholding with his employer by using line 5.

please detach here

Print Form

Employee Notification Form

On Date: 05-02-2013
Date of Employment/Termination/etc.

RE: [redacted]
Employee Name

Department: SHERIFF
Employee Department Location

To: Richland County IT

Please note that the above listed employee is considered:

- [x] New Employee
- [ ] Retired Employee
- [ ] Resigned Employee
- [ ] Terminated Employee

Please change your records accordingly to show this change for security purposes via any and all applications.

Thank You.

Erik Spiker 5/2/13.

Supervisor Signature Date

Richland County

Acknowledgement of Electronic Data Utilization Standards Policy and HIPAA Policy & Procedure for Security of Protected Health Information

This form is used to acknowledge receipt of and compliance with the County's Electronic Data Utilization Standards Policy and the HIPAA Policy & Procedure for Security of Protected Health Information.

Procedure:

Complete the following steps:

1. Read the entire Electronic Data Utilization Standards Policy and HIPAA Policy & Procedure for Security of Protected Health Information.

2. Sign and Date this form in the spaces provided below.

3. Return this page only to the Human Resources Manager.

Signature:

By signing below, I agree to the following terms:

1. I have received and read a copy of the Electronic Data Utilization Standards Policy and HIPAA Policy & Procedure for Security of Protected Health Information and understand and agree to the same.

2. I understand and agree that any software and hardware devices provided to me by the County remain the property of the County.

3. I understand and agree that I am not to modify, alter, or upgrade any software programs or hardware devices provided to me by the organization without the permission of the County.

4. I understand and agree that I shall not copy, duplicate (except for backup purposes as part of my job), or allow anyone else to copy or duplicate any software in accordance with applicable copyright and other intellectual property laws.

5. I understand and agree that upon termination of my employment with the County, for any reason, I shall immediately return to the County any and all of the originals and copies of any and all software, computer materials, and/or computer equipment that I may have received from the County that is either in my possession or otherwise directly or indirectly under my care.

6. I understand and agree that I must make reasonable efforts to protect all County-provided software and hardware devices from theft and physical damage.

[redacted]

E[redacted]

[redacted]

Employee's Printed Name

CORRECTION OFFICER

Employee Title

05-07-2013

Date

RICHLAND COUNTY

County / Location

Internet Security Request Form

Department: (please check one)

- ☐ Auditor
- ☐ Auto Title
- ☐ Board of Elections
- ☐ Central Services
- ☐ Codes & Permits
- ☐ Commissioners
- ☐ Coroner
- ☐ EMA/911
- ☐ Law Library
- ☐ Maintenance
- ☐ Prosecutor
- ☐ Recorder
- ☐ Regional Planning
- ☒ Sheriff
- ☐ Tax Map
- ☐ Treasurer

User: [redacted]

What type of access? (Check one)

☐ **Filtered** Blocking anything to do with Destructive behavior: Criminal Activity, Hacking, Illegal Drugs, Intolerance & Hate, Phishing & Fraud, Tasteless & Offensive, Terrorism, Violence, Weapons, Spam.. Sexual content: Adult, Intimate Apparel & Swimsuit, Porn.. Gaming: Gambling, Game Playing.. Commerce: Advertisements & Pop-Ups, Auctions, Job Search & Career Development.. Communication & Technology: Chat, Downloads, Hosting Sites, Proxies, Peer-to-Peer, Social Networking, Spyware.. Leisure: Alcohol & Tobacco, Comics, Humor, & Jokes, Personals & Dating.. Knowledge: Sex Education.. Other: Uncategorized

☐ **Unfiltered** No sites blocked

☒ **Restricted** Specified sites only

Approved List for All Users
americasveba.com
anthem.com
caremark.com
codes.ohio.gov
friendsoffice.com
landaccess.com
mansfieldnewsjournal.com
rcengineer.com
richlandcountyauditor.org
richlandcountyoh.us
wmfd.com

If a restricted list is needed please provide the allowed web sites including any embedded pages needed:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

Please approve this form.

Thank You.

Supervisor Signature

5/2/13
Date

Print Form

Application Security Request Form

Date: 05-02-2013

RE: Add additional security clearance

To: Information Systems, County IT

For Employee: [redacted]

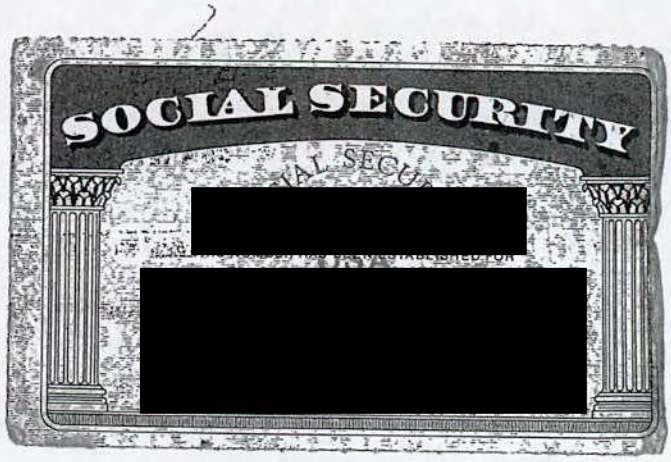
Requested Application Name(s): _____
(example: IAS/ FinX / PayX)

Please list the additional screen names that [redacted] wishes to have added:
(Employee Name)

Please approve this form.

Thank You.

Supervisor Signature



[redacted]

Richland County Sheriff's Office
597 Park Avenue East
Mansfield, OH 44905

I acknowledge that I have been issued a signed copy of my Oath of Office and a signed copy of my job description for the position of Correction Officer.

[redacted]
Name printed

[redacted]
N

5-3-2013
Date

Lt. Chris Blunk
Witness printed

Witness signed

OATH OF OFFICE

STATE OF OHIO
COUNTY OF RICHLAND

I DO SOLEMNLY SWEAR OR AFFIRM THAT I WILL SUPPORT AND ABIDE BY THE CONSTITUTION OF THE UNITED STATES OF AMERICA, THE CONSTITUTION AND LAWS OF THE STATE OF OHIO, AND THE RULES AND REGULATIONS OF THE RICHLAND COUNTY SHERIFF'S OFFICE AND THAT I WILL FAITHFULLY DISCHARGE THE DUTIES OF CORRECTION OFFICER, TO WHICH I HAVE BEEN APPOINTED ACCORDING TO LAW AND TO THE BEST OF MY ABILITIES.

I UNDERSTAND THAT MY FAILURE TO COMPLY WITH THE PROVISIONS OF THIS OATH, WITH OR WITHOUT FAULT OF MY OWN, IS CAUSE FOR TERMINATION.

I HAVE NOT PAID, NOR HAVE I OFFERED OR PROMISED TO PAY, ANY MONEY OR OTHER THING OF VALUE TO ANY PERSON, FIRM OR CORPORATION FOR THE USE OF INFLUENCE TO PROCURE MY APPOINTMENT TO THIS POSITION.

[redacted]

PRINTED NAME OF MEMBER

[redacted]

SIG[redacted]

SWORN TO AND SUBSCRIBED BEFORE ME, A NOTARY PUBLIC, IN AND FOR THE COUNTY OF RICHLAND, THIS 2nd DAY OF May, 2013.

Bonnie Miller.
NOTARY PUBLIC

SWORN TO AND SUBSCRIBED BEFORE ME, SHERIFF, IN AND FOR THE COUNTY OF RICHLAND, THIS 2nd DAY OF May, 2013.

Sheriff J. Steve Sheldon
J. STEVE SHELDON,
SHERIFF, RICHLAND COUNTY

NOTICE: A MEMBER WHO VIOLATES A SWORN OATH IS SUBJECT TO IMMEDIATE TERMINATION, AS WELL AS THE POSSIBILITY OF BEING CHARGED WITH VIOLATIONS OF CRIMINAL STATUTES.

