### TRAINING FILE

# Cuyahoga Metropolitan Housing Authority Police Department



This is to certify that

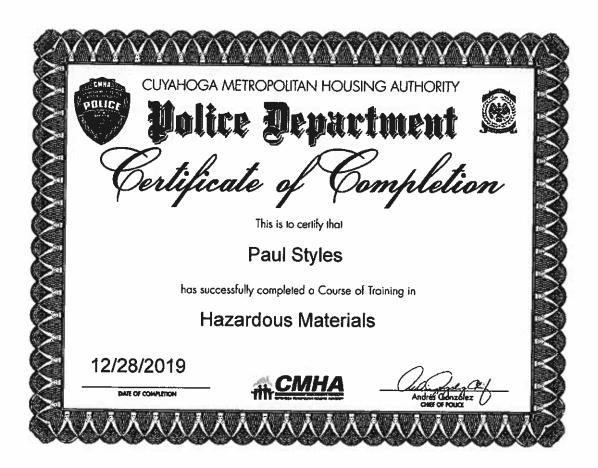
Sergeant Paul Styles

has successfully completed the advanced training course

Performance Appraisal Refresher Training

on this 13 day of August, 2020

Doth Chil. Sur Mr. D. J. C.



## CERTIFICATE OF COMPLETION

THIS CERTIFIES THAT

#### Paul Styles

has successfully completed 4 hours of

#### SUBJECT CONTROL/DEFENSIVE TACTICS TRAINING Completion Date: June 19, 2019 at Highland Heights, Ohio

Mark Stefanac, OPOTA Certified Subject Control Instructor



#### Police Department

This is to certify that

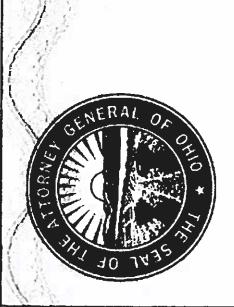
Paul Styles #656

t John Smiddy #654 Has successfully completed a course of training in Emergency Vehicle Operations

April 18019, 2018

Date

Andrés González Chief of Police





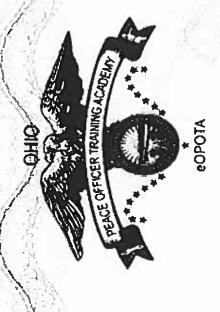
### Paul Styles

has completed the Ohio Attorney General's online training course on 2017 Legal Update: Search and

Completed on: 11/27/2017 3:59:44 PM

Seizure Law





### Paul Styles

has completed the Ohio Attorney General's online training course on 2017 Legal Update: Civil Liability for Officers

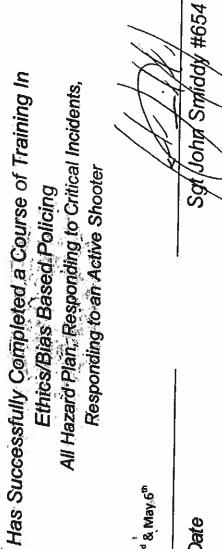
Completed on: 11/27/2017 1:46:11 PM



#### Police Department

This is to certify that

Paul Styles #656



May 3rd & May 6th

Date

Andrés González Chief of Police



#### Police Department

This is to certify that Paul Styles #656



Has Successfully Completed CMHA PD In-Service Training on: Procedural Justice/Police legitimacy Trauma Informed Policing/PAR

May 3rd-4th

Date

Andrés González Chief of Police

- Sgt Jacketyn Burgos BAS24081



# TASER Conducted Electrical Weapon

USER CERTIFICATE

#### Paul Styles #656

This certifies that the above named individual ("the Student") has completed the training required and has passed a the Student accepts the terms of the Training Materials License Agreement, incorporated herein by reference, and agrees written examination in the use of the TASER X26/X26P Conducted Electrical Weapon. By accepting this User Certificate, to be bound by its terms as a Licensee of TASER International, Inc. This certification must be renewed annually.

Instructor:

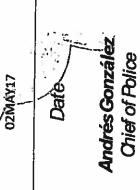
Date 05/05/2017 Sgt John Smiddy #654

#### Police Department

This is to certify that

Paul Styles #656









#### Police Department

This is to certify that Paul Styles #656



Has Successfully Completed CMHA PD In-Service Training on:

Procedural Justice/Police legitimacy Trauma Informed Policing/PAR

May 3<sup>rd</sup>-4<sup>th</sup>

Date

**Andrés González** Chief of Police

Sgt Jacketyn Burgos BAS24081



#### Police Department

This is to certify that

Paul Styles #656

Has Successfully Completed a Course of Training In Ethics/Bias Based Policing All Hazard Plan, Responding to Critical Incidents, Responding to an Active Shooter

May 3<sup>rd</sup> & May 6<sup>th</sup>

Date

Andrés González Chief of Police

Sat John Smiddy #654



### Paul Styles #656

USER CERTIFICATE

This certifies that the above named individual ("the Student") has completed the training required and has passed a written examination in the use of the TASER X26/X26P Conducted Electrical Weapon. By accepting this User Certificate, the Student accepts the terms of the Training Materials License Agreement, incorporated herein by reference, and agrees to be bound by its terms as a Licensee of TASER International, Inc. This certification must be renewed annually.

Sgt John Smiddy #654

Monadnock Expandable Baton Monadhar! - MEB

The Undersigned Certify That

### Paul A. Styles

Cuyahoga Metro Housing Authority Police

has satisfactorily completed the ADVANCED INSTRUCTOR CERTIFICATION TESTS for **EXPANDABLE POLICE BATONS.**  He/She is therefore deemed competent to instruct the uses of the AutoLock, Friction Lock and Positive Lock Expandable (Collapsible) or Rigid Straight Police Batons associated with the MEB Basic Course (4 hrs.) and MEB Advanced Course (8 hrs.) Certification Curriculums.

Presented this

September 2000

DIRECTOR OF TRAINING STANDARDS Monadnock Police Training Council, Inc.

Monadnock Police Training Council, Inc. MEB INSTRUCTOR-TRAINER

grall G. Ball

### Certíficate of Completion is hereby granted to

### Sgt. Paul Styles #656



in recognition of successful completion of



August 04, 2016



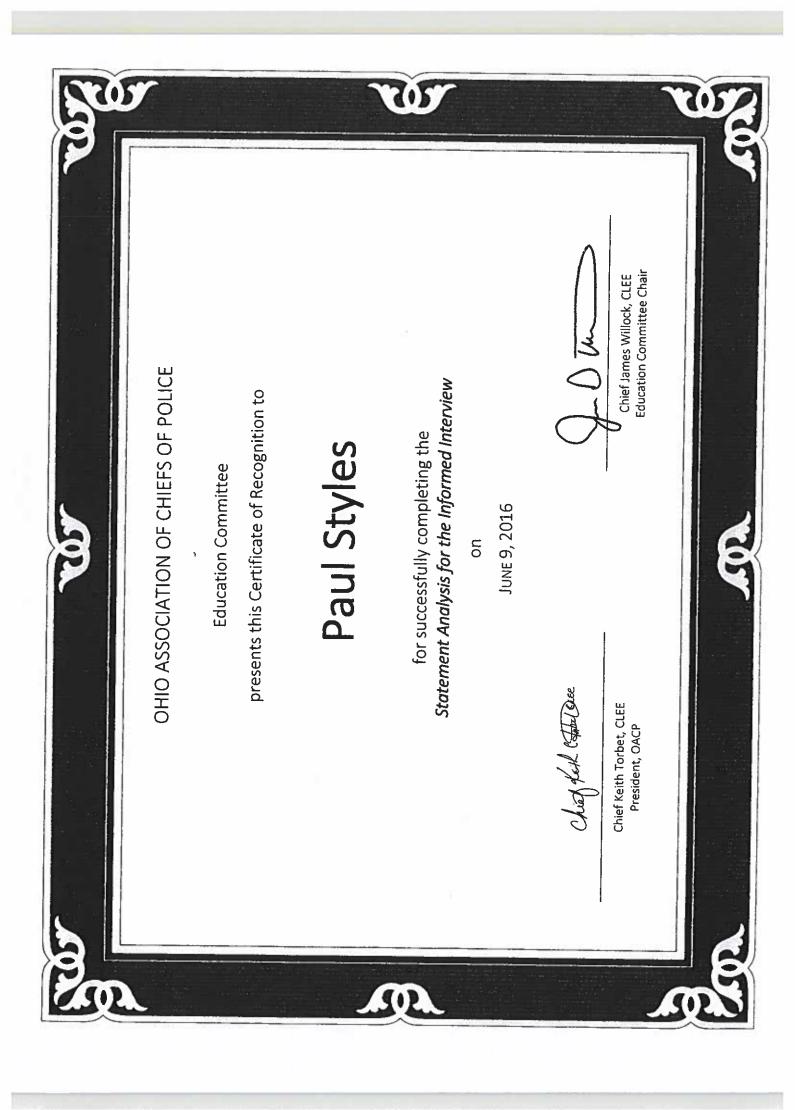


**(3)** 











Paul Styles

has successfully completed a Course of Training in

Hazardous Materials

10/5/2015

DATE OF COMPLETION

iii CMHA

Andres Gonzolez



#### Paul Styles

has successfully completed a Course of Training in

**CALEA** 

10/12/2015

DATE OF COMPLETION





#### Multijurisdictional Counterdrug Task Force Training



This is to certify that

#### Paul A. Styles

Has satisfactorily completed the following 24 hour MCTFT training course held at

BROOKLYN HEIGHTS, OH

### Conspiracy Investigations

Training held 3/11/2008 through 3/13/2008

President St. Petersburg College

Eileen Lahaie MCTFT Director

A partnership between The Florida National Guard and St. Petersburg College



Sgt. Paul Styles #656

USER CERTIFICATE

This certifies that the above named individual ("the Student") has completed the training required and has passed a written examination in the use of the TASER X-26 Conducted Electrical Weapon. By accepting this User Certificate, the Student accepts the terms of the Training Materials License Agreement, incorporated herein by reference, and agrees to be bound by its terms as a Licensee of TASER International, Inc. This certification must be renewed annually.

ructor: Call A
Daren Beichler

Date 18DEC14





#### Paul Styles

has completed the Ohio Attorney General's online training course on DeEscalating Mental Health Crises

Completed on: 1/7/2015 11:06:00 AM



#### Police Department

This is to certify that



Sergeant Paul Styles #656

Has Successfully Completed An In-Service Course of Training In (8 Hours of Instruction) Domestic Violence Customer Service PAR

November 06, 2014

Date

**Andrés González** Chief of Police

Instructor



### Sgt. Paul Styles #656

USER CERTIFICATE

This certifies that the above named individual ("the Student") has completed the training required and has passed a Student accepts the terms of the Training Materials License Agreement, incorporated herein by reference, and agrees to written examination in the use of the TASER X-26 Conducted Electrical Weapon. By accepting this User Certificate, the be bound by its terms as a Licensee of TASER International, Inc. This certification must be renewed annually.

Instructor: ()ally

Date 18DEC14

Daren Beichler



### Paul Styles

ed the Ohio Attorney General's online training c

Ohio Human Trafficking





#### Paul Styles

has completed the Ohio Attorney General's online training course on Awareness of Human Trafficking

Completed on: 11/27/2012

Completed in: 1:12:31





#### Paul Styles

has completed the Ohio Attorney General's online training course on Responding to Human Trafficking

Completed on: 11/29/2012

Completed in: 0:7:25



tules #656

Has Successfully Completed An In-Service Course of Training In

Crisis Intervention | Ethics | Biased Based Policing

(Eight Hours of Instruction)

15tober 6 2011

Date

**Andrés González** Chief of Police

Con Peul #54

Instructor

U. R. #633

Instructor



PAUL STYLES

has successfully completed the Ohio LEADS testing on

March 29, 2011

by completing the following exam:

**Inquiry Test** 

This certificate is good through

March 29, 2013



### CASE WESTERN RESERVE

MANDEL SCHOOL OF APPLIED SOCIAL SCIENCES

# Certificate of Completion

This certifies that

### Paul Sykes

Community Coordinated Youth Interventions Specialized Training in Police and has successfully completed

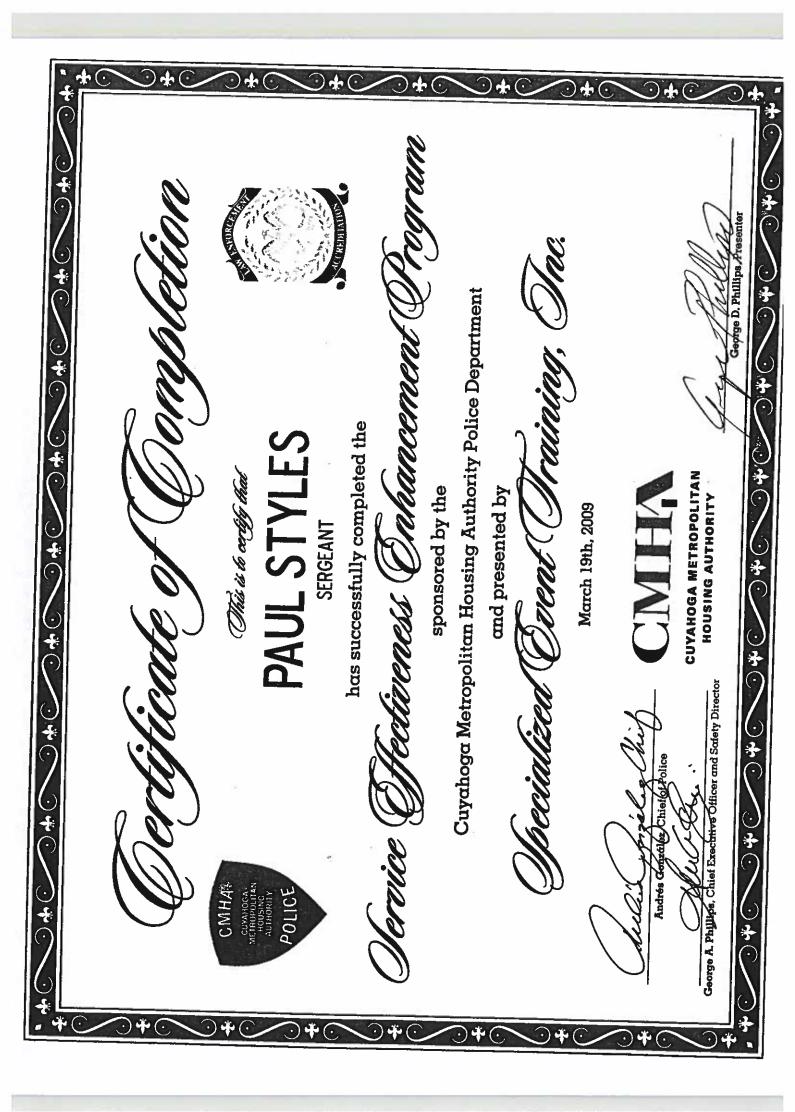
Date: December 9, 2009

Grover C. Librar

Grover C. Gilmore

frain millia

Sharon Milligan, Ph.D. Associate Dean



#### CMHA PD "USE OF FORCE" TEST - PAGE 1 OF 2 (24Mar10)

NAME: PAUL STILES BADGE # (S( DATE 4123112
1) Officers are authorized to use <u>heady</u> for that reasonably appears necessary to effectively bring an incident under control while protecting the life of the member or others.
2) True or False - Officers that use non-deadly force, must complete a UNDF report and a form 1 prior to reporting off duty.
3) An officer shall <u>Orry</u> and <u>USQ</u> only those weapons and ammunition as furnished or authorized by the Chief of Police.
4) "Deadly Force" is defined as "an action likely to cause death or serious physical harm". Which of the following are examples of deadly force?
[circle all that apply]  Shooting to wound a person so they surrender.  Striking a suspect in the leg with your baton.  Using OC (pepper spray) against a disorderly female.  Striking a suspect in the head with your baton.  Using an arm lock to restrain a suspect.
5) True or false- An Officer would be justified in shooting a fleeing suspect if the suspect had stolen property with a value in excess of \$500.00, and the officer was otherwise unable to apprehend the suspect.
6) True or False An Officer may draw, display, or point their weapon only if the suspect has a weapon. [circle one]
7) Justification for the use of deadly force is limited to the facts actually known or reasonably perceived by the Officer at the <u>moment</u> that force is used.
8) True or False - An Officer would be justified in shooting a fleeing suspect solely upon the basis of [circle one] reports from witnesses that the suspect had a gun.
9) True of False - It is an acceptable procedure to shoot out the tires of a vehicle that is refusing to stop [circle one] if the officer thinks the driver has a warrant.
10) Deadly force is never justified solely to protect from Perty.
11) True or False- Officers should not fire warning shots except as a last chance effort to stop a [circle one] suspect who otherwise will get away.
12) True or False - Officers are required to report all use of force incidents as soon as possible.  [circle one]
13) True or False - Officers are required to ensure that assistance and medical care are rendered to suspects injured as a result of any use of force.



# UNITED STATES DEPARTMENT OF TRANSPORTATION

FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
NATIONAL TRAINING CENTER
DRUG INTERDICTION ASSISTANCE PROGRAM

in partnership with the



# **Cuyahoga County Sheriff's Department**

Certifies

### Paul A. Styles

Attended and Participated in

Commercial Motor Vehicle Criminal Interdiction Rapid Risk Recognition, Assessment, and Response

Cleveland, Ohio ~ June 24 through June 26, 2008

Shannon Chelf

Federal Motor Carrier Safety Administration

Drug Interdiction Assistance Program

Captain Michael Jackson
Cuyahoga County Sheriff's Department
Training Facilitator



#### CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

All employees

FROM:

Andres Gonzalez, Chief of Police

DATE:

September 28, 2007

Page 1 of 2		
Page 1 of 2	MANDATORY TRAINING	DN #07-096
	Sexual Harassment	

The following is the schedule for training related to Sexual Harassment. Attendance is mandatory for all divisional employees. The training will be held at headquarters in the Community Policing Room. Dress will be the officers uniform of the day.

Watch Commanders/ Unit OIC's must maintain coverage at all mandatory buildings and notify their respective Commander for rescheduling of officers.