Richland County Sheriff's Office
Job Description

Job Title: Correction Officer

Division: Corrections

Bargaining Unit: FOP/OLC

Employment Status: Full-Time

Work Hours: Variable, Determined by FOP Contract

Civil Service Status: Classified

FLSA Status: Non-exempt

Probation: One year

Reports to: Correction Sergeant, Correction Lieutenant

Job Summary: Under general direction, supervises inmates and attends to their safety and well-being, and maintains security in the Richland County Jail

Minimum Qualifications:
United States Citizen
High School Diploma or G.E.D
Ohio Driver License

Essential Functions:

Regular and predictable attendance

Arrive on time for shift, be dependable, and maintain good attendance records

Work in a 24 hour, 7 days a week operation in a variety of weather conditions

Work overtime as necessary and directed

Maintain the trust, faith and confidence of the Sheriff

Support and enforce the administrative and operational policies of the Sheriff

Make decisions aligned with the mission, goals, and directives of the Sheriff

Demonstrate appropriate respect for co-workers and supervisors

Maintain confidentiality in the performance of duties

Maintain a harmonious work relationship with other personnel and agencies

Ensure the safety of inmates by protecting them from harm and threats

Use physical force to control inmates

Qualify with firearms as required and defensive weapons

Work independent of direct supervision

Use directed and self-directed work time in an efficient and effective manner

Perform jobs, duties, tasks and assignments in a competent and proficient manner

Be physically, mentally, medically and psychologically fit to perform duties

Duties and Responsibilities:

Works under general supervision and requires considerable knowledge of custody, safety and security measures for detention of adult inmates in a controlled environment in order to maintain discipline, order and security.

Seeks information/advice from supervisors as appropriate and provides pertinent information to his/her supervisor and relieving shift officers

Conduct themselves professionally and support organization's mission and treat inmates in a firm, fair and consistent manner

Develop and maintain professional rapport with inmates

Communicate facility rules and expectations to inmates and respond to questions

Ensure inmates have access to grievance forms and kites

Make prudent and sound decisions and diffuse problem situations

Contribute to the efficiency and effectiveness of the facility

Uphold the highest standards of security and safety

Works rotation posts and assignments to maintain security on assigned area

Directs all inmate activity in assigned areas of the facility to include dayrooms, showers, cells, living and recreation areas

Attends meetings and committees and provides feedback

Responds to the need of staff and the concerns of inmates

Maintain discipline and order of inmates

Monitors and operates security controls and or computers

Open security doors between pods, cells, perimeter doors and security areas

Monitors and responds accordingly to alarms and medical emergencies

Utilize computers and monitor surveillance equipment as required by assigned post

Directs inmate trustees and work crews to ensure quality work and security

Direct, secure and supervise inmates at a medical center/office outside of the jail.

Maintain security internally as well as the perimeter, sally port and visitation area

Operates a county car or van in accordance with the county driving policy

Operates a county car or van under adverse and stressful conditions

Operates a county vehicle to transport inmates as required

Completes and maintains electronic post logs, JAMIN information and reports

Document information accurately, concisely and in proper grammar

Count inmates and then report them in accordance with count procedures

Distribute food trays to inmates at meal time and coordinates with the kitchen

Controls and distributes all incoming mail to proper inmates

Completes necessary paperwork as required in the performance of duties

Complete personal observation rounds inside the pods as required

Ensure orderly movements of inmates throughout the facility

Attend a corrections academy within the first year of employment

Successfully pass the OPOTA Corrections Officer Test

Successfully complete a 12 week field training corrections training program

Enforce inmate rules, regulations, and procedures and polices

Visually and tactfully detect contraband per facility rules and regulations

Electronically write incident reports and initiate inmate rule violations as needed

Report any unusual circumstances and information to supervision

Identify and address safety and security problems

Visually inspect and assure assigned areas are clean, safe and secure

Ensure cleanliness of the facility by directing inmates to clean

Conduct searches and inventories of inmate personal and issued property

Encouraged to participate on committees

Prevent escapes or incidents which threaten the security or safety of the facility, inmates, staff or the general public which includes, when necessary, using physical force, unarmed self-defense, firearms (if authorized to carry), or other force to detain or secure inmates.

Review and comply with jail policies and procedures and minimum jail standards

Comply with Standard Operating Procedures and County Policies and Procedures

Read and consistently follow post orders

Take only appropriate and/or reasonable risks; understand the importance of boundaries

Attends training as requested and directed

Maintains uniform and equipment issued by the department

Testify in depositions, hearings and trials

Requisite Job Knowledge:

Correctional practices and procedures
Local, state and federal laws
Administrative, criminal, civil and constitutional law
Rules and regulations, policies and procedures
Standard operating procedures
Current labor contracts

Equipment Used:

Motor vehicle
Portable hand unit or mobile radio
Computer, fax, copy machine and telephone
Firearms as required for job
Body armor, handcuffs, chemical agents, electronic restraint devices
Video recording devices

Job Description Approval:

I have reviewed this job description and understand that it reflects the major work requirements, essential job functions and tasks for which I am responsible. I understand that this job description is not all inclusive and that if I have questions, I can contact my supervisor for clarification. I acknowledge that I must follow all orders given to me by a superior officer unless the order is illegal, immoral or unethical.

[redacted] 5-2-13

Employee Printed Name Date

[redacted]

Er

I have issued this job description to the employee.

Supervisor Signature 5-2-13

Date

This job description currently reflects the needed skills and abilities required to perform this position.

MAJ 05-02-13

Administrator Signature Date

Aaron R. Becker, Psy. D.
Psychologist

Major Dale Fortney
Richland County Sheriff's Office
597 Park Avenue East
Mansfield, OH 44905

Re: [redacted] 4/18/2013

Dear Major Fortney,

[redacted] is a 44-year-old male referred by your office for evaluation to determine his appropriateness for hire in the position of corrections officer. Mr. [redacted] is aware of lack of confidentiality, showed proof of identification, and was given a clinical interview and personality inventory.

[redacted] states that he was referred for evaluation to see if he can handle the situations as a corrections officer. He has 10 years previous experience as a corrections officer in North Carolina in a minimum security state facility.

Prior to moving to Ohio in January 2013, at which time he obtained employment at MTD and part-time at Schmidt Security, Mr. [redacted] was employed as a security guard of a Marine Corps base in North Carolina for three years. In this position he reviewed alarms and verified names of people checking in. He left this position to move to Ohio. Prior to that he was employed as a civilian military police officer for 2 months. This job ended when he was unable to pass the academic portion of the training. Mr. [redacted] believes that he will have no difficulties completing any training needed for the position as a corrections officer with Richland County because he has recently separated from his wife and has more time and is more dedicated to study and academic pursuits. Prior to that he was employed for 10 years as a corrections officer with the state of North Carolina in a minimum security facility. He left this position because he was given the opportunity for the law enforcement job on the military base. He reported having no difficulties in his position as corrections officer. Prior to that he was employed as a United States Marine for 12 years. He has been in infantry and spent 5 years on security details at embassies and aboard ships. During his 12 years with the Marine Corps he was on three 6 month deployments and one 3 month deployment on various aircraft carriers, guarding some embassies, and one deployment as an infantryman in Desert Storm.

Mr. [redacted] was in combat situations in Desert Storm, though he never fired a weapon. [redacted] Mr. [redacted] was ultimately Honorably Discharged from the Marine Corps because he failed to continue to be promoted. He is applying for the position as corrections officer and he believes that this is what he was called to do. His strengths are his communication skills, people skills, and his extensive background in corrections and security. He recognizes the need to do each situation independently and

not allow negative emotions from a past situation to carry over into another. He recognizes that there is always room to improve, especially in terms of how to read people and situations.

[redacted]

Mr. [redacted] graduated from high school and has attended no formal postsecondary education. He did receive a corrections officer certification in North Carolina and was also certified for emergency medical dispatch. He has gone through numerous training exercises in his careers in the military and 10 years of corrections in North Carolina.

[redacted]

[redacted]

Results of this evaluation suggest that Mr. [redacted] can be recommended for hire in the position of corrections officer with Richland County Sheriff's Office with no reservations.

Sincerely,

Aaron R. Becker, Psy.D.
Psychologist
OH #5817
Document Produced: 5/1/2013

MedCentral Health System WorkAble

1750 West Fourth Street (419) 526-8444
Mansfield OH 44906 (419) 529-8617

FACSIMILE TRANSMITTAL SHEET

TO: Major Dale Fortney	FAX NUMBER: (419) 522-8153
TO:	FAX NUMBER:
TO:	FAX NUMBER:
DATE:	TOTAL NO. OF PAGES INCLUDING COVER:
FROM: WorkAble Business Office	SENDER'S REFERENCE NUMBER: 419-526-8444
RE: [redacted]	SENDER'S FAX NUMBER: 419-529-8617

ADDITIONAL NOTES:

MAY INCLUDE THE FOLLOWING:

_____ FROI- Coded	_____ Progress Notes
_____ ER Report	_____ Diagnostics
_____ ER Dictation	_____ RTW Status
_____ Exam Forms	_____ W/C Form
_____ DOT Exam/Card	_____ Other

The information contained in this facsimile may be doctor-patient privileged and confidential information intended only for the use of the individual or entry named above. If the reader of this message is not intended recipient or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone (419-526-8444) and return the original message to us at the below address via the United States Postal Service.