The schedule is as follows:

#### **TUESDAY, OCTOBER 2, 2007**

Assaf, Jihad #62 Toles, Charles #648 Reynolds, David #75 Gonzalez.  Williams, Eric #50 Trover Theodore #664 Good State of the Property of the	. – 1230 hrs.
Wiley, Toni #003  Svec, Christoper #662  Gowdy, Janet #219  McGroder, Mary #668  Williams, Latasha #204  Harper, Ronald #222  Correy, Donna #615  Brantley, Earl #77  Branch, Antonio #274  Morenz, Ronald #626  Eppinger, Alisha #255  Taylor, Jerimane #247  White, Gloria #008  Mollohan, Donald #634  Azzano, Thomas #61  Broom, D  Brantley, Earl #77  Terry, San  Higginbotham, Will #102  Howard, F  Alcantara, Jose #09  Morgan, R  Ali, Saleem #31  Hermensk  Golson, Susan #002  Kraniske, Glen #608  Kucera, Re  Tidwell, Robert #227	lliam #604 Parlene #730 Indra #731 W, Thomas #640 Roxsann #606 Raymond #658 Ly, Paul #630

Page	2	of	2
T 46	-	O.L	-

#### Sexual Harassment Training

DN #07-096

#### TUESDAY, OCTOBER 2, 2007 Cont'd

1400 hrs. – 1500 hrs.	1530 hrs. – 1630 hrs.
Salamana Drian #22	W-1 D-1
Salomone, Brian #23	Vales, Robert #44
Hamilton, Al #36	Ramsey, Randy #07
Rice, Debra #202	Sailey, Oliver #212
Coleman, Jan #214	Puree, Ken #226
Harris, Johnny #17	Bowen, Anthony #225
Jones, Larry #26	Chapman, William #14
Whitney, David #48 Neal, James #35	
Williams, Thomas #65	Ovalle, Clinton #30
Wiltshire, Harley #19	Grimes, Cornell #56
Revelt, Lisa #004	Justus, Estel #46
Drew, Stephanie #006	Beese, Adam #06
	DeJesus, David #20
	Jones, Michael #25
	Suber-Bey, T. #732

#### **THURSDAY, OCTOBER 4, 2007**

0500 hrs. – 0600 hrs.	0700 hrs. – 0800 hrs.	0830 hrs. – 0930 hrs.	1400 hrs. – 1600 hrs.
D 11 1 11 11 11 11 11 11 11 11 11 11 11			
Pollard, Alesia #216	Leon, Manuel #58	Dancy, Alvin #32	Rucker, Carol #632
Hammond, Willie #200	Smiddy, John #11	Harris, James #03	Guinn, Melvin #624
Lawson, John #201	Hizak, Brandon #24	Spigner, Michael #67	Schilling, Richard #652
Johnson, Will #260	Beichler, Daren #54	Copeland, Arthur #41	Tufts, James #613
Dunham, Robert #238	Pride, Nicole #607	Clayton, Alan #38	
Paul, Darrell #250	Shealy, Kelley #007	Kirby, Darrin #229	1
Bly, David #001	Swanson, Kevin #16	Wallace, Melvin #220	
Hines, Louis #215	Rives, Eric #86	Robinson, Deeda #005	
Bachelor, Arrie #224	Collins, Clifford #735	Warren, Patricia #733	
		Jenkins, Bobby #704	

1700 hrs. – 1800 hrs.	1700 hrs. – 1800 hrs.	
Ortiz, Marc #95	Griffiths, James #89	
Blakemore, Kerry #12	Johnson, Joseph #256	
Kolb, Stephen #70	Clark, Michael #235	
Lastuka, Jerry #52	Strickland, Donald #242	
Hopkins, Ronald #88	West, Chanel #010	
Holdeman, John #10	Harris, Monique #012	
Drew, Gregory #04		

By order of, Since the Chief Andres Gonzalez Thick of Police



#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



This is to certify that

#### Gaul Styles

Has Completed an Intensified Course of Training in

#### Report Writing

Consisting of 8-Hours of Instruction On this 23rd Day of May in the Year 2007

> ANDRES GONZALEZ CHIEF OF POLICE

GEORGE A. PHILLIPS
SAFETY DIRECTOR

ZE Jun Jun



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

All Sworn Personnel

FROM:

Andres Gonzalez, Chief of Police

DATE:

July 13, 2007

Page 1 of 3 State Many		
State Want	dated Crime Victim Training	DN #07-069

The State has mandated that every police officer receive a minimum of 5-hours of training in a crime victim related area. To be in compliance with this mandate, the CMHA Police Department will be providing its officers with this training in lieu of their regularly scheduled shift. The training will be held at Headquarters, in the Community Policing Room, from 0800-1600. Dress will be the officers uniform of the day. The training will be presented by Lynn Hammond of the Witness Victim Service Center and Dan Clark of the Cleveland Rape Crisis Center

Attendance is <u>required</u> and all Attendance Control Policies will be strictly enforced. All officers are required to punch in and out for the training. Any officer who fails to report at their scheduled time will be considered "AWOL", and will not be allowed to work that day to make-up the shift.

If there are any scheduling conflicts, notify Lt. Morenz #626 to determine if an alternate date can be arranged.

The schedule is as follows:

Thursday - July 19, 2007 0800-1600

Lt. Likes #660 Lt. Morenz #626 Sgt. Guinn #624 Friday - July 20, 2007 0800-1600

Lt. Correy #615 Sgt. Homerick #636 Sgt. Styles #656

## Thursday - July 19, 2007 0800-1600

Sgt. Mollohan #634
Det. Harris #03
Det. Ovalle #30
PO Alcantara #09
PO Assaf #62
PO Clayton #38
PO Copeland #41
PO Drew #04
PO Griffiths #89
PO Hamilton #36
PO Hizak #24
PO Kolb #70
PO Lages #08
PO Smiddy #11
PO T. Williams #65

## Friday - July 20, 2007 0800-1600

Sgt. Troyer #664
Det. Beichler #54
Det. Kuska #22
Det. Neal #35
Det. Schultz #37
PO Ali #31
PO Azzano #61
PO Beese #06
PO Brantley #77
PO Cattren #18
PO DeJesus #20
PO Reynolds #75
PO Rives #86
PO Tallman #01

Sgt. Toles #648

## Thursday - July 26, 2007 0800-1600

Lt. Cooper #644
Lt. Tufts #613
Sgt. Burdyshaw #640
Sgt. Hermensky #630
Sgt. Rucker #632
Det. Justus #46
Det. Kennedy #28
PO Higginbotham #102
PO Hinkle #42
PO Holdeman #10
PO Hopkins #88
PO Leon #58
PO Otiz #95
PO Ramsey #07

## Friday - July 27, 2007 0800-1600

Lt. Justus #638
Sgt. McGroder #668
Sgt. Morgan #658
Sgt. Schilling #652
Sgt. Svec #662
Det. Chapman #14
Det. Dancy #32
Det. Grimes #56
PO Blakemore #11
PO Crawford #29
PO Harris #17
PO L. Jones #26
PO M. Jones #25
PO Lastuka #52

Thursday - July 26, 2007 0800-1600

PO Spigner #67

PO Vales #44 PO E. Williams #50

PO Swanson #16

Friday - July 27, 2007 0800-1600

PO Rives #86

PO Salomone #23

PO Whitney #48

PO Wiltshire #19

PO Woodland #101

By order of,

Andres Gonzalez, Chief of Police



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

All Sworn Personnel

FROM:

Andres Gonzalez, Chief of Police

DATE:

May 16, 2007

D 4 00		
Page 1 of 2	Mandatory Report Writing Training	DN #07-043

All officers will be scheduled for 8-hours of In-service Report Writing training. The training will be held at Police Headquarters, in the Community Policing Room, and will be in lieu of the officers scheduled shift for that day. Training will be held from 0800-1600 hours. Dress will be the officers uniform of the day.

Attendance Control Policies will be strictly enforced. All officers are required to punch in and out on their timecard for the training. Any officer who fails to report at their scheduled time will be considered "AWOL", and will not be allowed to work that day to make-up the shift.

The schedule is as follows:

Monday - May 21, 2007	Tuesday - May 22, 2007	Wednesday - May 23, 2007
Sgt. McGroder #668 Sgt. Toles #648 PO Alcantara #09 PO Cattren #18 PO Hinkle #42 PO Whitney #48 PO Woodland #101 Det. Beichler #54 Det. Dancy #32	Lt. Justus #638 Sgt. Svec #662 PO Holdeman #10 PO Leon #58 PO Ortiz #95 PO Ramsey #07 PO Smiddy #11 PO E. Williams #50 Det. Harris #03	Lt. Likes #660 Sgt. Guinn #624 Sgt. Mollohan #634 PO Crawford #29 PO Griffiths #89 PO Hamilton #36 PO Harris #17 PO Higginbotham #102 PO Lastuka #52

Page 2 of 2

## **Mandatory Report Writing Training**

DN #07-043

## Thursday - May 24, 2007

## Monday - June 4, 2007

Tuesday - June 5, 2007

Sgt. Schilling #652
Sgt. Styles #656
PO Blakemore #12
PO Drew #04
PO Hopkins #88
PO Salomone #23
PO Vales #44
Det. Chapman #14
Det. Grimes #56
Det. Justus #46
Det. Neal #35
Det. Ovalle #30

Lt. Tufts #613
Sgt. Burdyshaw #640
PO Ali #31
PO Azzano #61
PO Clayton #38
PO Wiltshire #18
PO Kolb #70
PO Reynolds #75
PO Rives #86
Det. Kuska #22

Sgt. Homerick #636 Sgt. Troyer #664 PO Tallman #01 PO Hizak #24 PO T. Williams #65 PO DeJesus #20 PO Assaf #62

## Monday - June 11, 2007

Lt. Cooper #644

Sgt. Hermensky #630

Sgt. Rucker #632

PO Copeland #41

PO Jones #26

Det. Kennedy #28

Det. Schultz #37

PO Spigner #67

PO Swanson #16

By order of

Andres Gonzalez, Chief of Police



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

All Sworn and Safety Management Personnel

FROM:

Andres Gonzalez, Chief of Police

DATE:

April 19, 2007

Page 1 of 2	First Responder Safety Kit Issuance	DN #07-029
		<del></del>

Pursuant to GPO #07-005 PROCEDURES FOR RESPONDING TO HAZMAT INCIDENTS, all sworn officers and Safety Management personnel shall be issued First Responder Safety Kits, which contain Personal Protective Equipment (PPE). The air-purifying respirator (APR), included as part of the PPE issued, shall be fitted for each individual officer. Once the fitting process is complete, the equipment bags will be stored, broken down by shift, in the office adjacent to the SWAT OIC office. In the event an officer needs the equipment while on-duty or called in for duty, the officer will report to Police Headquarters and obtain it from a supervisor.

The following schedule has been prepared for the fitting and issuing of the First Responder Safety Kits. Officers being fitted <u>CANNOT</u> smoke within 15 minutes of their fitting time. The fittings will take place in the SWAT OIC office. The fitting will be done while on-duty. There will be no overtime or callback paid as a result of this schedule. If a conflict exists, contact Lt. Morenz #626 to be rescheduled. The schedule is as follows:

Sund	lay - April 22, 2007	Mo	nday - April 23, 2007	Tueso	lay - April 24, 2007
1600	DeJesus 20	1200	Styles 656	0900	Crawford 29
1610	Cattren 18	1210	Chapman 14	0910	McGroder 668
1620	Whitney 48	1220	Neal 35	0920	Leon 58
1630	Ramsey 07	1230	Ovalle 30	0930	Tufts 613
1640	Holdeman 10	1240	Grimes 56	0940	Salomone 23
1650	Harris 17	1250	Justus 46	0950	Guinn 624
1700	Griffiths 89	1300	Kucera 702	1000	Spigner 67
1710	Likes 660	1310	Taylor-Heard 705	1010	Kennedy 28
1720	Alcantara 09	1320	Jenkins 704	1020	Morgan 658
				1030	Hermensky 634
				1040	Harris 03

Page	2	of	2
	_	~ 4	-

## First Responder Safety Kit Issuance

DN #07-029

Tues	day - April 24, 2007	Thu	rsday - April 26, 2007	Thur	sday - April 26, 2007
2330	Azzano 61	0900	Tallman 01	1600	Ortiz 95
2340	Hamilton 36	0910	Hizak 24	1610	Smiddy 11
2350	Cooper 640	0920	Morenz 626	1620	Kolb 70
2400	Burdyshaw 640	0930	Hinkle 42	1630	Reynolds 75
	April 25, 2007	0940	Correy	1640	Rucker 632
0030	Svec 662	0950	Clayton 38	1650	Kuska 22
0040	Williams 50	1000	Beichler 54	1700	Dancy 32
0050	Lastuka 52	1010	Copeland 41	1800	Schultz 37
0100	Mollohan 630	1020	Ali 31	1900	Higginbotham 102
		1030	Wiltshire 19		- 66 v 10 <b>-</b>
		1040	Barto 603		
		1050	Solomon 602		

## Thursday- April 26, 2007

2330 Assaf 62

2340 Woodland 101

April 27, 2007

0030 Jones 26

0040 Troyer 664

By order of,

Andres Gonzalez, Chief of Police



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

All Personnel

FROM:

David T. Solomon, Acting Chief of Police

DATE:

April 12, 2007

Page 1 of 3	ADP Training	DN #07-027

The following is the schedule for training and enrollment for the new ADP time keeping system. All personnel are required to be set-up in, and trained on, the system. Watch Commanders are required to insure that all personnel under their command are present at the time they are scheduled. If a change needs to be made, contact Lt. Morenz #626 to determine if it is feasible. The training will be held at headquarters, in the Community Policing room. The schedule is as follows:

TUESDAY, April 17, 2007			
5:00 AM	6:00 AM	7:30 AM	9:00 AM
224 Bachelor, Arrie Jr.	644 Cooper, Tyrone	003 Wiley, Toni	67 Spigner, Michael
216 Pollard, Alesia	008 White, Gloria	26 Jones, Larry	41 Copeland, Arthur
258 Flowers, Andrea		215 Hines, Louis	229 Kirby, Darrin
200 Hammond, Willie		208 Montague, Nicholas	29 Crawford, Michael
201 Lawson, John		664 Troyer, Theodore	214 Coleman, Jan
219 Gowdy, Janet			624 Guinn, Melvin
204 Williams, Latasha			54 Beichler, Daren
222 Harper, Ronald			638 Justus, Jack
640 Burdyshaw, Thomas			Kucera, Robert
			Jenkins, Bobby
			Taylor-Heard, Rhonda

Page 2 of 3	ADP Training	DN #07-027

TUESDAY, April 17, 2007		
4:00 PM	4:30 PM	5:00 PM
012 Harris, Monique	006 Drew, Stephanie	256 Johnson, Joseph
95 Ortiz, Marc	010 West, Chanel	632 Rucker, Carol
11 Smiddy, John	56 Grimes, Cornell	70 Kolb, Stephen
660 Likes William	46 Justus, Estel	75 Reynolds, Dave
09 Alcantara, Jose		235 Clark, Michael
Higgins, Latia		226 Puree, Kenneth
Ramsey, Daneeka		636 Homerick, Dale
		17 Harris, Johnny
		89 Griffiths, James
		242 Strickland, Donald

WEDNESDAY, April 18, 2007	
7:30 AM	10:30 AM
613 Tufts, James	606 Howard, Roxsann
608 Kraniske, Glenn	22 Kuska, Steven
28 Kennedy, Maurice	32 Dancy, Alvin
626 Morenz, Ronald	31 Ali, Saleem
668 McGroder, Mary	658 Morgan, Raymond
102 Higginbotham, William	04 Drew, Gregory
	11 Blakemore, Kerry
	44 Vales, Robert
	88 Hopkins, Ronald
	65 Williams Thomas
	652 Schilling, Richard
	19 Wiltshire, Harley

Page 3 of 3	ADP Training	DN #07-027

	THURSDAY,	April 19, 2007	
8:00 AM	9:00 AM	4:30 PM	5:00 PM
004 Revelt, Lisa	38 Clayton, Alan	007 Shealy, Kelley	18 Cattren, William
01 Tallman, Paul	220 Wallace, Melvin	14 Chapman, William	48 Whitney, David
24 Hizak, Brandon	209 Conway, Reginald	35 Neal, James	212 Sailey, Oliver
42 Hinkle, Thomas	237 Roberts, Carl	30 Ovalle, Clinton	225 Bowen, Anthony
58 Leon, Manuel	648 Toles, Charles	656 Styles, Paul	630 Hermensky, Paul
615 Correy, Donna E.	23 Salomone, Brian		37 Schultz, Charles
<u> </u>	202 Rice, Debra		, , , , , , , , , , , , , , , , , , , ,
	634 Mollohan, Donald		

<u> </u>	FRIDAY, Ap	oril 19, 2007	
5:00 AM	6:30 am	7:30 AM	8:30 am
274 Branch, Antonio	61 Azzano, Thomas	227 Tidwell, Robert	002 Golson, Susan
240 Gray, Alvin	62 Assaf, Jihad	50 Williams, Eric	005 Robinson, Deeda
236 Solomon, Nathaniel	101 Woodland, Darrel	662 Svec Christopher	03 Harris, James
255 Eppinger, Alisha	36 Hamilton, Al	52 Lastuka, Jerry	732 Suber-Bey, Terrissi
247 Taylor, Jermaine	735 Collins, Clifford	221 Matza, Murray	W.
260 Johnson, Will		001 Bly, David	,
238 Dunham, Robert			
250 Paul, Darrell	<u> </u>		

4:00 pm
20 DeJesus, David
07 Ramsey, Randy
10 Holdeman Jeffery

By order of,

David T. Solomon, Acting Chief of Police

David 7 Jolomon



## U.S. Department of Justice

## National Drug Intelligence Center

Office of the Director

319 Washington Street, 5th Floor

(814) 532-4601

Johnstown, PA 15901-1622

Fax: (814) 532-4690

January 12, 2007

Sergeant Paul A. Styles Cuyahoga Metropolitan Housing Authority 5715 Woodland Avenue Cleveland, OH 44104

Dear Sergeant Styles:

I would like to express my sincere thanks and appreciation to you and your department for responding to the 2006 National Drug Threat Survey. Your response provided valuable information on both current and emerging drug trafficking threats in your jurisdiction. Please accept the enclosed certificate as a token of my appreciation for your assistance.