J. Steve Sheldon, Sheriff

Richland County Sheriff's Office & Civil Division
597 Park Avenue East • 2nd Floor
Mansfield, Ohio 44905
Phone: 419-774-5881 Fax: 419-522-8153
Civil Office: 419-774-3570

RICHLAND COUNTY SHERIFF'S OFFICE

CONDITIONAL OFFER OF PROBATIONARY EMPLOYMENT

Dear [redacted]

This letter is to advise you that your application for employment with the Richland County Sheriff's Office for the position of Correction Officer has been processed.

You have successfully completed the initial phases of the employment process. You must now successfully complete a psychological examination, physical examination, and a drug screen examination. As a condition of employment, you must successfully meet the minimum employment standards for a Correction Officer and required training including, but not limited to the Ohio Peace Officer Training Council Basic Corrections Academy, the Richland County Sheriff's Office Corrections Field Training Officer program and prescribed in-service training requirements. Following successful completion and review of the aforementioned inquiries, you will be informed by letter of your employment status.

Thank you for your interest in employment with the Richland County Sheriff's Office. Upon successful completion of the employment process, your application will be presented to the Sheriff who will make the final determination as to your suitability for employment. This conditional offer of employment shall remain valid and in effect for one year from the effective date of this agreement, provided however, this offer shall be immediately withdrawn upon applicant's failure to meet any one of the above terms and conditions.

ACKNOWLEDGEMENT AND ACCEPTANCE OF OFFER

I hereby acknowledge and accept the terms and conditions provided above. I exercise this acceptance of my own free will, in good faith and with the understanding that I will be employed in the position of Correction Officer upon satisfactory completion of the conditions.

[redacted]
A

4-18-13
Date

J Steve Sheldon
Sheriff

04-18-13
Date

Richland County Jail
73 East Second Street • Mansfield, Ohio 44902
Phone: 419-774-5678 Fax: 419-774-5646

WITH GOD ALL THINGS ARE POSSIBLE
STATE MOTTO

670
650
720
2040 / 3 = 680

#2 of 2

Richland County Sheriff's Office
Oral Interview Questions
Corrections Entry Level

Appendix I

Assessors Name: MAJ. DALE FORTNEY Candidates Name: [redacted]

Questions	Poor	Average	Excellent	Total
1. Give us a brief idea of what a good corrections officer should be in the way of character, knowledge and physical condition. Answer here:	40 50 60 70	(80)	90 100	
2. What would be the single most important reason to hire you? Answer here:	40 50 60 70	(80)	90 100	
3. I suppose that if I could change one thing about my life I would: Answer here:	40 50 60	(70)	80 90 100	
4. Tell me about a particular challenge in your life and how you overcame it. Answer here:	40 50 60	(70)	80 90 100	

Does candidate mention any of the following: (circle all that apply)

1. Corrections officers live a very public life.
2. Activities must be above reproach.
3. Their careers are bound by a continuing search for knowledge.
4. They must maintain good physical fitness in order to command respect.
5. Even temperament.
6. Loyalty

KNOWLEDGE - KNOW RULES, ENFORCE RULES
POSITIVE ATTITUDE
PHYSICAL CONDITION - BE ABLE TO HANDLE SELF + JOB

2. Should indicate evidence of preparation to perform the job.
2. Should indicate a desire to work with people.
3. Should be considered a plus if the candidate obtained education and training to prepare for the job at his own expense and initiative.

I HAVE 10 YEARS CORRECTION BACKGROUND AND 5 YEARS IN SECURITY. CAN HELP YOU AND COMMUNITY.

BETTER TO STAY IN THE MILITARY. WAS DISAPPOINTED WHEN I COULDN'T STAY.

Should express pride without being boastful. Should show resourcefulness, creativity or having conquered certain fears.

GOING THRU DIVORCE AND MOVED FROM NORTH CAROLINA
FINDING JOB TO BETTER MYSELF AND MY SON

Richland County Sheriff's Office
Oral Interview Questions
Corrections Entry Level

Appendix I

Questions	Poor		Average		Excellent		Total
5. Why do you want to work for the Richland County Sheriff's Office? And if hired where do you see yourself in 5 years, 10 years?	40	50	60	70	(80)	90	100

Answer here: KNOWLEDGE OF CORRECTIONS CAN HELP OUT SHERIFF'S OFFICE WITH KNOWLEDGE
5 YEARS – BE HERE IF NOT MOVED UP MAYBE F.T.O.
10 YEARS – TRYING TO MOVE UP AND BETTER MYSELF

6 Do you think you could use deadly force on another human being?	40	50	60	(70)	80	90	100

Answer here: YES, AS A LAST RESORT
TRY TO USE LEAST AMOUNT OF FORCE NECESS

7. Are there any things about you that we should be concerned about?	40	50	60	70	(80)	90	100

Answer here: NO SIR PRETTY GOOD HEALTH
I TRY TO BRING A POSITIVE ATTITUDE TO WORK EVERY DAY.

8. Who would you rather please in your work, your superior officer or the public?	40	50	60	(70)	80	90	100

Answer here: TWO-FOLD HAVE TO PLEASE SUPERVISOR
BUT YOU WORK FOR THE PUBLIC.
YOU HAVE TO FOLLOW THE RULES.

Questions	Poor		Average		Excellent		Total
9. How will your life change if you become a corrections officer?	40	50	60	(70)	80	90	100

Answer here: CHANGE FOR THE BETTER
THE JOB I HAVE NOW IS NOT WHAT I'm LOOKING
GIVE ME A SENSE OF ACCOMPLISHMENT.

Candidate should respond with certainty that he has set goals in is on a path to attain those goals.

Total of All Columns: 670

Average Score: 74.44

To derive the average score add all columns and divide by the number of questions asked.

Any additional comments:

Richland County Sheriff's Office
Oral Interview Questions
Corrections Entry Level

(2)

Appendix I

Assessors Name: Lt. Chris Blank Candidates Name: [redacted]

Questions	Poor		Average		Excellent		Total
1. Give us a brief idea of what a good corrections officer should be in the way of character, knowledge and physical condition.	40	50	60	(70)	80	90	100
2. What would be the single most important reason to hire you?	40	50	60	(70)	80	90	100
3. I suppose that if I could change one thing about my life I would:	40	50	60	(70)	80	90	100
4. Tell me about a particular challenge in your life and how you overcame it.	40	50	(60)	70	80	90	100

1. Answer here: c- positive attitude.
k- know rules, be able to enforce, consistent
p- handle yourself + help others @ any time. if someone calls for assistance you should be able to assist.

Does candidate mention any of the following: (circle all that apply)

1. Corrections officers live a very public life.
2. Activities must be above reproach.
3. Their careers are bound by a continuing search for knowledge.
4. They must maintain good physical fitness in order to command respect.
5. Even temperament.
6. Loyalty

2. Answer here: 10 years correction background; well knowledgable of Corr. Help community w/ knowledge.

1. Should indicate evidence of preparation to perform the job.
2. Should indicate a desire to work with people.
3. Should be considered a plus if the candidate obtained education and training to prepare for the job at his own expense and initiative.

Apps. @ Abray, Schmit, MCM Security.

3. Answer here: Would have been better to stay in the Marine Corp. I was disappointed I wasn't able to stay in.

4. Answer here: Right now going through a divorce. I am working the best I can. I am trying to support my son. Trying to better myself.

Should express pride without being boastful. Should show resourcefulness, creativity or having conquered certain fears.

70

Stay & be there.