A copy of the recently published National Drug Threat Assessment 2007 that was based, in part, on results of the survey is included as a CD-ROM. The assessment combines intelligence and information on drug trafficking and abuse throughout the United States and includes information provided by state and local law enforcement agencies. The assessment is designed to provide information to policymakers and law enforcement executives at all levels of government that will assist them in formulating counterdrug plans and allocating resources. You also can view the report on the NDIC web site www.usdoj.gov/ndic.

The 2007 National Drug Threat Survey is scheduled for distribution during the first quarter of this year. I would again appreciate your assistance in providing us with a response to that survey. If you have any questions related to the assessment or the survey, please call Mr. Joseph E. Donovan, Acting Assistant Director for Intelligence, at (814) 532-4613.

Sincerely,

Irene S. Hernandez

June S. Kleinande

Acting Director

Enclosures

United States of America Department of Justice

National Drug Intelligence Center

## CERTIFICATE OF APPRECIATION



Awarded to

## Cuyahoga Metropolitan Housing Authority

for your contribution to the

National Drug Threat Survey **2006** 

June S. Kleinende Irene S. Hernandez, Acting Director



## **CMHA**

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Lieutenant Donna Correy - Administrative Lieutenant

FROM: Detective Daren Beichler - Range OIC

PAGE	SUBJECT	DATE
1 of 1	Range Qualification Sgt. Styles #656	13NOV06

Ma'am:

Sgt. Styles Qualified with his handgun on 01NOV06 (see attached range sign in sheet).

from the los minutes

Respectfully,

Detective Daren Beichler #54 – Range OIC

COMDOC\_

-NOV 2 0 2006



## C.M.H.A. CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO:	Sat	A.	622	4656
FROM:	Po	Ral	7	70
DATE:	300	cio	0	·

SUBJECT: Failur	e to Achieve Range Proficiency Requirements
Sat-Style	be a remove requirements
J. In the	. 51
JAN CORP	

On Scale you failed to demonstrate proficiency with your issued duty weapon during mandatory range qualification. I would therefore direct your attention to the Divisional Manual of Rules and Regulations, Chapter 10.1.10 "Use of Force", which states in part:

"Sworn Officers who fail to meet proficiency requirements will be granted a fourteen (14) day grace period in which to become proficient. Within this fourteen (14) day period the officer must, on his own time, report to the range for remedial training and certification. Officers who fail to achieve certification during this grace period shall be placed on leave without pay. If the Officer has failed to achieve certification after one (1) week of leave without pay, he shall be separated from the Police Department for failure to maintain certification."

I received this notification	1 on 10000 =
x ST Juff.	Stylo 650

Range Officer: What to the

## CMHA POLICE DEPARTMENT RANGE SIGN IN

RANGE OFFICERS: 30 h.11, 2,652

DATE: 18 1-25

Hopkins = 888

12.00 RANGE OFFICERS SIGNATURE All so PRAC/ QUAL 1 1000 136% 1200 1364 CALIBER HIE 12 ba X 3 45 子 ROUNDS 0 9 ٥ 0 9 9 Qual Table FIREARM SERIAL NUMBER 2176857 JU. SO34VS Z176857 Destoous 2176.257 DCS 076 W 06501203 55 osq 214857 MS12549 2176357 2176857 7589LIE Weapon Database FIREARM MODEL NOVA tron Berieu North Covery nova X.A.L. Nove NONA 9 3 K Benelli Bian FIREARM MAKE らろう GIOCK GOCK 13-chell! De ell. Benelli (0/0ch Berelli (10ck Shoot Table 0000 0000 0900 1730 0250 5201 TIME 0 936 1000 7. Andres Acro VAZANZ OFUS 1030 Z 1005 1118 these 7 Quilliak - mon #2 # 12 404 Range Tracking V Helecono & " 8 NAME/ BADGE # Bakenone O. Laicis \*\*Print Only \*\* ing () () 30



Fighting Heart Disease and Stroke

## Heartsaver CPR Paul A. Styles

This card certifies that the above individual has successfully completed the national cognitive and skills evaluations in accordance with the curriculum of the AHA for the Heartsaver CPR Program. Adult CPR / Pediatric CPR / Adult CPR & AED 10/12/06

Issue Date

Recommended Renewal Date

DIVISION OF STATE FIRE MARSHAL

# OHIO FIRE ACADEMY

CERTIFICATE OF TRAINING

Is awarded to:

## Paul A Styles

In recognition of completion of the

## 1st Responder HazMat/WMD/PPE Awareness - 8 hrs



Stephen K. Woltz Stephen K. Woltz State Fire Marshal

B. Frank Conway
B. Frank Conway
Superintendent

04/03/2006-04/03/2006

1753-2006-442



## **Emergency Management Institute**



## **FEMA**

This Certificate of Achievement is to acknowledge that

PARK A STYLES

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of this course:

IS-00200 ICS for Single Resources and Initial Action Incidents usued this 14th Day of September, 2006

FEMA Form 16-31, October 05

From:

"INDEPENDENT STUDY" <independent.study@dhs.gov>

To: Date: <rmorenz@cmhapd.org>
9/14/2006 12:36:17 PM

Subject:

Independent Study Course Information for Course: IS-00200

### Dear PAUL STYLES:

Congratulations! You have successfully passed the Independent Study Course "IS-00200" entitled "ICS for Single Resources and Initial Action Incidents".

Due to the thousands of people completing independent study courses, we estimate it will take approximately three weeks to issue your completion certificate. Please retain a copy of this email as proof of your completion until your certificate is received. We appreciate your patience.

Independent Study Program Office Emergency Management Institute National Emergency Training Center 16825 S. Seton Ave Emmitsburg, MD 21727

On the Web: www.training.fema.gov/emiweb/is

Phone: (301) 447-1200 FAX: (301) 447-1201 Paul Anthony STYLES#656 296-64-7073
ICS-200: ICS for Single Resources and Initial Action Incidents

Final Fram

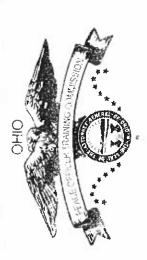
Final Exam

1)	invity of Commoneans that each individual involved in incident operations will be assigned to only one supervisor.
----	--

- (a) Span of Control
- (b) Unity of Command
  - (c) Supervisor Authority
- (d) Unified Command
- 2) Select the TRUE statement:
- Formal communication is used in reporting progress of assigned tasks.
- (b) Informal communication is prohibited within the Incident Command System.
- (c) Formal communication requires the use of written reports to document all interactions.
- (d) Informal communication is the preferred method for communicating resource needs.
- 3) Which is the top priority within the ICS common leadership responsibilities?
- (a) Ensuring safe work practices.
- (b) Establishing agency policies for future incidents.
- (c) Encouraging creativity and risk taking.
- (d) Enhancing partnerships with Agency Representatives.
- 4) These levels of the ICS organization may have Deputy positions:
  - Branch
  - Incident Commander
- (a) Division
- (b) Staging Area
- (c) Group
- (d) Section
- 5) Branches within the ICS organization can be established:
- (a) Geographically or functionally.
- (b) Along agency jurisdictional lines.
- (c) Within Groups to organize resources.
- (d) Under the supervision of a Leader.

Representatives from Assisting or Cooperating Agencies and Organizations coordinate through:
(a) Operations Section Chief
(b) Liaison Officer
(c) Public Information Officer
(d) Logistics Section Chief
<ul> <li>12) The information and intelligence function may be organized in one of the following ways:</li> <li>Within the Command Staff</li> </ul>
<ul> <li>As a Unit Within the Planning Section</li> </ul>
As a Branch Within the Operations Section
(a) As a separate General Staff Section
(b) At a separate Incident Command Post
(c) Under the Communications Unit within Logistics
(d) Outside the command structure for security reasons
13) Resources within the Staging Areas:
(a) Are managed by the Logistics Section.
(b) Are assigned and should be available for deployment.
(c) Include out-of-service resources that are being made ready for deployment
(d) Include those being made ready for demobilization and return to their jurisdictions.
to their jurisdictions.
14) The Operational Period Briefing:
(a) Presents the Incident Action Plan (IAP) for the upcoming period to supervisory personnel.
(b) Provides an orientation to individual resources at the beginning of their assignments.  (c) Sets forth the specific tasks, reporting relationships, and assess to the second
to the composition of the control of
(d) Helps keep the public and media informed about the incident status and operational accomplishments.
45) 240
15) Which Section is responsible for handling claims related to property damage, injuries, or fatalities at the incident?
(a) Operations Section
(b) Planning Section
(c) Logistics Section
(d) Finance/Administration Section

- 21) Typing resources allows managers to make better resource ordering decisions by:
- (a) Indicating how the resource can be used when deployed at the incident site.
- (b) Linking resources needed to execute typical response and recovery activities.
- (c) Providing detailed information about the best sources for procuring a needed resource.
- (d) Describing the size, capability, and staffing qualifications of a specific resource.
- 22) When command is transferred, then all personnel with a need to know should be told:
- (a) The qualifications of the incoming Incident Commander.
- (b) The limits of the Incident Commander's scope of authority.
- (c) The effective time and date of the transfer.
- (d) The Incident Commander's cell phone number.
- 23) Select the TRUE statement:
- (a) Upon arriving at an incident the higher ranking person will either assume command, maintain command as is, or reassign command to a third party
- (b) A lower ranking but more qualified person may not be designated as the Incident Commander.
- (c) Transfer of command procedures are implemented at the Emergency Operations Center before the Incident Commander arrives at the scene.
- (d) When a new Incident Commander assumes command, the outgoing Incident Commander should be demobilized to avoid confusion.
- 24) The Medical Unit is responsible for the development of the Medical Plan, obtaining medical aid, and:
- (a) Provision of emergency services to injured victims at the accident scene.
- (b) Transportation for injured and ill incident personnel.
- (c) Coordination with public health service to determine where critical resources are deployed.
- (d) Authorization prior to purchases of any medical supplies and services.
- 25) Which General Staff position conducts tactical operations, develops the tactical objectives and organization, and directs all tactical resources?
- (a) Finance/Administration Section Chief
- (b) Logistics Section Chief
- (c) Planning Section Chief
- (d) Operations Section Chief



# OHIO PEACE OFFICER TRAINING COMMISSION

CZY

# THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

## Paul A. Styles

has participated in the advanced training course

03-362-06-02: Controlled/Direct Buys in Drug Investgations

at the Ohio Peace Officer Training Academy given

September 8, 2006

Jing Petro Attorney General

Vernon P. Stanforth, Chairperson

Vernon F. Stantorth, Chairperson Ohio Peace Officer Training Commission

Steven W. Schierholt, Executive Director Ohio Peace Officer Training Commission

## TRAINING CONFIRMATION NOTICE

June 8, 2000

Dear Training Participant:

Sgt. Paul Styles

You have been scheduled to attend the workshop listed below. Please review this information and mark your calendar accordingly.

Title:

SEXUAL HARASSMENT PREVENTION

Date(s):

Wednesday, June 14th

Time:

9:00 a.m. until 12 noon

Location:

Carl B. Stokes Social Service Mall

6001 Woodland Avenue Cleveland, Ohio 44104

Questions? Call Al Daye, (216) 348-4960, extension 4079.

## PLEASE BE PROMPT



Academy / Accreditation
Training Manual
Ref: Accreditation Chapter 33





## TRAINING DOCUMENTATION

estigation Completion		
SUPPLEMENTA	AL TRAINING ACKNOWLEDGEN	MENT
NAME/BADGE #	SIGNATURE	DATE

COMDOC MM Solves



## **CMHA**

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul A. Styles #656, Sergeant- Third Platoon

FROM: Ronald J. Morenz #626, Lieutenant-3<sup>rd</sup> Platoon Watch Commander

PAGE	SUBJECT	DATE
1 of 3	Training- Proper Completion of an Investigation ref: Injury to	07APR03
	Protection Officer/ On-Duty	

As Supervisors we are tasked with completing investigations into various occurrences on our Platoons, one of these is for an On-Duty Injury to a Protection Officer. This type of investigation is important because it documents the nature and extent of the injury, in addition to providing the CMHA Human Resources Department with pertinent information for the timely processing of a Workman's Compensation claim. The following illustrates areas in which the investigation into the on-duty injury to Protection Officer Janet Gowdy #219 was lacking.

The title bar incorrectly stated the date as 16FEB03; the actual date of the injury and investigation was 16MAR03. The dates of all the paperwork associated with the investigation should be the same, unless the treatment at the hospital takes the investigation into another day.

The first paragraph tells the authors assignment, where they responded to, and why. This may also include the names of officers they were meeting. The proper identification for an officer the first time in an investigation is PO John Doe #00. Rank, first name, last name, and badge number.

The second paragraph starts with the author's observations of the scene upon their arrival. Their conferring with units, officers, victims, witnesses, and suspects, on-scene follows. The proper way to initially identify a person is first name, middle initial, last name, race, sex, age, social security number, date of birth, complete address, and telephone number where they can be contacted. A synopsis of each interview is presented. It should be noted if written statements were requested or received.

The next paragraph discusses the action taken. Were there visible injuries? Were there photographs taken of the injuries? Were there photographs taken to document no injuries? Was medical treatment offered or accepted? What action was taken towards the suspect?

The next paragraph explains what medical treatment was sought and where. Also included is the extent of the injury, any medications given or prescribed, work restrictions if any, and time for a follow-up visit. The name of the Attending Physician is also part of this section. There should also be

PAGE	SUBJECT	DATE
2 of 3	Training- Proper Completion of an Investigation ref: Injury to	07APR03
	Protection Officer/ On-Duty	

documentation regarding the officer completing a urinalysis, in accordance with Departmental and Agency Rules and Regulations. There should be a statement in the investigation letting the recipient know that the proper CMHA Incident Forms were completed and faxed to the Human Resources Department, including date and time.

The next paragraph is where the author makes their determination, was the injury preventable or not? There should be a brief statement supporting either determination. This is followed by the determination if the officer was in violation of any laws or rules and regulations at the time of the incident.

The last paragraph describes the final action the author is requesting, the investigation be closed, or the preference of Departmental Charges.

When a Protection Officer signs their name they are not to use the initials PO in front of their name. The words Protection Officer must be written out. PO is an abbreviation for Patrol Officer.

When completing a Case Report titled Injury to Person/CMHA Employee, the narrative should only state, "This report contains confidential medical information." There should be no other information in the report. All of the other information contained in other sections of the report must also be accurate before the supervisor approves the report.

All forms submitted by the investigating Supervisor must be signed.

When these steps are not followed completely, there is a breakdown in the system. The report includes inaccurate or incomplete information, lacks the proper signatures and cannot be processed, does not get faxed to Human Resources which may result in the officer being billed for medical services rendered, and requires other officers, whose responsibilities cannot be handled until the supervisor turns in their properly completed report, to hurry their responsibilities which could cause error on their part.

The proper completion of investigations by a supervisor is a must. Each supervisor has had a number of training classes on this subject, and should be familiar with the proper completion of same. This is a responsibility of being a supervisor and should not be taken lightly. All reports and investigations submitted should be complete, correct, and bear the proper signatures of those officers involved.

This is additional training reference to the proper completion of investigations.

PAGE	SUBJECT	
3 of 3	Training- Proper Completion of an Investigation ref: Injury to	07APR03
	Protection Officer/ On-Duty	

I have received this training and understand its content.

SGT- Paul A. Styles #656

Date/

9-27-03 0200 Date/ Time

Supervisor issuing training.

Academy / Accreditation
Training Manual
Ref: Accreditation Chapter 33

## TRAINING DOCUMENTATION

This is to certify that I have received a copy of and training on the following topic:

Investigations/ Preparation of Departmental Charges/ Reviewing Reports/ Step-1

Grievance Procedures & Proper Paperwork Completion

SUPPLEMEN	TAL TRAINING ACKNOWLEDGEMI	ENT
NAME/BADGE#	SIGNATURE	DATE
Sgt. Paul Styles #656	SGT. Styles #651	05AUG04

1420-1540

Supervisor Issuing: 4

Supervisor Issuing:

COMDOC

AUG 18 mal

PAGE	SUBJECT	DATE
1 of 1	Supplemental Training- Investigations/ Preparation of	05AUG04
1	Departmental Charges/ Reviewing Reports/ Step-1 Grievance	05/10/04
	Procedures & Proper Paperwork Completion	

The CMHA Police Department is a nationally accredited Police Department that holds itself to high standards. All investigations completed by its supervisors must conform to departmental standards. They must include complete names and pertinent information from all of the parties involved in the incident. A supervisors report must be written in such a manner, that the person reading the investigation could obtain all of the necessary information for them to draw a conclusion. Investigations need not contain extra wording that is not pertinent to the facts of the case. They should be focused directly on the incident at hand, as well as, any history that the parties might have together. It is a supervisors' responsibility to insure that all of their investigations are completed to Departmental Standards.

All reports completed by its officers must conform to departmental standards. They must include complete names and pertinent information from all of the parties involved in the incident. An officer's report must be written in such a manner, that the person reading the report could obtain all of the necessary information for them to draw a conclusion. Reports need not contain extra wording that is not pertinent to the facts of the case. Reports should be focused directly on the incident at hand, as well as, any history that the parties might have together. It is a supervisors' responsibility to insure that all of their subordinates are writing reports correctly. If not, they must show the officer their mistake, and take steps to correct the deficiency. If it cannot be handled on a platoon level, assistance can be rendered through the Training Bureau.

The Department is confident that his training will help its Officers to better understand the reasons for honesty and integrity, and how it affects the daily operations of the Department and its officers.

From:

Paul Styles

To:

Sharon Barto

Date:

8/5/2004 5:31:08 AM

Subject:

Matrix

Commander Protection Officer Flowers #257 is temp transfer to Third Platoon in E class. I thied to put her in the matrix and mest it up. Can you fix it for me please.

## **SUPERVISORY TRAINING - 23DEC02**

I. DISCIPLINE: (Effective: 01JAN03)

ACP: Written Warning

Written Warning (No approval necessary to execute)
Written Reprimand (No approval necessary to execute)

(No approval necessary to execute)

(Re: last paragraph...still confident...)

(Re: last paragraph....additional discipline...)

(Re: last paragraph....suspension or termination)

General: Written Warning

Warning (Approval necessary prior to execution)

Written Reprimand (Approval necessary prior to execution)

(Process: check for proper disc. In general and for officer)

(Re: paragraph #1....change: date/time/etc.)

General Mock Written Warning

(Re: paragraph#1, 1st sentence... date/time/violation/where)

## II. INVESTIGATIONS: Reminder list for specific subjects

**Specific Information:** 

See attached lists for:

- 1) MVAs
- 2) Injuries (on/off duty)
- 3) Use of force

### Points to remember:

- The lists will not be all inclusive of every detail needed. Every investigation is somewhat different and would require more information than others of the same type.

  For example: Injury to P.O. (struck by a vehicle standing outside of the police car)

  Injury to P.O. (struck by a vehicle due to tripping, or slipping on ice)

  In the latter, description and photos of the officer's shoes and pavement may be necessary.
- The Agency having Jurisdiction (AHJ) controls the investigation.
- CMHA Police still needs to complete an investigation for the Agencies protection and statistics. However, we cannot hinder the AHJ's investigation. We can assist if needed.
- The CMHA supervisor on scene of an event makes contact with the AHJ's supervisor for coordination.
- Assure the AHJ that we will assist them and advise that we are completing an investigation as per CMHA procedures.
- Get a contact person's name and telephone number and advise that our Detective Bureau, for example, will be in contact with them for any additional information of a mutual concern.

## III. FORMATTING the 94-001 for <u>reports</u> and <u>investigations</u> - (General)

- 1. Subordinates (Civilian Support Personnel, Dispatchers, Protection Officers, Police Officers)
- 2. Supervisors (Immediate, Watch Commanders/Unit OICs, Commanders)

## **SUPERVISORY TRAINING - 23DEC02**

- 1) Introduction (who are you & who working with; car assignment, using what car; how & when received, etc)
- 2) Synopsis (a brief overview of the incident)
- 3) Investigation (what you did)
- Summary (Summarizes the investigation-high points)
   Conclusion (What should be done about your investigation)
- 6) Attachments (a list of documents, and/or photos supporting or corroborating the investigation. The investigation package should contain the attachment list in order. For example: your first attachment listed would be placed first after your investigative report; the second would be next and so on

and so forth.)

## IV. MOCK INVESTIGATION - SUPERVISORS

## V. MOCK REPORTS for SUBORDINATES

## VI. SHIFT TRAINING for personnel

Training subjects are and will continue to be placed into the application launcher in Office 2000. At present the Vehicle Operation Reference Manual (VORM) is the only one. However, as subjects come up, they will be added.

**Example:** You have officers that are not completing MM Citations properly. They need training. You set up a training program citing particular additional material (DNs, GPOs, Policy & Procedures Manual, etc.) if necessary. Then that program is forwarded to 605 via e-mail. If approved you will be notified and it will be entered into the application launcher for you and other supervisors to use for the training. A *sign off sheet* will precede the actual training material in the computer. Upon completion the officer/s will sign and you will forward it through channels. Do not complete any unapproved training.

Various subjects will come up that can be handled or corrected by shift training. Some examples:

- 1. Officer/s not wearing the proper or required uniform. (non-police pins or signage, not wearing ties or hats, etc. Whether you would be instructing one officer or all of the officers under your command, each officer would sign the sign off sheet. The sign off sheet would contain the title: Uniform of CMHA Police Officers; Uniform of CMHA Protection Officers; Uniform of CMHA Dispatchers. In this situation you would have training on the pertinent section of the Manual of Rules and Regulations, for example.
- 2. Officers not performing safety checks or improperly performing them. Whether you would be instructing one officer or all of the officers under your command, each officer would sign the sign off sheet. The sign off sheet would contain the title: Safety Checks by CMHA Personnel. In this situation you would be relying on D.N. #97-025 and

## **SUPERVISORY TRAINING - 23DEC02**

Training Bulletin #97-08.

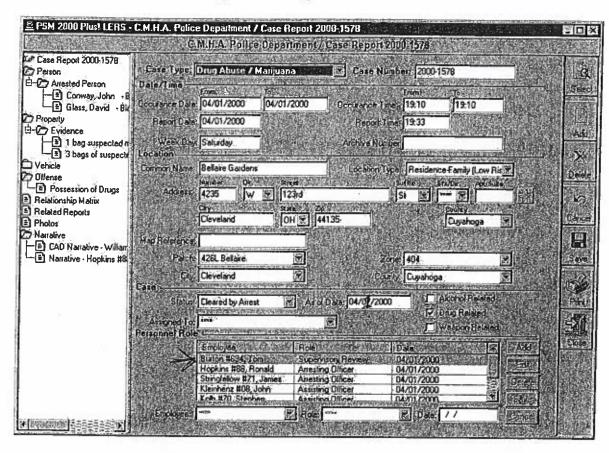
The above examples are to help with developing training for your personnel. Remember, training must be approved by the Training Coordinator prior to execution.

## VII. DEPARTMENT HEADER - Effective 01JAN03

Consistency in Headers for police correspondence

Effective 01JAN03 <u>all</u> Police Correspondence will use the attached header on the CMHAPD94-001.

Page 1 Case Report Information



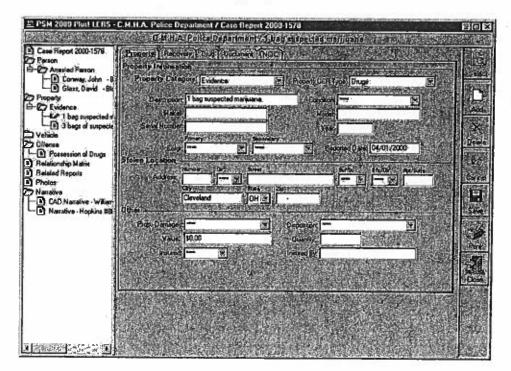
Person(s) E PSM 2008 Plust LERS - C.M.H.A. Police Department / Case Report 2008-1578 CMHA Police Department//Conway, John / tellaco Mark Potton | Descript | Senting | Sec. | HOTON'S | Employeen | (Volum | Julia Peson | Triplos (efficie) Arrested Person Corway, John @ Glass, David - 81 Property Mac 8 1 bag suspected
3 bags of suspec Ave. E Geveland OH E 44135 Possession of Drugs Relationship Matrix Related Reports Home [216] -Wood [216] Photos Celular (216) -Pager, (216) -4 CAD Nanative - William

Natrative - Hopkins #8 ore of Birty 11/10/1984 Special Security No. Apa 15 10 ST Sek Maie 150 Heise Black Ethnic Diggra Black Her Yes Maran Statut Single Reigion Baptist иносу Туре. State Non-Resident (CMHA) Place of Bath Cleveland A Country OH B United States of America 3 Dover License # ---- W & --12 A CONTRACTOR OF THE PARTY OF

Person(s) #2

	CMHA. Police Department / Case Report 2000-1578  (EMH/A Rollies Departments/Glass (David 28) (EV/M)	F [3
a Case Report 2000-1578 Person C Person C Conway John ⋅ B C Glass, David ⋅ Bk C Property C Evidence C The Say Son of Suspected in Son Suspect	Person Descriptors depicted State (VIII) Englayment (VIIII) MILES (Propa) (Pro	一位 医
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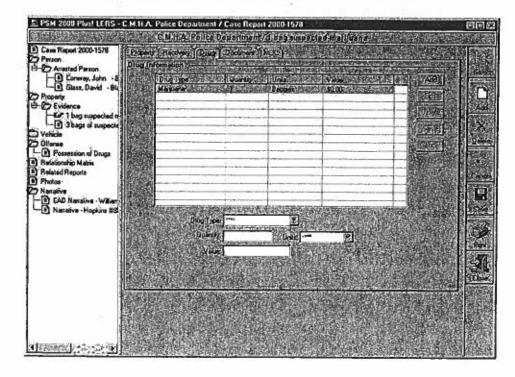
Property



Property #2

a Case Report 2000-1578	TO THE PERSON NAMED IN CO. CO. ASSESSMENT OF	Police Departme ex   Diud   Occur	The Parales of Parales	fsuspected	marijuana		
Person B- Z Arrested Person	Property Informati	on 🚃 📜					113
Conway, John - Bl.  Glass, David - Bl.	Property Cate	WHITE TO SE	<b>第一个数字是图4</b> 章	Property DCR	<b>经产品的</b>		
Property.  B-C Evidence  1 bag suspected m	Description Make:	3 bags of suspected	marijuana	Condition	STATE OF THE PARTY OF THE PARTY.		Add
3 bags of suspected	Sejal Number		70	Ye	STATE OF THE PARTY OF THE PARTY OF		$\  \cdot \ $
Offense  Possession of Drugs	Color	in 5	Secondary 1	<b>S</b> 6	ported Date: 04/01	/2000	Delete
Relationship Matrix Related Reports	Stolen Location	Name OF	Streat	O COM	Surfice Study	Aprisar	Const
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	Other						Save
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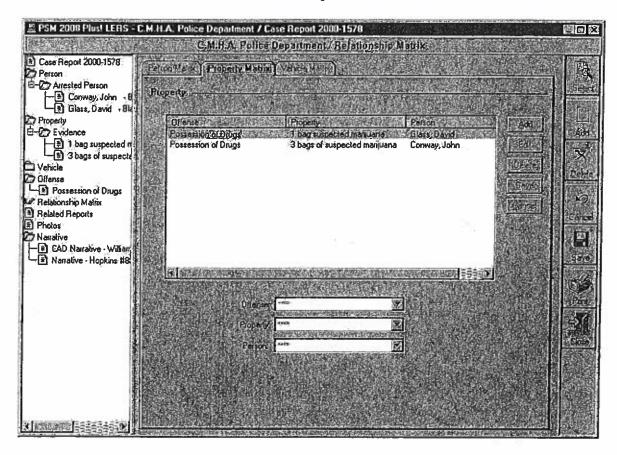
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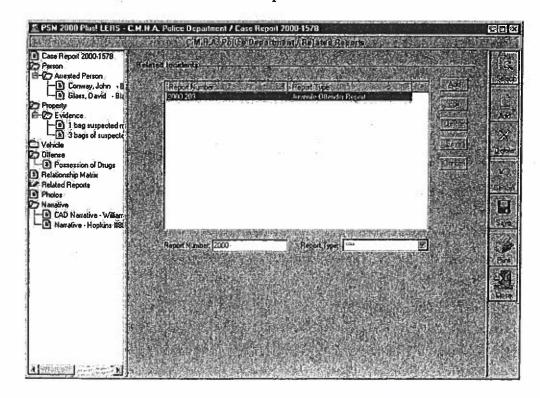
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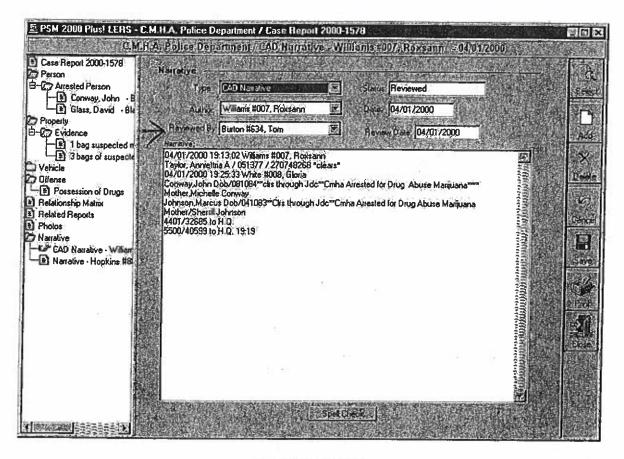
#### Relationship Matrix



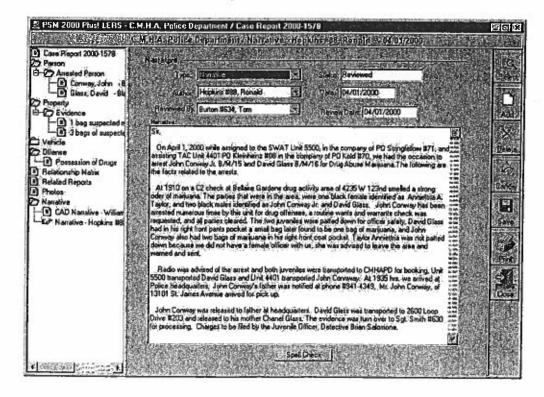
#### Related Reports



#### **CAD** Narrative



#### Report Narrative





#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

John Law, Lieutenant #621, Watch Commander 3<sup>rd</sup> Platoon

FROM:

Sam Sneed, Sergeant #699, 3rd Platoon supervisor

PAGE	SUBJECT	DATE
	Assignment from the Complaint	
1 of 5	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

#### [Part 1-INTRODUCTION]

On 01JAN03 at 0200 hrs., while assigned to car 555 supervising 3<sup>rd</sup> platoon sector 1 personnel, I received this assignment via land line from (Sergeant Joe Dokes of the Complaint Investigation Unit)

#### [Part 2-SYNOPSIS]

The assignment alleged that Sgt. Dokes' reliable informant advised him that one of the patrol officers assigned to the  $3^{\rm rd}$  platoon was intoxicated and asleep in a zone car in the rear of 1441 W.  $25^{\rm th}$  Street.

#### [Part 3-INVESTIGATION]

I arrived at the location at 0215 hours and observed zone car 299A parked in the rear of 1441 W. 25<sup>th</sup> Street at the extreme southern part of the lot. Being that the area was dimly lit, I was unable to see any occupant in the zone car from my vehicle. I exited and approached zone car 299A finding P.O. Majors apparently asleep slumped in the driver's seat. I observed an open partially empty 40 oz. bottle of Iron City Beer between P.O. Majors legs. In the passenger seat I observed a full, unopened 40 oz. bottle of Iron City beer. I opened the passenger door of the zone car, removed the two bottles of beer, then attempted to wake P.O. Majors. After three tries P.O. Majors awoke and was ordered out of the vehicle. P.O. Majors eyes were dilated, speech slurred and staggered as he walked.

## \*\*\*FOR TRAINING USE ONLY\*\*\* \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
1	Assignment from the Complaint	}
2 of 5	Investigation Unit: Regarding activities of	01JAN03
2 01 5	P.O. Lee Majors #1	

He surrendered his weapon and cigarettes to me, then got into my vehicle as ordered. I advised RCC to send car 399 to assist me and requested the Watch Commander be notified to call me on the Departmental cell phone assigned to me.

P.O. John Smith #2 and P.O. Jane Doe #3 on car 399 arrived at 0235 hrs. I instructed them to inventory car 299A for unauthorized property and damage then drive it back to HQ. I also advised them to remove P.O. Majors personal property and secure it at HQ.

After conferring with Lt. Law by cell phone, I conveyed P.O. Majors to St. Vincent Charity Hospital(SVCH), arriving at 0240 hrs. At my instruction Mary Jones, R.N. administered a B.A.T. and urinalysis to P.O. Majors at 0255 hrs. The B.A.T. results were .20%. Urinalysis results pending. I conferred with Lt. Law via land line at SVCH and advised him of the B.A.T. results. He ordered that I convey P.O. Majors back to HQ for a conference with him.

Upon arrival at HQ at 0330 hrs., I attended the conference with Lt. Law and P.O. Majors. Lt. Law then ordered that P.O. Majors be relieved from duty pursuant to G.P.O. 01-001, Emergency Relief from Duty at 0350 hrs. Lt. Law then conferred with John Wayne, Patrol Commander, who set a Hearing date of 04JAN03 at 0900 hrs., in his office. P.O. Majors was verbally notified of the Hearing date and time. At the order of Lt. Law I conveyed P.O. Majors to his place of residence. P.O. Majors' personal vehicle was secured at HO.

I placed the two 40 oz. bottles of beer confiscated into evidence as per procedures. I turned over the CMHA P.D. Glock Model 21 bearing serial #111111, assigned to P.O. Majors, to Lt. Law in HQ at 0345 hrs.

#### [Part 4-SUMMARY]

This investigation determined that P.O. Majors was intoxicated while armed and on duty thereby creating a hazardous condition endangering himself and others.

## \*\*\*FOR TRAINING USE ONLY\*\*\* \*\*\*FOR TRAINING USE ONLY\*\*\*

Ī	PAGE	SUBJECT	DATE
ı		Assignment from the Complaint	
3 of 5	Investigation Unit: Regarding activities of	01JAN03	
	5 01 5	P.O. Lee Majors #1	

#### [Part 5-CONCLUSION]

As a result, P.O. Majors was in violation the Manual of Rules and Regulations and Policy and Procedures of the Department as well as the Administrative Orders of CMHA. I respectfully request preference of the following Departmental Charges against P.O. Majors:

**RULE:** The 1<sup>st</sup> rule violation listed would not be necessarily the most important violation, but the one that actually defines the particular primary violation. In this case, for example, it might be:

**RULE:** 1.2.1.04-Drink alcoholic beverages while on duty or in uniform.

<code>SPECIFICATION:</code> On 01JAN03 at 0215 hrs., while in the rear parking lot at 1441 W.  $25^{\rm th}$ , in zone car 299A, was intoxicated and sleeping while on duty.

RULE: Now you would list the appropriate supporting charges in <u>numerical</u> order, for example: 1.1.2 Gross neglect of duty; 1.1.5 Failure to obey...; 1.1.6 Conduct unbecoming...; 1.1.8 Any other reasonable...; 1.1.9 This section incorporates...; etc.

NOTE: Once all of the Police Department Rules, Regulations, Policy and Procedure violations have been listed, then list the A.O. 11 violations. Usually A.O. 11.10.03 (violate any CMHA rules) will cover most of the situations encountered. NOTE: When completing the "specification" section for each Rule violation, in most cases it is permissible to use the phrase, "as stated in above specification". However, if the next Rule violation you cite is not explained or related to the preceding specification, you will need a new explanation in the specifications. For Example: if you cite Rule 1.1.2, you need to explain how his action caused him to grossly neglect his duty.

#### \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
	Assignment from the Complaint	
4 of 5	Investigation Unit: Regarding activities of	01JAN03
1 01 0	P.O. Lee Majors #1	

You may state, while P.O. Majors was intoxicated and asleep on duty and in his vehicle, he grossly neglected his sworn duties to protect the lives of CMHA residents and its property. He elected to be intoxicated thereby rendering him incapable of making life and death decisions.

When citing the Rule about sleeping on duty you may state, while P.O. Majors was asleep on duty and in his vehicle, he was incapable of responding timely to any threat or immediate necessary action that police officers encounter constantly.

In another Rule or Policy you may show that what the officer did not only endangered the officer, but the residents, the public in general and police officers.

The above format continues until all charges are listed and specified. In this situation you would also need to address the violation of law. For example:

Further, it appears that P.O. Majors may be in violation of ORC2923.15-Using weapons while intoxicated. I request that the Internal Affairs Unit investigate the possible violation of law. Lt. Law was notified of this request.