Richland County Sheriff's Office
Oral Interview Questions
Corrections Entry Level

Appendix I

Questions	Poor		Average		Excellent		Total
5. Why do you want to work for the Richland County Sheriff's Office? And if hired where do you see yourself in 5 years, 10 years? (1) knowledge of corr. I can bring alot to the Jail w/ my knowledge. Be able to support w/ that knowledge (2) be here @ jail, maybe an FTO to mentor new officers. (3) move up the ranks, if possible	40	50	60	70	(80)	90	100
6 Do you think you could use deadly force on another human being? Yes. As a last resort. Use least amount of force possible	40	50	60	(70)	80	90	100
7. Are there any things about you that we should be concerned about? No sir. Good health. Try to bring a positive attitude to work everyday. +	40	50	60	70	(80)	90	100
8. Who would you rather please in your work, your superior officer or the public? It is a two-fold. Have to please supervisor. + public You have to follow rules that are given. Follow the rules.	40	50	60	70	(80)	90	100

Questions	Poor		Average		Excellent		Total
9. How will your life change if you become a corrections officer? Change for the better. Job I have now is not what I am used to. More stability. Give me a sense of accomplishment.	40	50	60	(70)	80	90	100

Answer here:

Candidate should respond with certainty that he has set goals in is on a path to attain those goals.

Total of All Columns: (650)

Average Score:

To derive the average score add all columns and divide by the number of questions asked. _____

Any additional comments:

380
270
650

2nd

Richland County Sheriff's Office
Oral Interview Questions
Corrections Entry Level

Appendix I

Assessors Name: Sgt. M Young

Candidates Nam [redacted]

Questions	Poor		Average		Excellent		Total
1. Give us a brief idea of what a good corrections officer should be in the way of character, knowledge and physical condition.	40	50	60	70	80	(90)	100
2. What would be the single most important reason to hire you?	40	50	60	70	80	(90)	100
3. I suppose that if I could change one thing about my life I would:	40	50	60	70	(80)	90	100
4. Tell me about a particular challenge in your life and how you overcame it.	40	50	60	70	(80)	90	100

Answer here:

Knowledge - know rules & enforcement. daily

attitude - positive. leave home @ home work @ work.

Physical - handle self & help others @ anytime assistance call be there & help.

Does candidate mention any of the following: (circle all that apply)

1. Corrections officers live a very public life.
2. Activities must be above reproach.
3. Their careers are bound by a continuing search for knowledge.
4. They must maintain good physical fitness in order to command respect.
5. Even temperament.
6. Loyalty

Answer here:

10 yrs. corrections back-ground. 5 yrs. military well knowledgable w/ corrections.

1. Should indicate evidence of preparation to perform the job.
2. Should indicate a desire to work with people.
3. Should be considered a plus if the candidate obtained education and training to prepare for the job at his own expense and initiative.

Answer here:

Stay in military loved ~~[illegible]~~ very disappointed couldn't stay in.

Answer here:

Divorce right now got a job to better self & take care of son.

Should express pride without being boastful. Should show resourcefulness, creativity or having conquered certain fears.

Richland County Sheriff's Office
Oral Interview Questions
Corrections Entry Level

Appendix I

Questions	Poor		Average		Excellent			Total
5. Why do you want to work for the Richland County Sheriff's Office? And if hired where do you see yourself in 5 years, 10 years?	40	50	60	70	(80)	90	100	
Answer here: Knowledge of corrections, can bring a lot to the department w/ his knowledge to help out. Here 5 yrs. move up to FTO. 10 yrs. = better self & move up								
6 Do you think you could use deadly force on another human being?	40	50	60	70	(80)	90	100	
Answer here: Yes, as last resort. Least amount of force possible.								
7. Are there any things about you that we should be concerned about?	40	50	60	(70)	80	90	100	
Answer here: No sir, pretty good health. Bring positive attitude everyday to work.								
8. Who would you rather please in your work, your superior officer or the public?	40	50	60	(70)	80	90	100	
Answer here: Please superior but they have to follow rules.								

Questions	Poor		Average		Excellent			Total
9. How will your life change if you become a corrections officer?	40	50	60	70	(80)	90	100	
Answer here: for the better. more stability. a sense of accomplishment.								

Candidate should respond with certainty that he has set goals in is on a path to attain those goals.

Total of All Columns: 720

Average Score: 80

To derive the average score add all columns and divide by the number of questions asked.

Any additional comments:

RICHLAND COUNTY SHERIFF'S OFFICE
J. STEVE SHELDON, SHERIFF
597 Park Avenue East
Mansfield, Ohio 44905

TRUTH VERIFICATION RELEASE FORMS

I [redacted] DO HEREBY VOLUNTARILY, WITHOUT DURESS, COERCION, PROMISE, REWARD OR IMMUNITY, SUBMIT TO EXAMINATION BY THE POLYGRAPH OR VOICE STRESS ANALYSIS TRUTH VERIFICATION TECHNIQUE, TO HEARBY RELEASE, ABSOLVE AND FOR EVER HOLD HARMLESS, THE RICHLAND COUNTY SHERIFFS OFFICE, ITS SERVANTS, AGENTS, AND ANYONE ACTING ON ITS BEHALF, FROM ANY AND ALL CLAIMS, DEMANDS, OR OTHER DAMAGES FROM ANY MATTER, ACT, OR THING ARISING OUT OF AFORESAID EXAMINATION. I UNDERSTAND THAT THIS EXAMINATION MAY BE VIDEO TAPED AND I RELEASE INTO POSSESSION OF THE RICHLAND COUNTY SHERIFFS OFFICE ALL MATERIALS, RECORDINGS, AND ALL OTHER DOCUMENTS FOR THE PURPOSE OF TESTIMONY AND OR TRAINING.

[redacted]

04/16/13
DATE

WITNESSED:

CVSA LOG: Statistic Sheet.

	TEST #	TEST#	TEST#
1. Date: 04/16/13			
2. Time began 0945			
3. Case No. 1			
4. Examiner Boyko			
5. Subject [redacted]			
6. Req. by			
7. Outside agency			
8. Type of test			
Victim			
Suspect			
Witness			
Complainant			
Pre-employment ✓			
I.A.			
9. Test medium			
Live			
Audio tape			
Video tape			
Chart			
10. Offense Pre-Employ			
11. Deception			
Indicated			
Not indicated ✓			
12. Verification:			
Confessed			
Other evidence			
13. Confession			
Before test			
After test			
Changed statement			
14. Cold call			
Concurred			
Non-concurrence			
15. Time ended 1000			
16. CVSA unit # 1			
17. Test format			
MZOC			
ZOC			
G. S. ✓			
STRUCTURED			

Mike DeWine
Ohio Attorney General

April 12, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO BCI&I RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006

The Ohio Bureau of Criminal Identification and Investigation (BCI&I) has completed a criminal history record check on the applicant listed below. Based upon information furnished by your agency, BCI&I has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]
BCI Completion Date: **April 10, 2013**
Reason Fingerprinted: **Law Enforcement**
Agency ID: **CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
Telephone: (740) 845-2000
Facsimile: (740) 845-2020

An Internationally Certified Law Enforcement Agency
www.ag.state.oh.us

Mike DeWine
Ohio Attorney General

April 12, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO FBI RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006
ICN: E2013101000000131367

The Federal Bureau of Investigation (FBI) has completed a criminal history record check on the applicant listed below. Based upon the information furnished by your agency, the FBI has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]

FBI Completion Date: **April 11, 2013**
Reason Fingerprinted: **LAW**
Agency ID: **CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
Telephone: (740) 845-2000
Facsimile: (740) 845-2020

An Internationally Certified Law Enforcement Agency
www.ag.state.oh.us

RICHLAND COUNTY SHERIFF'S OFFICE

PERSONAL HISTORY QUESTIONNAIRE

A. APPLICANT IDENTIFICATION: Information provided in this section is used for identification purposes only.

1. NAME: [redacted]

[redacted]

11. EYE COLOR BLUE HAIR COLOR: BROWN

12. SCARS, TATTOOS, OR OTHER DISTINGUISHING MARKS: SCAR ON (R) HAND

B. **RESIDENCES: List all addresses where you have lived during the past ten years, beginning with present address. List date by month and year, attach extra page if necessary.**

DATE FROM:	DATE TO:	ADDRESS
[redacted]		

C. **WORK HISTORY: Beginning with your present or most recent job, list all employment held for the past ten years, including part-time, temporary or seasonal employment. Include all periods of employment.**