NOTE: It is important that when you request another unit to investigate or perform some act, they <u>must</u> be notified. Usually, for example, in a LERS report you would send a copy of that report to the Detective Bureau O.I.C. when you're requesting the detectives to follow-up on the initial incident. Otherwise the report remains dormant without any follow-up. The same holds true for an investigation when you request follow-up.

#### \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
	Assignment from the Complaint	
5 of 5	Investigation Unit: Regarding activities of	01JAN03
3 01 3	P.O. Lee Majors #1	

#### [Part 6-ATTACHMENTS]

#### Attachments:

- 1-CMHAPD94-001 Dated 01JAN03 from P.O. Smith #2
- 2-CMHAPD94-001 Dated 01JAN03 from P.O. Doe #3
- 3-CMHAPD94-016 Notification of urine test dated 01JAN03

Respectfully,

Sam Sneed, Sergeant

#### **DISCUSSION QUESTION:**

Are there points that would be important to this investigation that were left out? If so, what would they be?

# \*\*\*FOR TRAINING USE ONLY\*\*\* \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
	Assignment from the Complaint	
1 of 1	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

DISCUSSION QUESTION:

[For supervisors' investigation]

I purposely left out some points that would be important to this investigation. What would they be?

- 1. "and request for preference of Departmental Charges" in subject box.
- 2. Was the officer interviewed? If not, explain why.
- 3. During the officer's interview, one of the 1<sup>st</sup> questions would be is he a diabetic.
- 4. Was there an odor of alcohol on his breath?
- 5. Were there any other persons on the scene?
- 6. If so, did you interview them? If not, explain why.
- 7. Did you contact the CIU OIC to advise what happened and if there was anymore information regarding the incident and obtain an investigation number?
- 8. What about ammunition, badge and identification swipe card. Were they also confiscated? If not explain why?
- 9. A report from members of car 399 as to what they did and observed while involved in the assignment.



#### **CMHA**

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Sam Sneed, Sergeant #699, 3rd Platoon supervisor

FROM:

John Smith, Patrol Officer #2

PAGE	SUBJECT	DATE
1 of 2	Activities in c/w assignment at 1441 W. 25 <sup>th</sup>	01JAN03

#### [Part 1-INTRODUCTION]

On 01JAN03 at 0400 hrs., I was ordered by Sgt. Sam Sneed to make a report on activities regarding an assignment handled at 1441 W.  $25^{\rm th}$  St.

#### [Part 2-SYNOPSIS]

On 01JAN03 at 0225 hrs., while assigned to car 399, in company with P.O. Jane Doe #3, we received an assignment from RCC to assist car 699 in the rear of 1441 W. 25<sup>th</sup>. Upon arrival at 0235 hrs., we conferred with Sgt. Sam Sneed, who instructed us to record our observations, inventory car 299A for unauthorized property and damage then drive it back to HQ. Further, we were instructed to remove P.O. Majors personal property and secure it at HQ.

#### [Part 3-INVESTIGATION]

We inventoried car 299A on the scene, with the following results:

#### Contraband seized-

- 1) Three(3) 40oz. bottles of Iron City beer on the floor of the rear seat area behind the driver under a bullet proof vest;
- 2) Two(2) marijuana cigarettes (roaches) in the front ashtray; and,
- 3) One (1) case of 24, 12 oz. bottle of Iron City beer in the trunk.

#### \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
2 of 2	Activities in c/w assignment at 1441 W. 25 <sup>th</sup>	01JAN03

#### Personal property removed for safe keeping-

- One(1) Armour Brand bullet proof vest bearing serial # 2222222 on the front panel and #2222223 on the rear panel. An identification tag on the inside front panel contained P.O. Majors' name and badge number. This was located on the floor in the rear seat compartment behind the driver.
- 2) One(1) brown 1'x 2' brief case (no brand name or serial number) found in the trunk. It only contained miscellaneous departmental forms. The identification card contained P.O. Majors' name.

Upon inventory, I did not view any interior or exterior damage to Car 299A. It was driven back to HQ by P.O. Doe #3 and secured in the police lot at 0345 hrs. P.O. Majors' personal vehicle, is a 1999 Ford Explorer, blue in color, bearing Ohio License #LM 1. I observed his vehicle was locked and secured in the HQ Police Lot.

The contraband and P.O. Majors' personal property was conveyed by us to HQ. There the contraband was tagged and entered into the property book and placed into the evidence safe by P.O. Doe #3. I secured P.O. Majors' personal property into his personal locker.

#### [Part 4-SUMMARY]

Upon completion of this assignment at 0430 hrs., we reported to Sgt. Sneed for further instructions. He advised us to return to our regularly assigned duties. RCC notified at 0435 hrs.

[Part 5-CONCLUSION]

If applicable

[Part 6-ATTACHMENTS]

If applicable

Respectfully,

John Smith, P.O.

#### DISCUSSION OUESTION:

Are there points that you would want the officer to put in, or that should be in the report? If so, what would they be?

#### \*\*\*FOR TRAINING USE ONLY\*\*\*

#### DISCUSSION QUESTION: [For subordinates' report]

Are there points that you would want the officer to put in, or should be in the report? If so, what would they be?

- 1. Was there an odor of alcohol and/or marijuana in car 299A?
- 2. The report from members of car 399 did not contain what they observed while involved in the assignment, in relation to seeing P.O. Majors on scene.
- 3. "I secured P.O. Majors' personal property into his personal locker." Is there a problem with that?

\*\*\*FOR TRAINING USE ONLY\*\*\*



#### CMHA

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Gregory Drew, Police Officer #04 - SWAT

FROM:

disciplinary hearing.

This grievance cannot be resolved at this level.

I have received a copy of this Step One Grievance.

Signed\_\_\_\_\_\_ Date\_\_\_\_

Melvin I. Guinn, Sergeant #624 - SWAT OIC

PAGE 1 of 1	SUBJECT	Step One Grievance Respons	se DA	te 04AUG04
On 28JUL	.04 I convened a	Step One grievance hearing with you r	egarding a Written Reprima	and that you
		. The reprimand resulted from Dep		
Shaughnes	ssy #654 forwa	ded against you for an incident rega	arding improper procedure	es during a
prisoner tr	ansport on 13M.	AR04. You stated that you wished to h	have the reprimand remove	d from your
file becau	se PO Eric Riv	es #86 was the senior officer and w	as operating the vehicle,	you already

received a shift counseling from Sgt. Shaughnessy on 13MAR04, and you were never given a Pre-

Melvin I. Guinn, Sergeant



#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Eric Rives, Police Officer #86 – Third Platoon

FROM:

Thomas Imes, Lieutenant #628 - Third Platoon Watch Commander

PAGE	SUBJECT	DATE
1 of 2	Step One Grievance	04AUG04
	Step and distance	

On 31JUL04 I conducted a Step One grievance hearing with you regarding a Written Reprimand that you received on 20JUL04 as a result of Departmental Charges that were levied against you by Sgt. Paul J. Shaughnessy #654 (ref X04-023). You stated that you wished to have the reprimand dismissed and removed from your file based on the following grounds:

- 1. You received a verbal shift counseling for the infraction on 13MAR04
- 2. You were verbally threatened, harassed, and intimidated on the same date
- 3. On 16MAR04 Sgt. Shaughnessy ordered you to write a report regarding the incident after he became aware that you forwarded a written complaint against him (ref X04-022) and the Written Reprimand was retaliation against you.
- 4. The offense was your first and a Written Reprimand was not progressive discipline based on Rules and Regulations (RR) Section 11.1.5.02B.
- 5. The Written Reprimand that you received was not the preferred method of discipline under *RR* 11.1.7.01
- 6. The violation was a minor infraction and did not fall under RR 11.1.3.01

It was your contention that the verbal shift counseling that you stated received on 13MAR04 and the Written Reprimand that you received on 20JUL04 constituted "double discipline" for the same infraction.

Upon my review, this grievance cannot be resolved at this level.

#### Attachments to this report:

- CMHA PD 94-001 report from PO Eric Rives #86 dated 28JUL04
- CMHA PD Manual of Rules and Regulation Section 11.1.3.01; 11.1.5.02B
- CMHA PD Manual of Rules and Regulation Section 11.1.7.01

Thomas Imes, Lieutenant

PAGE	SUBJECT	DATE
2 of 2	Step One Grievance	04AUG04
	Step One Offerance	

I have received a copy of this Step On	e Grievance.
Signed	Date

TO SERVICE STATE OF THE SERVIC

Academy / Accreditation
Training Manual
Ref: Accreditation Chapter 33

#### TRAINING DOCUMENTATION

This is to certify that I have received a copy of and training on the following topic:

<u>Investigations/ Preparation of Departmental Charges/ Reviewing Reports/ Step-1</u>
<u>Grievance Procedures & Proper Paperwork Completion</u>

SUPPLEMENTAL TRAINING ACKNOWLEDGEMENT				
NAME/BADGE #	NAME/BADGE # SIGNATURE DATE			
Sgt. Paul Styles #656	56T. Styles # 651	05AUG04		

1420-1540

Supervisor Issuing: <u>Je</u>

Supervisor Issuing:

MAY 0 8 2000

COMDOC

PAGE	SUBJECT	DATE
1 of 1	Supplemental Training- Investigations/ Preparation of	05AUG04
1	Departmental Charges/ Reviewing Reports/ Step-1 Grievance	05710004
	Procedures & Proper Paperwork Completion	

The CMHA Police Department is a nationally accredited Police Department that holds itself to high standards. All investigations completed by its supervisors must conform to departmental standards. They must include complete names and pertinent information from all of the parties involved in the incident. A supervisors report must be written in such a manner, that the person reading the investigation could obtain all of the necessary information for them to draw a conclusion. Investigations need not contain extra wording that is not pertinent to the facts of the case. They should be focused directly on the incident at hand, as well as, any history that the parties might have together. It is a supervisors' responsibility to insure that all of their investigations are completed to Departmental Standards.

All reports completed by its officers must conform to departmental standards. They must include complete names and pertinent information from all of the parties involved in the incident. An officer's report must be written in such a manner, that the person reading the report could obtain all of the necessary information for them to draw a conclusion. Reports need not contain extra wording that is not pertinent to the facts of the case. Reports should be focused directly on the incident at hand, as well as, any history that the parties might have together. It is a supervisors' responsibility to insure that all of their subordinates are writing reports correctly. If not, they must show the officer their mistake, and take steps to correct the deficiency. If it cannot be handled on a platoon level, assistance can be rendered through the Training Bureau.

The Department is confident that his training will help its Officers to better understand the reasons for honesty and integrity, and how it affects the daily operations of the Department and its officers.

From:

Paul Styles

To:

Sharon Barto

Date:

8/5/2004 5:31:08 AM

Subject:

Matrix

Commander Protection Officer Flowers #257 is temp transfer to Third Platoon in E class. I thied to put her in the matrix and mest it up. Can you fix it for me please.

#### **SUPERVISORY TRAINING - 23DEC02**

#### I. DISCIPLINE: (Effective: 01JAN03)

ACP:

Written Warning

(No approval necessary to execute)

Written Reprimand

(No approval necessary to execute)

(Re: last paragraph....still confident...)

(Re: last paragraph...additional discipline...)

(Re: last paragraph...suspension or termination)

General:

Written Warning

(Approval necessary prior to execution)

Written Reprimand (Approval necessary prior to execution)

(Process: check for proper disc. In general and for officer)

(Re: paragraph #1....change: date/time/etc.)

General Mock Written Warning

(Re: paragraph#1, 1st sentence... date/time/violation/where)

#### II. INVESTIGATIONS: Reminder list for specific subjects

Specific Information:

See attached lists for:

- 1) MVAs
- 2) Injuries (on/off duty)
- 3) Use of force

#### Points to remember:

- The lists will not be all inclusive of every detail needed. Every investigation is somewhat different and would require more information than others of the same type.

  For example: Injury to P.O. (struck by a vehicle standing outside of the police car)

  Injury to P.O. (struck by a vehicle due to tripping, or slipping on ice)

  In the latter, description and photos of the officer's shoes and pavement may be necessary.
- The Agency having Jurisdiction (AHJ) controls the investigation.
- CMHA Police still needs to complete an investigation for the Agencies protection and statistics. However, we cannot hinder the AHJ's investigation. We can assist if needed.
- The CMHA supervisor on scene of an event makes contact with the AHJ's supervisor for coordination.
- Assure the AHJ that we will assist them and advise that we are completing an investigation as per CMHA procedures.
- Get a contact person's name and telephone number and advise that our Detective Bureau, for example, will be in contact with them for any additional information of a mutual concern.

#### III. FORMATTING the 94-001 for reports and investigations - (General)

- 1. Subordinates (Civilian Support Personnel, Dispatchers, Protection Officers, Police Officers)
- 2. Supervisors (Immediate, Watch Commanders/Unit OICs, Commanders)

#### **SUPERVISORY TRAINING - 23DEC02**

- 1) Introduction (who are you & who working with; car assignment, using what car; how & when received, etc)
- 2) Synopsis (a brief overview of the incident)
- 3) Investigation (what you did)
- Summary (Summarizes the investigation-high points)
   Conclusion (What should be done about your investigation)
   Attachments (a list of documents, and/or photos supporting or
  - Attachments (a list of documents, and/or photos supporting or corroborating the investigation. The investigation package should contain the attachment list in order. For example: your first attachment listed would be placed first after your investigative report; the second would be next and so on and so forth.)

#### IV. MOCK INVESTIGATION - SUPERVISORS

#### V. MOCK REPORTS for SUBORDINATES

#### VI. SHIFT TRAINING for personnel

Training subjects are and will continue to be placed into the application launcher in Office 2000. At present the Vehicle Operation Reference Manual (VORM) is the only one. However, as subjects come up, they will be added.

**Example:** You have officers that are not completing MM Citations properly. They need training. You set up a training program citing particular additional material (DNs, GPOs, Policy & Procedures Manual, etc.) if necessary. Then that program is forwarded to 605 via e-mail. If approved you will be notified and it will be entered into the application launcher for you and other supervisors to use for the training. A *sign off sheet* will precede the actual training material in the computer. Upon completion the officer/s will sign and you will forward it through channels. Do not complete any unapproved training.

Various subjects will come up that can be handled or corrected by shift training. Some examples:

- 1. Officer/s not wearing the proper or required uniform. (non-police pins or signage, not wearing ties or hats, etc. Whether you would be instructing one officer or all of the officers under your command, each officer would sign the sign off sheet. The sign off sheet would contain the title: Uniform of CMHA Police Officers; Uniform of CMHA Protection Officers; Uniform of CMHA Dispatchers. In this situation you would have training on the pertinent section of the Manual of Rules and Regulations, for example.
- 2. Officers not performing safety checks or improperly performing them. Whether you would be instructing one officer or all of the officers under your command, each officer would sign the sign off sheet. The sign off sheet would contain the title: Safety Checks by CMHA Personnel. In this situation you would be relying on D.N. #97-025 and

#### **SUPERVISORY TRAINING - 23DEC02**

Training Bulletin #97-08.

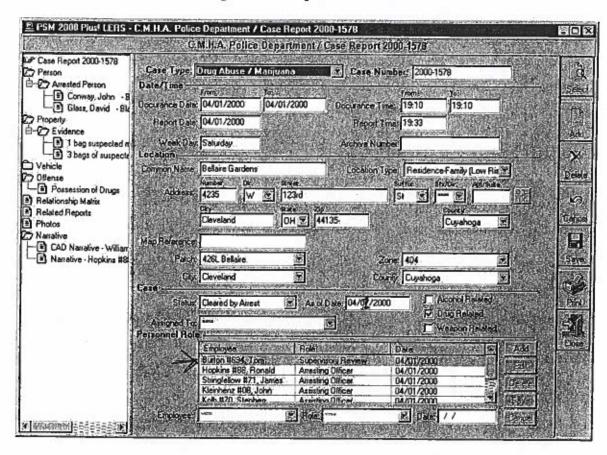
The above examples are to help with developing training for your personnel. Remember, training <u>must be</u> approved by the Training Coordinator prior to execution.

#### VII. DEPARTMENT HEADER - Effective 01JAN03

Consistency in Headers for police correspondence

Effective 01JAN03 <u>all</u> Police Correspondence will use the attached header on the CMHAPD94-001.

Page 1 Case Report Information



Person(s) FSM 2000 Plust LERS - C.M.H.A. Police Department / Case Report 2000-1578 CM.H.A. Police Department / Conwey, John Black Maje. Person Decorate Administration of the Committee (Victor) (All Committees Charles and Anested Person Er Conway, John Glass, David - 81 MARKET 1 bag suspected
3 bags of suspec Vehicle Ave Z - 3 OH E 44135 Possession of Drugs Relationship Matrix Related Reports Hora (216) -Wook (216) Cestor [216] -Pagers (216) - CAD Nanative - William
 Nanative - Hopkins #84 Dec of Bills 11/30/1984 Age | 15 Height | 57 Weight | 150 Sacrat Na ... Spir Male Plack Black Ethnic Lindic Black Hartal Status Single 园 Closenship Yes 庆 Religion Septet E Non-Resident (CMHA) idency Type ---State: Course: OH # United States of America Courtey 7 Place of Beth Clevela -1-Dover License # 1 (0.00000) - coccoon (b.

Person(s) #2

	M.H.A. Police Department / Case Report 2008-1578  CSMNIA: Police Department / Slass-iDavid - /Black/Maje	<b>5</b> .
Case Report 2000-1578	Person Vercindon (Denimi) Colum (Militana) Emological (Schi) (MicPerson) History (So	
☐ Arrested Person ☐ Conway, John - B. ☐ Glass, David - Bk	Role: Arrested Person  Last Name: Glass Frat David Middle:	
Evidence  1 bag suspected in 3 bags of suspected	Business Name   Mack	A.
Vehicle 7 Offense 8 Possession of Drugs	Address 2600	2
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CAD Natrative - Witiam Natrative - Hopkins #8	Information  Date of Birth 04/10/1983   (2) Juvenile Minimum   1 Manimum	[   Se
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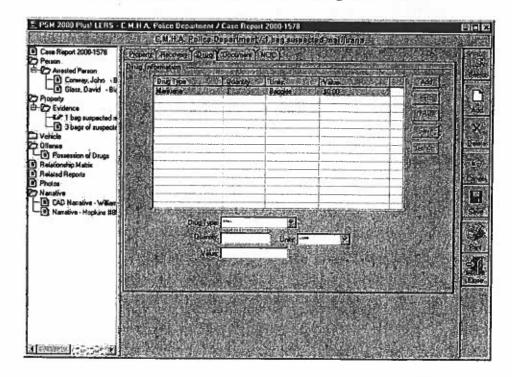
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Case Report 2000-1578 Person  Arrested Person	THE RESIDENCE OF THE PARTY OF T	ey Daug Docume	(NOC)			
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Property Information, in this case "Drug" was used



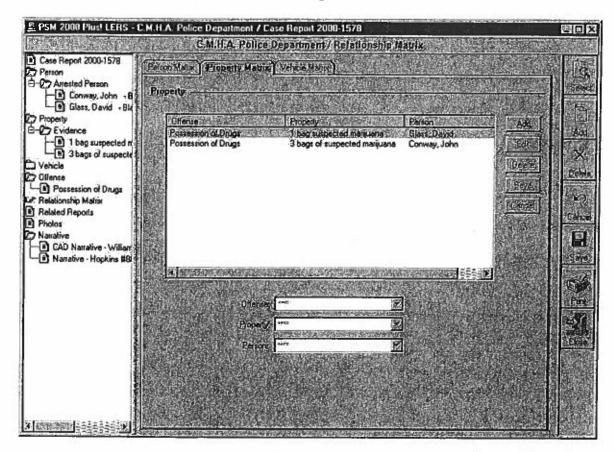
Property #2 also "Drug"

	C.M.H.A. Police Department/3 bags of suspected mailfuana.	
Arrested Person    Glass, David - 8k   Glass, David - 8k   Property   Evidence   1 bag suspected in	Discription  Discr	
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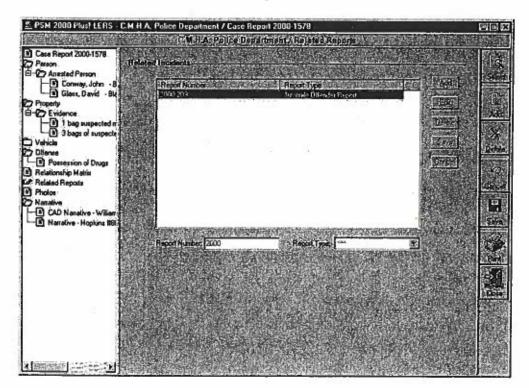
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Case Report 2000-1576 Person	Oliment (Advantable) Discretionals (Super Tree Olimentables (Super)	
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#### Relationship Matrix



#### Related Reports



# DISCIPLINARY FILE



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul A. Styles #656, Sergeant-2<sup>nd</sup> Platoon

FROM: Carol D. Rucker #632, Complaint Investigation Unit OIC

PAGE	SUBJECT	DATE
1 of 2	DISCIPLINE	020CT08
	WRITTEN WARNING re: Rule violation	

On 02SEP08 at 1750 hours you responded to 9500 Wade Park to confer with and/or assist PO Hizak #24 with a incident involving a female who was not a CMHA Resident, but had keys to a unit. You were told by Hizak that confirmation from the manager on this date, and RCC that the female was not a leaseholder/resident. You however, told Hizak to unlock the door to admit this female into this unit to attempt to locate papers reflecting her being a resident of that unit. The papers were not located and in your conversation with the leaseholder of this unit, after you had let the female into this unit, advised you that she was not on his lease, but in the process of placing her on it. As a result, you have been found in violation of the following Rules: The Following Shall Be Grounds for Disciplining Personnel, Including Removal: .01 Incompetence, 1.1.2, 1.1.6, 1.1.8, 1.1.9, and AO #11.B-I.B - Prohibited Conduct.) "This "WRITTEN WARNING" is disciplinary action taken against you for being in violation of the aforementioned Rules."

On 02SEP08 at 1750 hours had PO Hizak to unlock the door to admit a non-resident into a unit to locate papers reflecting that she was a resident of that unit, when you were advised prior to doing so by Hizak that the manager had advised that she was not a resident/leaseholder. RCC had been contacted by Hizak also and that information was the same as what management had confirmed. There was no need to go inside this unit. As a supervisor you failed to abide by the policy and procedures of the CMHA Police Department, and instruct your subordinates to do the same. You must lead by example at all times, in a positive direction. This in turn gains the respect from residents, peers, supervisors and others you come in contact with.

The CMHA Police Department is a nationally accredited agency as a result of demonstrating professional excellence through a national law enforcement credentialing program by the Commission on Accreditation for Law Enforcement Agencies. Accreditation is a coveted award that symbolizes professionalism, excellence, and competence. The accreditation award proves that the agency is committed to maintaining compliance with a broad-based set of internationally accepted professional standards that provide a proven management system of written directives, sound training, clearly defined lines of authority and routine reports that support decision making and resource allocation for the agency.

APPROVED: Date: Doctor

CMHAPD94-059A rev. 05MAY05; rev. 18APR06

PAGE	SUBJECT	DATE
2 of 2	DISCIPLINE	02OCT08
	WRITTEN WARNING re: Rule violation	

Since the CMHA Police Department has been accredited by CALEA, it is in the national spotlight. Therefore, there is a broad and diverse audience scrutinizing the actions of its members. Members who demonstrate voluntary compliance with Rules, Regulations, Policies and Procedures of the Department, receive the prestige as positive role models and negate the need for discipline. Positive role models have influence to foster an atmosphere of high morale and respect from their peers and/or subordinates. High morale and mutual respect for each of the members are sensed by others, both in and outside of the police community. To this end, whether the incident was an oversight or a departure from good judgment, the Department is confident you can make the necessary adjustments to prevent a reoccurrence of incidents of this type. Any further violations of this nature will result in <u>additional</u> discipline being taken against you. This "WRITTEN WARNING" will remain in your personnel file.

Carol D. Rucker, Sergeant

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature:_	SGT. Naw A. Styles #656 (Your degnature is not an admission of aggreement)	<u>060C768 /330</u> (Date/Time)
Signature:_	Out Got Off Off Hold School (Union Representative)	10-7-08 1250 (Date/Time)
Signature:_	(Issuing/Witnessing Supervisor)	06 0H 68 1530 (Date/Time)



# C.M.H.A. CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO: Paul A. Styles #656, Sergeant- Narcotics Unit OIC

FROM: Ronald J. Morenz #626- Lieutenant- Special Operations Unit OIC

PAGE	DISCIPLINE	DATE
1 of 2	WRITTEN REPRIMAND re: Court subpoena	31JUL06

On 10JUL06 at 1330, you failed to appear in Cleveland Municipal Court in response to a subpoena. As a result, you have been found in violation of the following Rules: 2.1.6.21-Personnel within the Department shall take care of their cases in court promptly. If, for any reason, they are unable to do so, they shall arrange with their Superior Officer to have some other officer attend court, and have the case continued or otherwise disposed of; and related charges of: 1.1.8; 1.1.9; and AO #11.B-I.B — Prohibited Conduct. This "WRITTEN REPRIMAND" is disciplinary action taken against you for being in violation of the aforementioned Rules.

On 10JUL06, you failed to appear in Court in response to a subpoena that you received regarding Anthony Smith- Case #2006CRB019734 at the required time, and did not make the proper notification as mandated by Rule 2.1.6.21. Due to your tardiness, the case was dismissed. This dismissal exposes the agency to potential liability and litigation. This does not present the agency in a good light and does not foster a good working relationship with the various Judicial Divisions. The reputation for having dependable, well-prepared officers appear in court is a fundamental aspect of maintaining the professional image of the CMHA Police Department within the Judicial System. Additionally, your testimony is most often the key component of the Prosecutor's Office being able to make a successful prosecution of an offender.

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APPROVED: Date: 31 Jin 106.

CMHAPD94-059C Eff: 09AUG05; rev. 18APR06

Rec'd 1/31/04 p

PAGE	DISCIPLINE	DATE
2 of 2	WRITTEN REPRIMAND re: Court subpoena	31JUL06

Since the CMHA Police Department has been accredited by CALEA, it is in the national spotlight. Therefore, there is a broad and diverse audience scrutinizing the actions of its members. Members who demonstrate voluntary compliance with Rules, Regulations, Policies and Procedures of the Department, receive the prestige as positive role models and negate the need for discipline. Positive role models have influence to foster an atmosphere of high morale and respect from their peers and/or subordinates. High morale and mutual respect for each of the members are sensed by others, both in and outside of the police community. To this end, whether the incident was an oversight or a departure from good judgment, the Department is <u>still</u> confident you can make the necessary adjustments to prevent a reoccurrence of this incident. Any further violations of this nature will result in <u>additional</u> discipline being taken against you, which would result in <u>suspension</u> or termination. This "WRITTEN REPRIMAND" will remain in your Personnel file.

By order of,

Ronald J. Morenz, Lieutenant

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature: 567. Poul 1. Styles #156

Signature: It July Cic

(Union Representative)

(Issuing/Witnessing Superviso

3/Julo 6 @ 1400

3. JULIC 1400

31 JULGE & 1488

APPROVED: Date: 31 July 05

CMHAPD94-059C Eff: 09AUG05; rev. 18APR06

COMDOC 1008



#### **CMHA**

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626, Lieutenant Special Operations

FROM: Paul A. Styles #656, Sergeant Narcotics Unit OIC

PAGE	SUBJECT	DATÉ
1 of 1	Missed Court Appearance 10JUL06.	25JUL06

Sir,

On 25JUL06, I was assigned to the Narcotics Unit as the OIC. I received an order from you to generate a report to a missing court appearance on 10JUL06. The following are the facts related to the incident:

On 10JUL06, I had a court appearance for Anthony Smith at 1330 hours in Judge Tarver's courtroom. At approximately 1300 hours, I received a call from Rodney Barnett Chief of maintenance advising me he and his crew were at 1515 Crawford Road making repairs. He reported he observed two black males involved in drug activity making hand-to-hand transactions, and if I hurry and get over there, I would catch them. Patrol was tied up so I contacted Sgt. Likes for assistance. Sgt. Likes send two of his units to assist me. At approximately 1339 hours, we responded to 1515 Crawford Road and observed to two black males in the courtyard, as we approached one of the male fled and was later apprehended. They were identified as Allen Tyes 27/b/m/s and Gerlon McDuffie 27/b/m/s. Mr. Tyes was arrested on a felony warrant with the Cuyahoga County Sheriff's Office for Aggravated Burglary, Assault, and Criminal Damaging. He also received a Minor Misdemeanor Citation for Drug Abuse Marijuana. He was in possession of three large baggies of suspected Marijuana. Mr. McDuffie also received a Minor Misdemeanor Citation for Drug Abuse Marijuana. He was in possession of two large baggies of suspected Marijuana. Both males had large amounts of currency with them. Case report 2006-15800.

I cleared the scene at approximately 1353 hours. At approximately 1403 hours, I responded to the justice center to attend court, when I got to the courtroom, I observed Mr. Smith walking out of the courtroom. After conferring with the prosecutor, she advised me the case was dismissed due to no officer present. It was not my intention to miss court, I acted on the information that I received and made poor judgment on timing. I though I could handle the call and still make it to court on time.

Respectfully,

Paul A. Styles, Sergeant



## CMHA POLICE DEPARTMENT COURT TRACKING DATABASE

Report by Date	Case Number	Case	Туре	Court Date	Judge
	2006CRB019734	City	NEW TOTAL CONTRACTOR OF THE PROPERTY OF THE PR	7/10/2008	Tarver
NOTE STREET	Court Room	Case Status			
Report by Case	12C	Closed			
Number	Comments			THE REAL PROPERTY.	Managarata Managarata
Report by Case Status		dh a sao Sao EV Ron and th			
Report by Case Type and Status	Defendant Last Na	me	Defendant First Nam	e iterime vene	
	Smith		Anthony		
	Defendant Middle	Disposition:		ALCO DE LA COMPANION DE LA COMP	10 THE RESERVE OF THE
44		Dismissed		OF SAPORES AND SHOP	
1236 (20)				RESIDENCE DE LA COMPANION DE L	NATIONAL PROPERTY AND ADDRESS OF THE PARTY AND
- F	Officers Last Name		Officers First Name		
<b>a</b>	Officers Last Name		Officers First Name		
<b>a</b>	The second secon	OfficersShift			

In Cleveland Municipal Court

The State Of Ohio

Criminal Branch

County of Cuyahoga ss.

City of Cleveland

Case No. 2006CRB019734 A

City of Cleveland

Charge: MC

607.03

vs.

DRUG ABUSE

ANTHONY SMITH

Judge: TARVER

Complaint	filed,	warrant	issued and return made.	06/16/2006
06/16/200	6	A	Complaint received and filed	with Clerk's Office
			on 06/16/2006.	
06/22/200	16		The defendant having failed t	to appear, a capias is ordered.
BEDNAR				
06/22/200	16		Letter to defendant regarding	g capias for failure to appear
			to be processed and mailed.	
06/22/200	6		The defendant has failed to a	appear or comply with court
			order on this case. Administr	rative processing or notifica-
			tion activity previously plac	ced on hold is now reactivated.
06/23/200	6		Personal Bond posted with the	e Clerk.
			Bond Number 03 PB 91,172	
06/23/200	6		The defendant has appeared an	nd a new court date has been
			scheduled for this case. ACS	processing activity has been
			Suspended, pending outcome of	case.
06/23/200	6		Case set for 3C Bail Docket 0	06/27/2006 at 9:30a.m.
06/27/200	6	A	Defendant, having been advise	ed of his or her rights, enters
BEDNAR			a plea of NOT GUILTY.	
06/27/200	6		Case has been assigned to the	e personal docket of

Page Number: 1

	Judge Tarver.
BEDNAR	
06/27/2006 BEDNAR	Case Control Lottery Number 27,986 recorded.
06/27/2006 BEDNAR	Set for Trial 07/10/2006 13:30
06/27/2006 BEDNAR	The witnesses are ordered to be subpoenaed.
06/27/2006 BEDNAR	For good cause shown, the capias is ordered recalled
06/28/2006	One (1) subpoena issued by clerk.
07/10/2006	A Case is dismissed for want of prosecution.
VODREY	The defendant is hereby discharged as to this charge.
07/10/2006 VODREY	Officer not present in court.
07/10/2006 VODREY	(D. IS BLIND)

I, Earle B. Turner, Clerk of the Cleveland Municipal Court, within and for said city. Hereby certify that the above and foregoing is truly taken and copied from the original Journal Entry 2006CRB019734 now on file in my office.

Witness my	hand	and seal of said court this
Day	of _	A.D
		Earle B. Turner
Bv		Deputy

Page Number: 2

35								<u> </u>	1				
	NAME	BADGE	0.00	DEFENDANT,	DATE REC'D	COURT DATE	COURT ROOM	JUDGE	CHARGES	INTAKER	OFFICER SIGNATURE	DATE	OIC NOTIFICA
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	Kanzey	107	004Clb 016800	Marcus Williams	6.27	6.28	14C	Mayo			Ramsey 8	1200	45.640
	Moren 7	626	471677	Chris Hams	6.27	7.5	JC17A	Russo	3,5		trong inc	ilala	
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## C.M.H.A.

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO: Paul A. Styles #656, Sergeant- OIC Narcotics Unit

FROM: Ronald J. Morenz #626, Lieutenant-OIC Special Operations Unit

-				
ı	PAGE	SUBJECT	DATE	
	1 of 2	DISCIPLINE	11.17706	
	1 01 2	WRITTEN WARNING re: Rule violation	11APR06	

On 04APR06 at approximately 2010, while at the Shell station located at 2625 E55th St. you discovered that the Wright Express gas card was missing from your vehicle. You did not report it at the beginning of your shift, or prior to going into the field. You were the last user of the card on 27MAR06. As a result, you have been found in violation of the following Rules: 2.1.4.02- Personnel within the Department shall be responsible for the loss or damage of police equipment placed in their charge. Any loss or damage will be presumed to have occurred during the tour of duty at the time such loss or damage is discovered, unless reported at the beginning of the tour of duty, in which event it will be presumed to have occurred during the previous tour of duty; and related charges of: 1.1.8; 1.1.9; and AO #11.B-I.B - Prohibited Conduct. This "WRITTEN WARNING" is disciplinary action taken against you for being in violation of the aforementioned Rules.

On 06APR06 you notified me that you lost the Wright Express gas card assigned to the vehicle that you use. Records indicate that you were the last one to make a purchase using the card. The loss of a gas card can cause an unnecessary expense to the Department and Agency. It is imperative that you maintain proper possession of the card at all times.

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SUBJECT 2 of 2

## DISCIPLINE

## WRITTEN WARNING re: Rule violation

DATE

11APR06

Since the CMHA Police Department has been accredited by CALEA, it is in the national spotlight. Therefore, there is a broad and diverse audience scrutinizing the actions of its members. Members who demonstrate voluntary compliance with Rules, Regulations, Policies and Procedures of the Department, receive the prestige as positive role models and negate the need for discipline. Positive role models have influence to foster an atmosphere of high morale and respect from their peers and/or subordinates. High morale and mutual respect for each of the members are sensed by others, both in and outside of the police community. To this end, whether the incident was an oversight or a departure from good judgment, the Department is confident you can make the necessary adjustments to prevent a reoccurrence of incidents of this type. Any further violations of this nature will result in additional discipline being taken against you. This "WRITTEN WARNING" will remain in your personnel file.

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature: SGT. Poul A. Styles #656 13AProb/1400

(Your signature is not an admission of agreement) (Date/Time)

(Union/Representative)

13 AFiz C / / Pecc

CMHAPD94-059A rev. 05MAY05



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Sharon E. Barto #605- Administrative Commander

FROM: Ronald J. Morenz #626, Lieutenant-Special Operations

PAGE	SUBJECT	DATE
1 of 1	Investigation X06-026 ref: Missing Property/Wright Express Gas Card	11APR06
	for ZC817	

I reviewed the investigation submitted by Sgt. Paul Styles #656 in reference to the missing Wright Express gas card for Zone Car 817. I was able to review the transactions using that particular card and found the Sgt. Styles was the last one to purchase fuel with the card, that being on 27MAR06. Since that time there were no purchases made with the card. Sgt. Styles was the last user of the card; it was his responsibility to insure that the card was returned to the sun visor for the next user to use. Sgt. Styles listed the card as being in the vehicle on 30MAR06. It wasn't until he attempted to purchase fuel during his tour of duty on 04APR06, at approximately 2010. The card wasn't discovered missing prior to him going out into the field.