1. FROM: 2-2-13 TO: PRESENT EMPLOYER SCHMIDT SECURITY PRO

ADDRESS: 241 MANSFIELD INDUSTRIAL PARKWAY MANSFIELD, OH 44903

PHONE: 419-526-4040 JOB TITLE: SECURITY GUARD

DUTIES: TOUR AREA LOOK FOR FIRE, PROVID SECURITY

SUPERVISOR: PHIL SMITH NAME OF CO-WORKER: GARY LEWIS

REASON FOR LEAVING: STILL EMPLOYED

2. FROM: 1-21-2013 TO: PRESENT EMPLOYER SPHERION STAFFING MTD PRODUCTS

ADDRESS: 305 MANSFIELD AVE SHELBY OH 44875

PHONE: 419-342-6455 JOB TITLE: LABOR

DUTIES: PRODUCTION LINE

SUPERVISOR: CLINT KNIGHT NAME OF CO-WORKER:

REASON FOR LEAVING: STILL EMPLOYED

3. FROM: 8-14-2009 TO: 12-19-2012 EMPLOYER HOMELAND SECURITY SOLUTIONS INC.

ADDRESS: 3130 A NASA DR HAMPTON, VA 23666

PHONE: 757-597-1851 VERIFY PERSONAL JOB TITLE: ALARM MONITOR

DUTIES: MONITOR ALARMS, PUT CALLS INTO DISPATCH TO POLICE, FIRE

SUPERVISOR: KATHERINE JAMES NAME OF CO-WORKER: MARGARET LESLIE-LUN

REASON FOR LEAVING: MOVED TO OHIO FOR FAMILY REASONS.

4. FROM: 4-29-2009 TO: 6-10-2009 EMPLOYER MARINE CORPS CIVILIAN POLICE

ADDRESS: Bldg 3 CAMP LEJEUNE NC 28542

PHONE: 910-451-4688 JOB TITLE: STUDENT

DUTIES: STUDENT

SUPERVISOR: TIM ADKERS NAME OF CO-WORKER: JOSE MALDANADO

REASON FOR LEAVING: ACADEMICALLY

5. FROM: 2-9-1999 TO: 4-8-2009 EMPLOYER NORTH CAROLINA Dept. OF CORRECTIONS

ADDRESS: PO BOX 780 KENANSVILLE, NC 28349

PHONE: 910-296-0315 JOB TITLE: CORRECTIONAL OFFICER

DUTIES: SEARCH INMATES, BUILDINGS, PROPERTY — PRISON EMERGENCY RESPONSE TEAM
SUPERVISE INMATES ON/OFF PRISON — COMMUNITY WORK PROGRAM

SUPERVISOR: DALE TUCKE NAME OF CO-WORKER: PAUL DUNN

REASON FOR LEAVING: ACCEPTED TO MARINE CORPS CIVILIAN POLICE

6. FROM: 12-2-1986 TO: 2-2-1999 EMPLOYER UNITED STATE MARINE CORP

ADDRESS:

PHONE: JOB TITLE: INFANTY MAN

DUTIES: INFANTRY MAN 3 YEARS GUARDING U.S. EMBASSIES OVERSEAS. 2 YEAR GUARDING NAVY SHIPS

SUPERVISOR: NAME OF CO-WORKER: JOSE MALDANADO

REASON FOR LEAVING: END OF ENLISTMENT

D. MILITARY RECORD:

1. HAVE YOU SERVED IN THE U.S. ARMED FORCES? X YES ___ NO

2. DATE OF SERVICE: FROM: 12-2-1986 TO: 2-2-1999

3. BRANCH OF SERVICE: MARINE CORPS

UNIT DESIGNATION: 1ST BATALION 2ND MARINE REGEMENT

MILITARY SERVICE NUMBER: [redacted]

HIGHEST RANK HELD: SGT E-5

TYPE OF DISCHARGE: HONORABLE

4. WERE YOU EVER DISCIPLINED WHILE IN THE MILITARY SERVICE, INCLUDE COURT-MARTIAL, CAPTAIN'S MASTS, COMPANY PUNISHMENT, ETC.? _____ YES __X__ NO

CHARGE	AGENCY	DATE	AGE AT TIME	DISPOSITION

IF YOU RECEIVED A DISCHARGE OTHER THAN HONORABLE, GIVE COMPLETE DETAILS:

N/A

E. EDUCATIONAL HISTORY:

HIGH SCHOOL	CITY/STATE	DATES ATTENDED (FROM TO)	GRADUATED (YES OR NO)
ST. PETER'S	MANSFIELD OH	1982-1986	YES

1. COLLEGES OR UNIVERSITY ATTENDED: N/A

CITY AND STATE: _____ DATES ATTENDED: _____

UNITS COMPLETED: _____ MAJOR / MINOR: _____

DEGREE RECEIVED: _____ DATE RECEIVED: _____

2. COLLEGES OR UNIVERSITY ATTENDED: N/A

CITY AND STATE: _____ DATES ATTENDED: _____

UNITS COMPLETED: _____ MAJOR / MINOR: _____

DEGREE RECEIVED: _____ DATE RECEIVED: _____

3. LIST OTHER SCHOOLS ATTENDED: (TRADE, VOCATIONAL, BUSINESS, ETC.) GIVE NAME AND ADDRESS OF SCHOOL, DATES ATTENDED, COURSE OF STUDY, CERTIFICATE, AND ANY OTHER PERTINENT INFORMATION.

F. SPECIAL QUALIFICATIONS AND SKILLS:

1. LIST ANY SPECIAL LICENSES YOU HOLD: SUCH AS PILOT, RADIO OPERATOR, SCUBA, ETC., SHOWING LICENSING AUTHORITY, ORIGINAL DATE OF ISSUE AND DATE OF EXPIRATION.

2. LIST ANY SPECIALIZED MACHINERY OR EQUIPMENT THAT YOU CAN OPERATE.

3. IF YOU ARE FLUENT IN A FOREIGN LANGUAGE, INDICATE IN EACH AREA, YOUR DEGREE OF FLUENCY (EXCELLENT, GOOD OR FAIR.)

LANGUAGE	READING	SPEAKING	UNDERSTANDING	WRITING

4. LIST ANY OTHER SPECIAL SKILLS OR QUALIFICATIONS YOU MAY POSSESS.

EMERGENCY MEDICAL DISPATCH 6-14-2012
SPAWAR ELECTRONIC SECURITY SYSTEMS
BASIC NC CORRECTIONAL OFFICE
PRISON EMERGENCY RESPONE BASIC TRAINING

G. CONVICTIONS, ARRESTS, DETENTIONS AND LITIGATION:

1. HAVE YOU EVER BEEN CONVICTED, ARRESTED, DETAINED BY POLICE OR SUMMONED INTO COURT? _____YES _____NO

IF YES, COMPLETE THE FOLLOWING: (LIST JUVENILE AS WELL AS ADULT OCCURRENCES.)

CRIME CHARGED	CITY/STATE POLICE AGENCY	DATE	CASE DISPOSITION

2. HAVE YOU EVER BEEN INVOLVED AS A PARTY IN CIVIL LITIGATION?

_____YES _____NO IF YES, GIVE DETAILS: _____

H. TRAFFIC RECORD:

1. HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED? X YES ~~X~~ NO

IF YES, GIVE DATE, LOCATIONS AND REASONS: 1986 MANSFIELD, OH ACCIDENT ON ICY ROAD WENT LEFT OF CENTER HIT CAR

2. WITH WHAT COMPANY DO YOU CARRY AUTO INSURANCE? STATE FARM

3. LIST TO THE BEST OF YOUR MEMORY, ALL DRIVING CITATIONS YOU HAVE RECEIVED AS AN ADULT OR JUVENILE, EXCLUDING PARKING TICKETS:

MONTH & YEAR	CHARGE	CITY & STATE	CASE DISPOSITION CITATION ID
10 - 2001	SPEEDING	ONSLOW COUNTY NC	[redacted]

4. DESCRIBE IN A BRIEF NARRATIVE, ANY TRAFFIC ACCIDENTS IN WHICH YOU HAVE BEEN INVOLVED, GIVING APPROXIMATE DATES AND LOCATIONS.

4 - 2005 TRAFFIC ACCIDENT (HIT DEER)

12 - 2008 TRAFFIC ACCIDENT (HIT DEER)

I. MARITAL AND FAMILY HISTORY:

[redacted]

NAME	RELATION	BIRTH DATE	ADDRESS	SUPPORTED
[redacted]				

[redacted]

J. REFERENCES OR ACQUAINTANCES: LIST FIVE PERSONS WHO KNOW YOU WELL ENOUGH TO PROVIDE CURRENT INFORMATION ABOUT YOU. DO NOT LIST RELATIVES OR FORMER EMPLOYERS.