Based upon my review of the investigation, Sgt. Styles was responsible for the proper return of the equipment. As the Officer-in-Charge of the Narcotics Unit, it is his responsibility to insure that the gas cards are in his vehicles. I recommend that Sgt. Styles be given a Written Warning for violating section 2.1.4.02 of the Manual of Rules and Regulations which reads: Personnel within the Department shall be responsible for the loss or damage of police equipment placed in their charge. Any loss or damage will be presumed to have occurred during the tour of duty at the time such loss or damage is discovered, unless reported at the beginning of the tour of duty, in which event it will be presumed to have occurred during the previous tour of duty.

I contacted Lt. Donna Correy #615 and had the card deactivated. At that time there were no additional purchases made with the card.

APR | 2 2006

SHARON E. BARTO
ADMINISTRATIVE COMMANDER

Respectfully Submitted,

Ronald J. Morenz, Lieutenant



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626, Lieutenant Special Operations

FROM: Paul A. Styles #656, Sergeant- Narcotics Unit OIC

PAGE	SUBJECT	DATE
1 of 2	Investigation ref: Missing Property/ Gas Card	10APR06

Sir,

On 04APR06, I was assigned to the Narcotics Unit as the OIC. I discovered the gas card assigned to ZC817 was missing from the pouch located over the sun visor. The following are the facts related to the incident.

At approximately 2010 hours, I responded to the Shell gas station located at 2625 E.55 Street, to refuel ZC817. I discovered that the gas card, assigned to this vehicle, was missing from inside the pouch located over the sun visor. I checked the interior of the vehicle for the card, and it was unable to be located. ZC817 is a white 1996 Ford Crown Victoria Bearing Ohio Registration CMN3371. I conferred with Detectives James Harris #03, and David Whitney #48 about the missing gas card. They reported they had not driven, nor fueled ZC817. They also reported that they do not know where the gas card was. Detective Stringfellow #71 reported, approximately a week and a half ago, he attempted to refuel ZC817 at the same location and was unable to locate the card. He eventually located the card tucked deep inside to pouch over the visor. I responded back to headquarters, and used the spare gas card located inside the key cabinet, to refuel ZC817. I also generated a missing property report. ZC817 is assigned to me, and on occasions, may be driven by any officers assigned to the Narcotics Unit. The last time I drove ZC817 was 30MAR06, and did not need to be fueled.

Based on the statements and information that I gathered during the course of this investigation, it's uncertain when the gas card was actually missing, and who may have taken it. I respectfully request that the gas card be deactivated, to prevent any unauthorized use.

PAGE	SUBJECT	DATE
2 of 2	Investigation ref: Missing Property/ Gas Card	06APR06
L	111 ostigation for hisband Property, Gas Card	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

## Attachments to this report:

- 1. CMHAPD Case Report 2006-7149 titled lost/ found property.
- CMHAPD 94-001 submitted by PO James Stringfellow #71.
   CMHAPD 94-064 titled Notification Of Investigation To CIU.

Respectfully,

SGT. Powl A. Stylas #656 Paul A. Styles, Sergeant



## **CMHA - Police Division Case Report** Detail



ORI Number: OH0186800

AUTHORITY

**CUYAHOGA METROPOLITAN HOUSING** 

Print Date/Time: 04/06/2006 21:14

Login ID: Styles656

Case Details

Case Number: 2006-00007149

Case Number: 2006-00007149

Location: 5715 WOODLAND AVE

Cleveland, OH, 44104

Incident Type: Lost Property

Occurred From: 04/04/2006 20:10

Occurred Thru: 04/04/2006 20:10

Status:

Open

Status Date:

**Disposition Date: Exc Clear Date:** 

4/4/2006

Reporting Officer ID: Scene Processed By: 656 - Styles

Assigned Bureau:

656 - Styles Narcotics

Disposition: Exc Clear:

Offenses

Group/ORI Crime Code Statute Description Counts OH0186800 **NCR** Found / Lost Found / Lost Property **Property** 

Offense #1

NCIC Code:

# of Adults:

Statute: Found / Lost Counts: 1

Property

Attempt/Commit Code:

Description: Found / Lost Property

Scene Code: # of Juveniles:

Abandoned Structure: No

104 - Police Headquarters

Lane:

Offense Date: 04/04/2006 Bias/Motivation:

IBR Seq. NO: 1 **Household Status:** 

**Property Damage Amt: Domestic Circumstance:** Accosting Situation:

Carjacking: No Gambling Motivated: No

Hate Bias Indicator:

Subjects

Arrests

**Property** 

Date Code Type Make Model Description Tag No. Item No. 04/04/2006 Lost / Missing Credit/Debit Cards 1 CMHA Gas card

Seq #1

**Property Codes** Lost / Missing

**UCR Value:** 

Property Type: Credit/Debit Cards Property Class: Credit/Debit Cards Date Received: 04/04/2006 Initial Value:

Stolen Location:

Quantity:

Unit Of Measure:

Measurement

Source:

Description: 1 CMHA Gas card

Suspect Vehicles

Narrative-Styles 656

Sir,

On 04APR06, I was assigned to the Narcotics Unit as the OIC. I generated a missing property report. The following are the facts related to this incident:

At approximately 2010 hours, I responded to the Shell gas station located at 2625 E.55th Street to fuel ZC 801. I discovered that the gas card assigned to this vehicle was missing from the pouch located over the sun visor. I

Page: 1 of 2



# CMHA - Police Division Case Report Detail



Print Date/Time: 04/06/2006 21:14

Login ID: Styles656

Case Number: 2006-00007149

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

ORI Number: OH0186800

checked the interior of the vehicle for the card, and it was unable to be located. ZC801 is assigned to me, and the last time I remember fueling the vehicle was approximately two weeks ago. ZC801 is a white Ford Crown Victoria, Bearing Ohio Registration CMN3371.

Reporting Officer	Date



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul Styles #656, Sergeant Narcotics Unit OIC

FROM: James Stringfellow #71, Detective Narcotics

PAGE	SUBJECT	DATE
1 of 1	Gas Card – Vehicle #817	07APR06

Sir.

On Monday, 20MAR06 I was assigned to the Narcotics Unit along with Detective Harris #03. At approximately 1600 hours we were transported to ICS to pick-up vehicles #809, and #817. I drove back vehicle #817 (OH- CMN 3171), Det. Harris #809. Prior to arriving at 5715 Woodland I decided to refuel #817 at the Shell Station on E. 55<sup>th</sup> St. and Kinsman. Once at the station I had difficulty located the "gas card" so I called Sgt. Styles via landline. Sgt. Styles advised me that the card is somewhere inside the visor map holder. I then found the gas card inside the visor map holder, zipped up in the middle section. #817 was then refueled and the gas card was returned into the same section of the visor holder.

Upon returning to HQ, I advised Sgt. Styles that I had found the gas card, fueled the vehicle, and returned the gas card into the same, black compartment above the visor, driver side.

Respectfully,

James Stringfellow #71, Detective Narcotics



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626, Lieutenant Special Operations

FROM: Paul A. Styles #656, Sergeant- Narcotics Unit OIC

PAGE	SUBJECT	
TAGE	SOBJECT	DATE
1 of 1	NOTIFICATION OF INVESTIGATION TO C.I.U.	06APR06
	NOTIFICATION OF INVESTIGATION TO C.I.U.	1

In compliance with DN#03-058, the following information is provided to the Complaint Investigation Unit (CIU) regarding this investigation:

Type of investigation	Missing Property
Date of occurrence	04APR06
Complainant/victim/officer involved	Sgt. Styles #656
Date received	04APR06
Received by	Sgt. Styles #656
Case report number	2006-7149
Investigation assigned to	Sgt. Styles #656

[X] This investigation is completed and is being forwarded through Official Channels
This investigation is not complete at this time.

Respectfully,

Paul A. Styles, Sergeant #656

SUPERVISOR:

You will be notified of the CIU investigation number within one

(1) business day.

cc: Administrative Commander

Patrol Commander



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Sharon E. Barto #605- Administrative Commander

FROM: Ronald J. Morenz #626, Lieutenant-Special Operations

PAGE	SUBJECT	DATE
1 of 1	Investigation X06-026 ref: Missing Property/Wright Express Gas Card	11APR06
	for ZC817	

I reviewed the investigation submitted by Sgt. Paul Styles #656 in reference to the missing Wright Express gas card for Zone Car 817. I was able to review the transactions using that particular card and found the Sgt. Styles was the last one to purchase fuel with the card, that being on 27MAR06. Since that time there were no purchases made with the card. Sgt. Styles was the last user of the card; it was his responsibility to insure that the card was returned to the sun visor for the next user to use. Sgt. Styles listed the card as being in the vehicle on 30MAR06. It wasn't until he attempted to purchase fuel during his tour of duty on 04APR06, at approximately 2010. The card wasn't discovered missing prior to him going out into the field.

Based upon my review of the investigation, Sgt. Styles was responsible for the proper return of the equipment. As the Officer-in-Charge of the Narcotics Unit, it is his responsibility to insure that the gas cards are in his vehicles. I recommend that Sgt. Styles be given a Written Warning for violating section 2.1.4.02 of the Manual of Rules and Regulations which reads: Personnel within the Department shall be responsible for the loss or damage of police equipment placed in their charge. Any loss or damage will be presumed to have occurred during the tour of duty at the time such loss or damage is discovered, unless reported at the beginning of the tour of duty, in which event it will be presumed to have occurred during the previous tour of duty.

I contacted Lt. Donna Correy #615 and had the card deactivated. At that time there were no additional purchases made with the card.

APR 1 2 2006

SHARON E. BARTO
ADMINISTRATIVE COMMANDER

Respectfully Submitted,

Ronald J. Morenz, Lieutenant



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626, Lieutenant Special Operations

FROM: Paul A. Styles #656, Sergeant- Narcotics Unit OIC

PAGE	SUBJECT	DATE
1 of 2	Investigation ref: Missing Property/ Gas Card	10APR06

Sir,

On 04APR06, I was assigned to the Narcotics Unit as the OIC. I discovered the gas card assigned to ZC817 was missing from the pouch located over the sun visor. The following are the facts related to the incident.

At approximately 2010 hours, I responded to the Shell gas station located at 2625 E.55 Street, to refuel ZC817. I discovered that the gas card, assigned to this vehicle, was missing from inside the pouch located over the sun visor. I checked the interior of the vehicle for the card, and it was unable to be located. ZC817 is a white 1996 Ford Crown Victoria Bearing Ohio Registration CMN3371. I conferred with Detectives James Harris #03, and David Whitney #48 about the missing gas card. They reported they had not driven, nor fueled ZC817. They also reported that they do not know where the gas card was. Detective Stringfellow #71 reported, approximately a week and a half ago, he attempted to refuel ZC817 at the same location and was unable to locate the card. He eventually located the card tucked deep inside to pouch over the visor. I responded back to headquarters, and used the spare gas card located inside the key cabinet, to refuel ZC817. I also generated a missing property report. ZC817 is assigned to me, and on occasions, may be driven by any officers assigned to the Narcotics Unit. The last time I drove ZC817 was 30MAR06, and did not need to be fueled.

Based on the statements and information that I gathered during the course of this investigation, it's uncertain when the gas card was actually missing, and who may have taken it. I respectfully request that the gas card be deactivated, to prevent any unauthorized use.

PAGE	SUBJECT	DATE
2 of 2	Investigation ref: Missing Property/ Gas Card	06APR06

## Attachments to this report:

1. CMHAPD Case Report 2006-7149 titled lost/ found property.

2. CMHAPD 94-001 submitted by PO James Stringfellow #71.

3. CMHAPD 94-064 titled Notification Of Investigation To CIU.

Respectfully,

SGI-Paul A. Styles, Sergeant #656
Paul A. Styles, Sergeant



## **CMHA - Police Division Case Report** Detail



Print Date/Time: 04/06/2006 21:14

Login ID: Styles656

Case Number: 2006-00007149

CUYAHOGA METROPOLITAN HOUSING **AUTHORITY** 

4/4/2006

ORI Number: OH0186800

Case Details

Case Number: 2006-00007149 Location: 5715 WOODLAND AVE

Cleveland, OH, 44104

incident Type: Lost Property

Occurred From: 04/04/2006 20:10

Occurred Thru: 04/04/2006 20:10

Status:

Status Date:

**Disposition Date:** 

Reporting Officer ID: Scene Processed By: Assigned Bureau:

656 - Styles 656 - Styles Narcotics

Disposition: Exc Clear:

**Exc Clear Date:** 

Offenses

Description Group/ORI Crime Code Statute Counts OH0186800 NCR Found / Lost Found / Lost Property

Open

Offense #1 Group/ORI: OH0186800 Crime Code: NCR

Statute: Found / Lost Counts: 1 Property

Attempt/Commit Code:

Bias/Motivation:

IBR Seq. NO: 1

**Household Status:** 

Offense Date: 04/04/2006

Description: Found / Lost Property

NCIC Code:

# of Adults: Property Damage Amt:

**Domestic Circumstance:** Accosting Situation:

# of Juveniles: Abandoned Structure: No

Scene Code:

Carjacking: No.

Lane: Gambling Motivated: No

Hate Bias Indicator:

104 - Police Headquarters

Subjects

Arrests

**Property** 

Date Code Make Model Description Tag No. 04/04/2006 Lost / Missing Credit/Debit Cards 1 CMHA Gas card

Seg #1

**Property Codes** 

Property Type: Credit/Debit Cards Property Class: Credit/Debit Cards Date Received: 04/04/2006

Lost / Missing **UCR Value:**  Initial Value:

Stolen Location:

Quantity:

Unit Of Measure:

Property

Measurement Source:

Description: 1 CMHA Gas card

Item No.

**Suspect Vehicles** 

Narrative- Styles 656

Sir,

On 04APR06, I was assigned to the Narcotics Unit as the OIC. I generated a missing property report. The following are the facts related to this incident:

At approximately 2010 hours, I responded to the Shell gas station located at 2625 E.55th Street to fuel ZC 801. I discovered that the gas card assigned to this vehicle was missing from the pouch located over the sun visor. I

Page: 1 of 2



# CMHA - Police Division Case Report Detail



Print Date/Time: 04/06/2006 21:14

Login ID: Styles656

Case Number: 2006-00007149

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

ORI Number: OH0186800

checked the interior of the vehicle for the card, and it was unable to be located. ZC801 is assigned to me, and the last time I remember fueling the vehicle was approximately two weeks ago. ZC801 is a white Ford Crown Victoria, Bearing Ohio Registration CMN3371.

Reporting Officer	Date



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul Styles #656, Sergeant Narcotics Unit OIC

FROM: James Stringfellow #71, Detective Narcotics

PAGE	SUBJECT	DATE
1 of 1	Gas Card – Vehicle #817	07APR06
L	Gus Card - Venicle #017	3

Sir,

On Monday, 20MAR06 I was assigned to the Narcotics Unit along with Detective Harris #03. At approximately 1600 hours we were transported to ICS to pick-up vehicles #809, and #817. I drove back vehicle #817 (OH- CMN 3171), Det. Harris #809. Prior to arriving at 5715 Woodland I decided to refuel #817 at the Shell Station on E. 55<sup>th</sup> St. and Kinsman. Once at the station I had difficulty located the "gas card" so I called Sgt. Styles via landline. Sgt. Styles advised me that the card is somewhere inside the visor map holder. I then found the gas card inside the visor map holder, zipped up in the middle section. #817 was then refueled and the gas card was returned into the same section of the visor holder.

Upon returning to HQ, I advised Sgt. Styles that I had found the gas card, fueled the vehicle, and returned the gas card into the same, black compartment above the visor, driver side.

Respectfully,

James Stringfellow #71, Detective Narcotic



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626, Lieutenant Special Operations

FROM: Paul A. Styles #656, Sergeant- Narcotics Unit OIC

ſ	PAGE	SUBJECT		D.177
	1 of 1		NOTIFICATION OF INVESTIGATION TO C.I.U.	DATE 06APR06

In compliance with DN#03-058, the following information is provided to the Complaint Investigation Unit (CIU) regarding this investigation:

Type of investigation	Missing Property
Date of occurrence	04APR06
Complainant/victim/officer involved	Sgt. Styles #656
Date received	04APR06
Received by	Sgt. Styles #656
Case report number	2006-7149
Investigation assigned to	Sgt. Styles #656

[X] This investigation is completed and is being forwarded through Official Channels
This investigation is not complete at this time.

Respectfully,

Paul A. Styles, Sergeant #656

SUPERVISOR:

You will be notified of the CIU investigation number within one

(1) business day.

cc: Administrative Commander

Patrol Commander



## C.M.H.A.

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO:

Paul A. Styles, Sergeant #656 - Third Platoon Protection Officer OIC A Platoon

FROM: Michael G. Shank #604, Acting Patrol Commander

PAGE	SUBJECT	DATE
1 .6 1	DISCIPLINE	15SEP04
1 of 1	WRITTEN REPRIMAND re: Rule violation	

On numerous dates during the months of June, July, and August you allowed Protections Officer to report late for their tour of duty and did not take disciplinary action against them. As a result, you have been found in violation of the following Rules: 2.1.1.13 Superior Officer shall request disciplinary action against personnel of their command who violate any of the rules, regulations or orders of the Department; and related charges of: 2.1.1.16; 1.1.8; 1.1.9; and A.O. #11.10.03. This "WRITTEN REPRIMAND" is disciplinary action taken against you for being in violation of the aforementioned Rules.

During the months of June, July and August, you allowed Protection Officers Sir Baron Williams #248 and William Cattren #233 to use compensatory because their attending the Police Academy causing them to be tardy for multiple tours of duty. This is not in compliance with the CMHA Police Department's well-established Attendance Control Policy nor did you request permission to make any such arrangement. You as a Supervisor are responsible for insuring that any infraction of the Manual of Rules and Regulations or Policies and Procedures is handled appropriately. During the same time frame, other Protection Offices were late for their tours of duty and were charged with violating the Attendance Control Policy and received points. Prompt, proper and equal discipline is required in order to inspire the trust, respect and confidence of your other subordinates. Whenever you are taking any action, administrative or otherwise, you are acting as representative of the Chief of Police. This means that you must demonstrate the fairness and equality that is represented in the CMHA Police Department's Mission Statement.