1. NAME: JOE SMITH ADDRESS: 465 STWART LANE MANSFIELD OH 44907

HOME PHONE: [redacted] EARS KNOWN: 35

BUSINESS ADDRESS: FEDEX BUSINESS PHONE: _____

2. NAME: JOSE MALDANADO ADDRESS: 113 ORKNEY DRIVE JACKSONVILLE NC 28540

HOME PHONE: [redacted] EARS KNOWN: 15

BUSINESS ADDRESS: MARINE CORPS CIVILIAN POLICE BUSINESS PHONE: 910-451-4688

3. NAME: LISA FAUDE ADDRESS: 125 MAE LANE RICHLANDS NC 28574

HOME PHONE: [redacted] YEARS KNOWN: 13

BUSINESS ADDRESS: SCHOOL TEACHER BUSINESS PHONE: _____

4. NAME: PAUL DUNN ADDRESS: 12 WALNUT DRIVE JACKSONVILLE NC 28546

HOME PHONE: [redacted] YEARS KNOWN: 14

BUSINESS ADDRESS: PO BOX 780 KENANSVILLE NC 28349 BUSINESS PHONE: 910-296-0315

5. NAME: DANNA WALLS ADDRESS: 203 MIKE LOOP RD JACKSONVILLE, NC 28546

HOME PHONE: [redacted] YEARS KNOWN: 14

T-COMM OA

BUSINESS ADDRESS: CAMP LEJEUNE, NC 28540 BUSINESS PHONE: _____

K. FINANCIAL HISTORY: (SOURCES OF INCOME)

1. WHAT IS YOUR PRESENT SALARY OR WAGES? $8.75 HR

2. DO YOU HAVE INCOME FROM ANY SOURCE OTHER THAN YOUR PRINCIPAL OCCUPATION?

YES X NO _____ IF YES, HOW MUCH $9.25 HR

HOW OFTEN: MAYBE 2 NIGHTS PART TIME PER WEEK WHEN NEEDED

THE SOURCE: SCHMIDT SECURITY PRO

3. DO YOU OWN ANY REAL ESTATE? YES _____ NO X VALUE _____

LOCATION: _____

[redacted]

L. MEMBERSHIP IN ORGANIZATIONS (PAST AND/OR PRESENT.)

NAME &ADDRESS	TYPE (SOCIAL, FRATERNAL, PROFESSIONAL, ETC.	DATES BELONGING
KNIGHTS OF COLUMBUS	4TH DEGREE	2011 - 2012
BOY SCOUTS OF AMERICA	CUB SCOUT LEADER	2008 - 2010

M. PERSONAL DECLARATIONS:

1. DESCRIBE IN YOUR OWN WORDS, THE FREQUENCY AND EXTENT OF YOUR USE OF INTOXICATING LIQUORS? BEER MAYBE AT HOME HAVE NOT DRANK IN 3 YEARS NO DESIRE

2. HAVE YOU EVER USED MARIJUANA OR ANY OTHER DRUG NOT PRESCRIBED BY YOUR PHYSICIAN? YES _____ NO X

   IF YES, WHAT WERE THE CIRCUMSTANCES? _____

3. HAVE YOU SOLD OR FURNISHED DRUGS OR NARCOTICS TO ANYONE? YES _____ NO X

   IF YES, EXPLAIN IN DETAIL. _____

4. ARE THERE ANY INCIDENTS IN YOUR LIFE OR DETAILS NOT MENTIONED HEREIN, WHICH MAY INFLUENCE THIS DEPARTMENT'S EVALUATION OF YOUR SUITABILITY FOR EMPLOYMENT AS A LAW ENFORCEMENT OFFICER? YES _____ NO X

IF YES, EXPLAIN IN DETAIL. _____

_____

_____

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of employment.

[redacted]

Si

4-10-2013

Date

PERSONAL REFERENCE CHECK

NAME OF APPLICANT: [redacted]

PERSON CONTACTED:Kathy West (RCSO Admin)

ADDRESS OF CONTACT:597 Park Ave East, Mansfield Ohio.

HOW LONG HAVE YOU PERSONALLY KNOWN THE APPLICANT AND WHAT CAPACITY? Most of his life

WHEN IS THE LAST TIME YOU SAW OR SPOKE TO THE APPLICANT? Couple of weeks ago

DO YOU CONSIDER THE APPLICANT RELIABLE? Very much so

HOW WOULD YOU DESCRIBE THE APPLICANTS TEMPERAMENT? Very good

DOES THE APPLICANT DRINK? no

DOES THE APPLICANT GAMBLE? no

TO YOUR KNOWLEDGE, HAS THE APPLICANT EVER USED ANY TYPE OF ADDICTIVE OR ANY TYPE OF A HALLUCINOGENIC DRUGS? no

IF SO WHAT TYPE OF DRUGS? n/a

WHAT IRRITATING TRAITS. IF ANY ARE YOU FAMILIAR WITH? None that is knows

IS THE APPLICANT ARGUMENTATIVE? no

HAS THE APPLICANT EVER OVER-REACTED TO MINOR PROBLEMS? Not to their knowledge

IF YES TO ANY ABOVE EXPLAIN? n/a

DOES THE APPLICANT MAKE FRIENDS EASILY? yes

DOES THE APPLICANT KEEP TO HIS/HERSELF? Not really

DOES THE APPLICANT CONVERSE FREELY WITH OTHERS? yes

IS THE APPLICANT AN EXTROVERT OR INTROVERT?

HOW WOULD YOU DESCRIBE THE APPLICANTS PERSONAL APPEARANCE? Very neat and orderly

DOES THE APPLICANT EXHIBIT CLOSE FAMILY RELATIONSHIPS? Very much so

IS THERE ANYTHING IN THE APPLICANTS BACKGROUND, WHICH COULD PREVENT THE APPLICANT FROM FUNCTIONING IN A FAIR OR IMPARTIAL MANNER? none

IS THERE ANYTHING YOU MAY WANT TO ADD CONCERNING OBSERVATIONS ABOUT THE APPLICANT OVERALL CHARACTER, FRIENDSHIPS, SUITABILITY, OR NON-SUITABILITY FOR THE POSITION? This officer found the applicant to be professional and respectful. He spoke and answered questions with knowledge.

WHAT IS THE APPLICANTS BEST QUALITY OR TRAIT? Honesty

WHAT IS THE APPLICANTS WORST QUALITY OR TRAIT? None that comes to mind

Do you have anything else to add, about the applicant? Would make a correction officer : Would make a very good correction officer

EMPLOYMENT REFERENCE CHECK

Name of applicant : [redacted]

Employer Contacted : Luara Morris

Person contacted Employer

First job title Production line?

Last job title Labor

Description of job duties during employment Worked line equipment

Did the applicant get along with other employees: very well

Applicant's ability to resolve work related problems/situation : Very well

Applicant's ability t responds to stress/Pressure: also very well

Quality of work: excellent

Reliability: very reliable

Sick leave usage: none

Was applicant ever late : not that was ever reported

How did applicant deal with public contacts : unknown

Was applicant ever rude/obnoxious : no

Did applicant ever have any complaints file against him/her : no

Security clearance if any : just military

Reason for security check. : military

If not able to obtain clearance
Why: n/a

Did applicant handle anything of monetary value : unkn.
Was applicant ever disciplined?
Why: no

Did applicant accept constructive criticism : yes
Was applicant easy to supervise?

Did applicant ever self-initiate work or ideas : was always looking for extra work
Explain

Would you rehire them : Yes

Do you have anything further to add. This officer was impressed whit the applicant. He showed up twenty minutes early, was dressed in a suit and was very professional in his speech and manner. This officer thinks that this applicant would be a good candidate for this possession.

RICHLAND COUNTY SHERIFF'S OFFICE
597 PARK AVENUE EAST
MANSFIELD, OHIO 44905
PHONE: 419-774-5881
FAX: 419-522-8153

APPLICATION FOR EMPLOYMENT

PRINT Clearly and Answer All Questions.

Position Applied For: **Correction Officer** Date of Application: 4-2-2013

Name: [redacted]
Last First Middle

[redacted]

Are you 18 years old or over? Yes ✓ No ____
Note: You must be 18 years old to be hired.

Are you an American Citizen? Yes ✓ No ____
Note: You must be an American citizen to be hired.

Have you been convicted of any felony or a misdemeanor of violence? Yes ____ No ✓
Note: You cannot be convicted of any felony or a misdemeanor of violence and be hired.

Have you ever had a civil or any other protection order filed against you? Yes ____ No ✓

Have you filed an application with Richland County before? NO If yes, when? ____

Which department? ____

Do you have any relatives currently employed by the Richland County Sheriff's Office?
Yes ____ No ✓
Note: Nepotism policy prohibits family members of current employees to be hired

Do you possess a valid Driver's License? Yes ✓ No ____
Note: You must have a valid Driver License to be hired.

[redacted]

MILITARY SERVICE INFORMATION:

Veteran Yes ✓ No _____

Branch of Service: USMC

Highest Rank Achieved: E-5 Job Title: INFANTRY MAN

Total Length of Consecutive Active Duty Time: 12 YEARS 2 MONTHS 1 DAY
Note: To claim veteran's preference you must have at least 180 consecutive days of active duty

Type of Discharge: HONORABLE
Note: Individuals with a less than Honorable Discharge will not be hired.

Reserve or National Guard Status: NO

EDUCATION:	High School	College	Graduate / Professional
School Name	ST. PETER'S HIGH		
School City, State	MANSFIELD, OH		
Diploma/Degree			
Course of Study			

Note: You must have a High School Diploma or G.E.D. to be hired.

Have you graduated from a state-certified Corrections Academy? If so, when 10-29-1999

Agency NORTH CAROLINA DEPT. OF CORRECTIONS Location NORTH CAROLINA

Have you ever worked as a Correction Officer before? If so, when YES

Agency NORTH CAROLINA DEPT. OF CORRECTION Location DUPLIN CORRECTIONAL CENTER DUPLIN, NC.

EMPLOYMENT HISTORY:

Account for ALL times in the past TEN years, including periods of unemployment. Indicate name used if other than signature on this application. Begin with PRESENT position or occupation. In addition, list any other qualifying experience in the last ten years. If you need more room, use a separate piece of paper. A resume is welcome in addition to this application, however, it may not be substituted for any part of this application. Incomplete information, including phone numbers, fax numbers and addresses may prevent application from being processed.

Company Name / Address: SPHERION OF MID OHIO INC. 2282 VILLAGE MALL DR SUITE 2 MANSFIELD, OH 44906

Phone #: 419-747-7479 **Fax #:** _____ **Ending Salary:** 8.75

Your Title: LABORER **Dates worked: From:** 1-25-13 **to** PRESENT

Your Duties: PRODUCTION LINE AT MTD IN SHELBY

Reason for Leaving: STILL EMPLOYED

Company Name / Address: SCHMIDT SECURITY 241 MANSFIELD INDUSTRIAL PARKWAY MANSFIELD, OH 44903

Phone #: 419-526-4040 **Fax #:** _____ **Ending Salary:** 9.25

Your Title: SECURITY GUARD **Dates worked: From:** 2-2-13 **to** PRESENT

Your Duties: SECURITY AT ARCELOR MITTAL IN SHELBY

Reason for Leaving: STILL EMPLOYED

Company Name / Address: HOMELAND SECURITY SOLUTIONS INC 3130A NASA DR HAMPTON, VA 23666

Phone #: 757-597-1851 **Fax #:** _____ **Ending Salary:** 14.25

Your Title: ALARM MONITOR **Dates worked: From:** 8-14-09 **to** 12-19-12

Your Duties: MONITOR ALARMS VERIFY PERSONAL TO RESTRICTED AREAS CONTACT LAW ENFORCEMENT FOR DISPATCH, ANSWERED NON EMERGENCY CALLS

Reason for Leaving: MOVED TO OHIO.

Company Name / Address: MARINE CORPS CIVILIAN POLICE OFFICE Bldg 3 CAMP LEJEUNE, NC 28542

Phone #: 910-451-4688 **Fax #:** _____ **Ending Salary:** 14.75

Your Title: STUDENT **Dates worked: From:** 4-29-09 **to** 6-10-09

Your Duties: STUDENT

Reason for Leaving: ACADEMICALLY

COMPANY NAME /ADDRESS: NORTH CAROLINA DEPT. OF CORRECTIONS
PO BOX 780 KENANSVILLE, NC 28349
ENDING SALARY: $14.55 HR
TITLE: CORRECTIONAL OFFICER
DATES WORKED: 2-9-1999 TO 4-8-2009
DUTIES: SUPERVISE INMATES ON UNIT AND OFF UNIT
ROAD SQUAD OFFICER (TOOK 7 INMATES OUT TO PICK UP TRASH ON SIDE OF ROAD).
TRANSPORTATION OFFICER
SEARCH INMATES, PROPERTY, BUILDINGS, AUTO
P.E.R.T. MEMBER PRISON EMERGENCY RESPONSE TEAM ESCAPES, RIOTS, UNIT SEARCHES, DRUG INTERDITION TEAM, MASS INMATE TRANSFERS.
REASON FOR LEAVING: GOING TO MARINE CORPS CIVILIAN POLICE

RELEASE AND AUTHORIZATION

****PLEASE READ CAREFULLY****

I certify that all statements contained herein or at any step of the employment process are true, complete and correct to the best of my knowledge. I understand that a false answer or material omissions may be grounds for dismissal from the Richland County Sheriff's Office.

By signing this waiver, I expressly authorize the Richland County Sheriff's Office to make a thorough investigation of my past employment and activities which may include, but not be limited to, a motor vehicle record check, police record check, etc. I also authorize the Richland County Sheriff's Office to make an inquiry of my former employers concerning my work record, job qualifications and performance. I authorize my former employer to furnish the Richland County Sheriff's Office with this information upon their request. I recognize the right of the Richland County Sheriff's Office to treat, at its discretion, certain sources as confidential, and its right to withhold from me or my agent the names of such confidential sources, and information obtained there from.

Signature of applicant: [redacted] **Date:** 4-2-2013

****Incomplete or missing information may prevent this application from being processed.****

[redacted]

[redacted]

Career Focus:

Hard worker, highly dependable team player person that needs little to no supervision. Extensive knowledge in personal, equipment and physical security. Has a good communication skill to handle most situations before they escalate to an out of control situation.

Education:

St. Peter's High School 1986

Mansfield, Oh. 44902

Accomplishments:

Alarm Monitor

Demonstrated experienced in electronic and security systems, and computer operations.

Marksman: skilled in operation and maintenance of pistol.

Has skill in HazMat Awareness.

Correctional Officer

Demonstrated a fair and equal treatment for inmates both inside the confines of the prison and while out on work assignment. Investigated inmate grievances and disciplinary problems.

On the Prison Emergency Response Team for over 8 years where I worked well with outside state agencies while conducting inmate escape, community work programs and litter clean up.

Marksman: skilled in operation and maintenance with revolver, pistol, shotgun and rifle. Has had extensive training in gang awareness, personal searches, cell searched, building searches, cell extraction, expandable baton, and pepper spray, armed and unarmed self defense.

United States Marine Corps

Marksman: skilled in operation and maintenance with revolver, pistol, shotgun, semi and fully auto rifles, PR-24 baton, pepper spray and handcuffing.

Awarded Combat Action, 3 Navy Achievement awards and numerous letters of appreciation and meritorious mast.

Work Experience:

- **Alarm Monitor** — **Homeland Security Solutions Inc.**

  August 14, 2009 to December 19, 2012

  Homeland Security Solutions Inc.

- **Marine Corps Civilian Law Enforcement Program** — **Marine Corps Base Camp Lejeune**

  Student --- April 29, 2009 to June 10, 2009

- **Correctional Officer** — **North Carolina Dept. of Corrections**

  February 9, 1999 to April 8, 2009

- **Infantry** — **United States Marine Corps**

  December 2, 1986 to February 2, 1999

  - Marine Security Guard (Embassy Duty)

    June 1991 to March 1994

  - Security Forces (Sea Duty)

    June 1987 to June 1989

Certifications and Credentials:

DCI General Inquiries Certified (June 2012)

Emergency Medical Dispatcher Certification (August 2010)

Prison Emergency Response Team Basic Training (February 2009)

Federal Emergency Management Agency (August 2008)

Basic Course for Correctional Officer (October 1999)

Marine Security Guard School (September 1991)

Marine Corps Sea Duty Indoctrination (July 1987)

Driver Improvement Training (November 1989)

Other:

Volunteer Church / Thrift Shop

Knights of Columbus 4th Degree

Saint Peter's High School

Mansfield, Ohio

Certifies that

[redacted]

has satisfactorily completed the course of study prescribed by this Institution and is therefore awarded this

Diploma

Given this month of June, Nineteen hundred Eighty-six.

In Testimony Whereof, we have affixed our signatures.

SAINT PETER'S HIGH SCHOOL MANSFIELD 1924 OHIO

William D. Daulloff
President,
St. Peter's Parish School Education Commission

Gregory J. O'Brien
Principal

Reverend John R. Blaser
Pastor

SAINT PETER'S HIGH SCHOOL

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) [redacted]

2. DEPARTMENT, COMPONENT AND BRANCH: USMC-11

3. SOCIAL SECURITY NO. [redacted]

4.a. GRADE, RATE OR RANK: Sergeant

4.b. PAY GRADE: E-5

5. DATE OF BIRTH (YYMMDD): 680614

6. RESERVE OBLIGATION TERMINATION DATE: Year 00 Month 00 Day 00

7.a. PLACE OF ENTRY INTO ACTIVE DUTY: MEPS Cleveland, OH 44199

7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known): [redacted]

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND: 1stBn 2dMar 2dMarDiv CamLej

8.b. STATION WHERE SEPARATED: RUC 12110 1stBn 2dMar 2dMarDiv CamLej

9. COMMAND TO WHICH TRANSFERRED: N/A

10. SGLI COVERAGE: None; Amount: $ 200,000

11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)

0311, Rifleman
11 years, 9 months

12. RECORD OF SERVICE

	Year(s)	Month(s)	Day(s)
a. Date Entered AD This Period	86	12	02
b. Separation Date This Period	99	02	02
c. Net Active Service This Period	12	02	01
d. Total Prior Active Service	00	00	00
e. Total Prior Inactive Service	00	00	00
f. Foreign Service	01	01	25
g. Sea Service	02	08	15
h. Effective Date of Pay Grade	92	02	01

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)

Rifle Expert Badge (2d award), Pistol Sharpshooter Badge, (6) Letter of Appreciation, Sea Service Deployment Ribbon (w/3 stars), Armed Forces Expeditionary Medal, Meritorious Mast, Battle "E", Cont. Block 18.

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)

Basic Security Guard Course 10/87, Sergeant's Course 6/93.
INFANTRY SQUAD LEADERS COURSE 10/94, SEA SCHOOL 7/87, HELICOPTER ROPE SUSPENSION MASTER 4/98, ADVANCE MACHINEGUNNER LEADERS COURSE 5/98.

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM: Yes [ ] No [XX]

15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT: Yes [XX] No [ ]

16. DAYS ACCRUED LEAVE PAID: RLB 00.5 SLB 00.0

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION: Yes [XX] No [ ]

18. REMARKS

"Block 13 Cont. Good Conduct Medal (w/2 stars), National Defense Service Medal, Southwest Asia Service Medal, Combat Action Ribbon, Navy Unit Commendation (w/star), Marine Corps Expeditionary Medals, Kuwait Liberation Medal (w/star), Overseas Service Ribbon (w/star), Meritorious Unit Commendation, Navy Achievement Medal (w/star)""Member did not contribute to the MGIB."" Good Conduct Medal Commences 951202.""Extension was at the request of the government."

No Further Entries.

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) [redacted]

19.b. NEAREST RELATIVE (Name and address - include Zip Code) [redacted]

[redacted] EPARATED

signature) T. M. FEUTY, CWO2, USMC

FILED FOR REGISTRATION AT 4:30 O'CLOCK P M FEBRUARY 18 1999
AND REGISTERED IN THE OFFICE OF THE REGISTER OF DEEDS OF ONSLOW COUNTY, N.C.
IN BOOK 39 PAGE 234, FEBRUARY 18 1999.

Mildred M. Thomas
MILDRED M. THOMAS, REGISTER OF DEEDS

23. TYPE OF SEPARATION: Discharge

24. CHARACTER OF SERVICE (Include upgrades): HONORABLE

25. SEPARATION AUTHORITY: MARCORSEPMAN PAR 1005

26. SEPARATION CODE: JGH3

27. REENTRY CODE: RE 1B

28. NARRATIVE REASON FOR SEPARATION: Non-Retention On Active Duty

29. DATES OF TIME LOST DURING THIS PERIOD: None

30. MEMBER REQUESTS COPY 4: BLT Initials

DD Form 214, NOV 88 S/N 0102-LF-006-5500 Previous editions are obsolete.

CERTIFIED TO BE A TRUE AND CORRECT COPY AS RECORDED IN THE OFFICE OF THE REGISTER OF DEEDS OF ONSLOW COUNTY, NORTH CAROLINA.
WITNESS MY HAND AND OFFICIAL SEAL THIS 18 DAY OF FEBRUARY 1999.

Mildred M. Thomas
MILDRED M. THOMAS, REGISTER OF DEEDS

BY: _____
ASSISTANT DEPUTY, REGISTER OF DEEDS

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

1. NAME (Last, first, middle)	2. DEPARTMENT, COMPONENT AND BRANCH	3. SOCIAL SECURITY NO. (Also, Service Number if applicable)
[redacted]	USMC - 11	[redacted]

CORRECTED TO READ

SEPARATION DATE ON DD FORM 214 BEING CORRECTED - 990202

13. PAID SEPARATION PAY $26442.07 on 990202
COMPUTED 1811.10 x 10% x 12 x 12.16667

RA GALLANT MAJ BY: [redacted]

CONT. HUMANITARIAN SERVICE MEDAL.

6. DATE	7. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN
990129	

DD FORM 215 CORRECTION TO DD FORM 214, CERTIFICATE OF RELEASE OR

FILED FOR REGISTRATION AT 4:30 O'CLOCK P M FEBRUARY 18 19 99
AND REGISTERED IN THE OFFICE OF THE REGISTER OF DEEDS OF ONSLOW COUNTY, N.C.
IN BOOK 39 PAGE 233, FEBRUARY 18, 19 99.

Mildred M. Thomas
MILDRED M. THOMAS, REGISTER OF DEEDS

CERTIFIED TO BE A TRUE AND CORRECT COPY AS RECORDED IN THE OFFICE OF THE REGISTER OF DEEDS OF ONSLOW COUNTY, NORTH CAROLINA.
WITNESS MY HAND AND OFFICIAL SEAL THIS 18 DAY OF FEBRUARY 1999.

Mildred M. Thomas
MILDRED M. THOMAS, REGISTER OF DEEDS

BY:
ASSISTANT DEPUTY, REGISTER OF DEEDS

The State of North Carolina
Department of Correction

Awards this

Certificate

To

[redacted]

For satisfactory completion of the

Prison Emergency Response Team Basic Training

Awarded this 20 th *day of* February, 2009.

Darryl W. Van

Emergency Preparedness Coordinator

Chief of Security

The State of North Carolina

Department of Correction

awards this

Certificate

to

[redacted]

for satisfactory completion of the

Basic Course for Correctional Officers

awarded this 29TH *day of* OCTOBER, *19*99.

Theodis Beck
SECRETARY OF CORRECTION

Daniel L. Stieneke
DIRECTOR OF PRISONS

DIRECTOR, STAFF DEVELOPMENT AND TRAINING

THE GREAT SEAL OF THE STATE OF NORTH CAROLINA
MAY 20. 1775
APRIL 12. 1776
ESSE QUAM VIDERI

Mike DeWine
Ohio Attorney General

April 10, 2013

690 SCOTT DR
ONTARIO, OH 44906

NO BCI&I RECORD ON FILE
AUTHENTICATION NO. CS00194134A85006

The Ohio Bureau of Criminal Identification and Investigation (BCI&I) has completed a criminal history record check on the applicant listed below. Based upon information furnished by your agency, BCI&I has **NO CRIMINAL HISTORY RECORD** on file for:

Name: [redacted]

BCI Completion Date: **April 10, 2013**
Reason Fingerprinted: **Law Enforcement**
Agency ID: **CSV526**

This "No Record" verification is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Thomas J. Stickrath
Superintendent, Ohio Bureau of Criminal
Identification & Investigation

Ohio Bureau of Criminal Identification and Investigation
P.O.Box 365
London, OH 43140
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Facsimile: (740) 845-2020

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