Whether this was an oversight or a departure from good judgment, the Department is still confident you can make the necessary adjustments to prevent a reoccurrence of this incident. Any further violations of this nature will result in additional discipline being taken against you, which would result in suspension or termination. This "WRITTEN REPRIMAND" will remain in your Personnel file.

By order of,

SEP 20 04

Comnet Much Stal 6 4 7 6 9

Michael G. Shank, Acting Patrol Commander

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature:_	SGT. (Your signature	is not arrachission of agre	#656	Date/Time:	15 Ser	04@1705
Issuing/Wita	-	ervisor: know	. 1	Jozgung	Al Eso	
APPROVED:	Mur Date	: <u>-</u>	6	10		



## C.M.H.A.

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY **DIVISION OF POLICE**



TO:

Paul A. Styles, Sergeant #656 - Third Platoon Protection Officer OIC A Platoon

FROM:

Michael G. Shank #604, Acting Patrol Commander

I	PAGE	SUBJECT	DATE
I	1 .6 1	DISCIPLINE	15SEP04
	1 of 1	WRITTEN REPRIMAND re: Rule violation	

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Whether this was an oversight or a departure from good judgment, the Department is <u>still</u> confident you can make the necessary adjustments to prevent a reoccurrence of this incident. Any further violations of this nature will result in <u>additional discipline</u> being taken against you, which would result in <u>suspension or termination</u>. This "WRITTEN REPRIMAND" will remain in your Personnel file.

7	Jour 1 offormer mo.	
COMDOC	By order of,	SEP 1 5 2004
SEP 20 04	Conneb Med Sal 60 Michael G. Shank, Acting Patrol Commander	3/969

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature:_	S(+T. (Your signature	is not an adhission of agree	#656	Date/Time:	15 Sep	0/@170
Issuing/Wit		pervisor kas		Jongeny .	Al Uso	
APPROVED: CMHAPD94-0591	Muc_ Date B rev. 02/04	e:	6	40		



RECEIVED IN THE OFFICE OF CUYAHOGA METROPOLITANAUG 2 7 2004
HOUSING ATTENDED

## HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas Imes Lieutenant-Third platoon Watch Commander

FROM: Paul A. Styles Sergeant-Third Platoon Protection Officers OIC, A Platoon

PAGE	SUBJECT	
1 of 1	Compensatory Time Granted to Protection Officers Williams #248	25AUG04
	and Cattren #233	

Sir,

On 23AUG04, while assigned to the Third Platoon as the OIC for the Protection Officers, Acting Commander Shank instructed me to generate a form one indicating when I gave Protection Officers SirBaron Williams #248 and William Cattren #233 permission to use compensatory time for late start while thy attend the Police Academy, and my reason for doing so. The following are the facts.

During the month of January 2004, Protection Officer Cattren advised me he of his intension to join the police academy. He wanted to know if it was possible to use comp time to cover the time he was not at work. I advised him since he brought I to my attention and I know in advance he was attending the academy he would be able to use his comp time.

During the month of April 2004, Protection Officer Williams also advised me of his intension to join the police academy, and if he was able to use his comp time. I also granted him permission to use his comp time while he is currently in the academy.

Both Williams and Cattren are new Protection Officers, prior to them attending the academy their attendance was excellent, Protection Officer Williams used approximately two weeks of sick time due to an off duty motor vehicle accident. Cattren has approximately one month remaining in the academy, and Williams has approximately three months remaining. As their immediate supervisor I saw two officers wanting to further their education in law enforcement. They often spoke of applying to the CMHA Police department upon completion of their academy training because they wanted to help make a difference. At this point I respectfully request they be granted permission to continue using their comp time until they complete.

FORWARD

AUG 2 6 2004

Respectfully,

Paul A. Styles, Sergeant

CMHAPD94-001Eff: 01JAN03Rev.26FEB03.

NAME:	Cattr	en	William FIRST		<u>K.</u>	Protection RANK	233 BADGE #
DATE OF	BIRTH:	13JAN72		W_SEX:		BLOOD TYPE	
S.S. NUMI	BER:		ST	ART DAT	E:	03MAR03	
ADDRESS TELEPHO		SIREEI				Ridgeville	44039 ZIP CODE
NUMBER	S:		PAGER			OTHER	
IN CASES	OF EMERG	ENCY NOTIFY:	Linda Ca	ttren		RELATIONSHIP	<b>_</b>
AT:	ADDRESS		TELEP	HONE NUMBER	<u> </u>	TELEPHONE N	UMBER #2
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DATE 03MAR03	PTF: (Typ		Effective03MA		**********		::::::::::::::::::::::::::::::::::::::
2020002			on Officer Re POTA test	·			Filed
EOYAM80	ASSIGNME	<b>NT:</b> Transfer	pursuant to Effective Dat	DN#03-0	60 AY03		Filed Filed
020CT03		F for Change effective da	of Status re te 23SEP03	quest d	ate		Filed
06DEC03			tro pay for A ded to HR 16D				Filed
15DEC03	PFT Pay . 15DEC03	Adjustment -	eff. 04AUG03	request	date	•	Filed
18FEB04	Compensa	tory Time	.50				Filed
19FEB04	Compensa	tory Time	.50				Filed
08MAR04	Compensa	tory Time	.50				Filed
L2MAR04	Compensa	tory Time	.50				Filed
L5MAR04	Compensat	tory Time	.50				Filed
L6MAR04	Compensat	tory Time	.50				Filed

	NAME:	Cattren	William William	K.	Protection	233
	-	LAST,	FIRST	M.I.	RANK	BADGE#
	DATE	INCIDENT	RELATED NUMBERS		DETI	ERMINATION
	19MAR04	PTF: 2004 Salary I 06JAN04.	ncrease eff. 03MAR04	request		'iled
	24MAR04	Compensatory Time	.25		F	'iled
	30MAR04	Compensatory Time	.50		F	iled
**	01APR04	Compensatory Time	.50		F	iled
	02APR04	Compensatory Time	.25		F	iled
	06APR04	Compensatory Time	.50		F	iled
	08APR04	Compensatory Time	.50		F	iled
	15APR04	Compensatory Time	.50		F	iled
	16APR04	Compensatory Time	.50		F	iled
	22APR04	Compensatory Time	.25		F	iled
	23APR04	Compensatory Time	.50		F:	iled
	26APR04	Compensatory Time	.50		F:	iled
	27APR04	Compensatory Time	.50		F	iled
	03MAY04	Compensatory Time	.50		Fi	lled
	04MAY04	Compensatory Time	.75		Fi	led
	12MAY04	Compensatory Time	.50		Fi	.led
	13MAY04	Compensatory Time	.50		Fi	led
	14MAY04	Compensatory Time	1.00		Fi	led
	19MAY04	Compensatory Time	.75		Fi	led
	20MAY04	Compensatory Time	.25		Fi	led
	26MAY04	Compensatory Time	.50		Fi	led
	15JUN04	Compensatory Time	.25		Fi	led
	21JUN04	Compensatory Time	.50		Fi	led
	23JUN04	Compensatory Time	.50		Fi	led

NAME: _	Cattren		Wil	liam	K P	rotection	233
	LAST,			FIRST	M.I.	RANK	BADGE#
DATE	INCIDENT	*************	RELATED	NUMBERS	•••••••	DETE	RMINATION
24JUN04	Compensatory	Time	.25				Filed
09JUL04	Compensatory	Time	.50				Filed
12JUL04	Compensatory	Time	.50				Filed
19JUL04	Compensatory	Time	.50				Filed
20JUL04	Compensatory	Time	.25				Filed
26JUL04	Compensatory	Time	.25				Filed
28JUL04	Compensatory	Time	.25				Filed
05AUG04	Compensatory	Time	.25				Filed
14AUG04to 16AUG04	Furlough		16.00				Filed



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul A. Styles, Sergetat #656 Third Phtoon OIC

FROM: William K. Cattrew, Protection Officer # 233

PAGE 1 SUBJECT Attendance at Academy 19 Aug 04

Sir, On 19Aug 04, whole Assigned to Cedar High-rise, Sgt. Styles #656 Advised me to generate A report in regards to my Academy Classes At Cuythoga Community College. (Police Academy)
The Following are the facts.

Hours of Attendance Arc: 6pm-10pm. I will Finish with the Police Academy on SAt, Sep 18, 2004.

Respectfully,

William Cattren, Protection Officer #233

FORWARD

AUG 1 9 2004 4 604



Metropolitan Campus.

## **CMHA**

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul A. Styles Sergeant #656, OIC Protection officer A, platoon FROM: Sir. Baron Williams #248 protection officer A, platoon

Sir,
ON May 19, 2004 I enrolled in the police academy at
Cuyahoga Community College Metropolitan Campus. My final
Academy day willbe December 1, 2004 at Cuyahoga Community College

I attend classes on Monday through Thursday from 1800+02200 hour and Saturday 0800+0 1700 hours each Night. I am requesting to use my Comptime to cover when I am Not at work.

FORWARD

AUG 172004

Respectfully,

Six Baron William #248

## \*\*\* DISCIPLINARY FILE \*\*\*

	WILLIAMS LAST,		SIR BARON FIRST	<del></del> -	M.I.	SPO RANK	#248 BADGE#
DATE OF BIR	RTH:						
s.s. number	<u></u>		· · · · · ·	START	DATE:		12
ADDRESS:	STREET	<del></del>	APT.#				
TELEPHONE NUMBERS:					CITY		ZIP CODE
_	НОМЕ	<del></del>	PAGER		<del></del>	OTHER	
IN CASES OF	<b>EMERGENCY N</b>	OTIFY:					
			NAME		_	RELATIONSHIP	
AT:	ADDRESS						
	ADDRESS		TELEPHO	NE NUMBER		TELEPHONE NU	MBER #2
SPECIFICS:							
CHARGE #	DATE		DESCRIPT		**********		SPOSITION
15.5.4	14APR04	A.C.P. 4.	. 0			Written W	Warning
15.5.4	01AUG04	A.C.P. 6.	5			Written R	eprimand

NAME: _	Williams	Sir Baron	V. Protection	248_
DATE OF	BIRTH: 21AUG78	RACE: B SEX:	M.I. BLOOD TYPE	BADGE#
S.S. NUMB	ER:	START DAT	TE:03MAR03	
ADDRESS:				
TELEPHO	STREET	APT.#	СІТУ	ZIP CODE
NUMBERS	: HOME	PAGER		
TRI CA CTIC	20		OTHER	
	OF EMERGENCY NOTIFY:	Louise Williams		
AT:	AUDRESS	TELEPHONE NUMBER	TELEPHONE NUMBE	R #2
SPECIFICS				
WEAR		ASSIGNED I	)ATE:	
	PE CARD:	DATE OF IS		
BULI	ET PROOF VEST	DATE OF IS		
SECO	ONDARY EMPLOYMENT:	APPROVAL I		
SECO	NDARY WEAPON	APPROVAL I	ATE:	
	ER SPRAY:	APPROVAL D	ATE:	
ASP:		APPROVAL D	ATE:	
7.3.mm		***************************************		
DATE	INCIDENT		TED NUMBERS DETE	ERMINATION
OSMAROS	<pre>PTF: (Type:New Hire) (hired as a Protection</pre>	on Officer Recruit)		Filed
25APR03	Rec'd change of add	-ess:		
				Filed
269APR03	Admin. Leave w/pay C	POTA test	4.00	Filed
08MAY03				riied
UOMA1U3	To 2 <sup>nd</sup> Platoon	pursuant to DN#03-0 Effective Date: 10M	60 3 y o 2	
	10 2 1140001	Brieccive Date: 10M	HIU3	Filed
05MAY03	Compensatory Time	2.75		Filed
010CT03	VOP SUSPENSION NOTIF	<b>ICATION</b>		Filed
080CT03	VOP to Safety Mgmt.	702 by 603		Noted
20000025-				
200CT03to 230CT03		24.00		
2300103	rarioagn	24.00		Filed
13NOV03	Rec'd memo ref to co	mpletion of range qua	alifications	
	to become armed.	-		Filed
L 7NOV03	DTF. Change of Chat.	a (Armod) -ff coa		
- /MOA02	PTF: Change of Statu request date 17NOV03	s (Armed) err. 20SEP(	13	
	reduces date 1/MOV03			Filed
21NOV03	PTF to HR for pay in	crease to armed stati	is faxed by	
	732		Lanca Dj	Filed
				=

NAME:	Williams LAST.	Sir Baron	V. Protection	248
DATE OF	- ·	FIRST RACE: B SEX: M	M.I. RANK BLOOD TYPE	BADGE#
s.s. NUM	BER:	START DATE:	03MAR03	
ADDRESS	S:			
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27MAY04	Compensatory Time	1.25	•1	Filed
29MAY04	Compensatory Time	1.5		Filed
01JUN04	Compensatory Time	1.00		Filed
02JUN04	Compensatory Time	1.00		Filed
03JUN04	Compensatory Time	.75		Filed
11JUN04	Compensatory Time	.75	*	Filed
21JUN04	Compensatory Time	1.00		Filed
28JUN04	Compensatory Time	1.00		Filed
06JUL04	Compensatory Time	1.00		Filed
07JUL04	Compensatory Time	1.00		Filed
13JUL04	Compensatory Time	1.00		Filed
14JUL04	Compensatory Time	1.00		Filed

NAME:	Williams	Sir Baron	V. Prot	tection 248
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9JUL04	Compensatory Time	2.00		Filed
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3AUG04	Compensatory Time	1.25		Filed
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## C.M.H.A. CUYAHOGA METROPOLITAN HOUSING AUTHORITY **DIVISION OF POLICE**



TO: Paul Styles #656, Sergeant- Third Platoon

FROM: Wayne C. Yates #604, Patrol Commander

PAGE 1 of 1	DISCIPLINE	DATE 19SEP03
	WRITTEN REPRIMAND re: Rule violation	

On 02AUG03 @ approximately 23:42, while assigned as a Third Platoon Field Sergeant, you had a conversation on the telephone with PO Thomas Azzano #61. PO Azzano wanted to take a few hours off at the beginning of his shift, which began in 45 minutes. During this conversation PO Azzano suggested that if Sgt. Tom Burton #634 asked about the time usage, you would both say it was approved days earlier. As a result, you have been found in violation of the following Rules: 1.1.6-The following shall be grounds for disciplining personnel, including removal: Conduct Unbecoming an Employee; and related charges of: 1.3.1.05; and A.O. #11.10.03. This "WRITTEN REPRIMAND" is disciplinary action taken against you for being in violation of the aforementioned Rules.

Your actions gave PO Azzano permission to give false information to another supervisor. A police officers character must be without question, especially a supervisor. By allowing a subordinate to make false statements to another supervisor, you cause turmoil on the shift. Officers who do not get the answer they want, will simply go to another supervisor until they get the answer they want. Being a nationally accredited department, we hold ourselves to a higher standard than other departments.

Whether this was an oversight or a departure from good judgment, the Department is still confident you can make the necessary adjustments to prevent a reoccurrence of this incident. Any further violations of this nature will result in additional discipline being taken against you, which would result in suspension or termination. This "WRITTEN REPRIMAND" will remain in your Personnel file.

> By order of, <u>Islagne C. Aplas</u> Wayne C. Yates, Patrol Commander

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

Signature: SGT- Styles # LS (
Your signature is not an admission of agreement)

Issuing/Witnessing Supervisor: Sup

APPROVED: \_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ 19 SCP 03 CMHAPD94-069B



## C.M.H.A.

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO: Paul A. Styles #656, Sergeant-Third Platoon

FROM: Ronald J. Morenz, #626, Lieutenant- Special Operations

PAGE	SUBJECT	DATE
1 of 1	DISCIPLINE SHIFT COUNSELING	04JUN03

On February 4, 2003 while assigned to the Third Platoon you left an unloaded .38 caliber revolver, in plain-view, on the front passenger seat of ZC919. As a result, you have been found in violation of the following Rules: 1.3.1.34 Personnel of the CMHA Police Department shall not willfully or negligently damage or lose property entrusted to them; and related charges of: 1.1.8 and 1.1.9. This "SHIFT COUNSELING" is disciplinary action taken against you for being in violation of the aforementioned Rules.

By leaving the firearm inside an unattended vehicle during your tour of duty, there was a significant opportunity for someone to steal it from your vehicle. The CMHA Police Department, being accredited, is in the national spotlight. A theft from one of our marked police vehicles, of one of our own firearms, would greatly tarnish our image.

Whether this was an oversight or a departure from good judgment, the Department is confident you can make the necessary adjustments to prevent a reoccurrence of this incident. Any further violations of this nature will result in additional discipline being taken against you. This "SHIFT COUNSELING" will remain in your Personnel file.

By order of,	
Ronald J. Morenz, Lieutenant	t

I acknowledge receipt of this "DISCIPLINARY ACTION" and understand its content.

\_\_\_ Date: 6 -10-63 approved: 🔀 CMHAPD94-059A



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Sharon E. Barto, Administrative Commander

FROM:

Tyrone M. Cooper. Sergeant - Complaint Investigation Unit OIC

PAGE	SUBJECT	DATE
1 of 1	Investigation X03-0010: Internal Investigation re: Sgt. Paul A. Styles	29MAY03
	#656 - Supplemental	

## Commander,

On 21FEB03 while assigned as the Officer-in-Charge the Complaint Investigation Unit, the Complaint Investigation Unit received the above referenced investigation to research for prior history regarding the transportation of firearms in CMHA Police Vehicles.

During my initial research I was unable to locate any prior instance of any incident similar to this one. After continuing my research, the only incident with any remote similarity was X00-0050 which involved Protection Officer Jan Coleman #214 who left her entire duty belt with her loaded firearm in the holster hanging on the stall door in the women's staff bathroom at her assigned Hi-Rise after working there on 18MAR00 and calling off sick on 19MAR03. Her belt was found the Protection Officer that was working there on 20MAR00. Protection Officer Coleman was issued a Written Warning for her actions. Based on my review, this incident does not bear enough common factors or a similar fact pattern to be considered a similar occurrence.

Again, neither the Rules and Regulations nor the Policy and Procedure manuals address the issue of how the firearm was transported. I concur with Lt. Morenz's findings.

Respectfully,

Jones M. Corper.

Syrvest. Classification "SUBSTANTIATED." Due to the fact that the surperty left in the vehicle was a frearm, a stronger form of training will be necessary. How prepared and executed a shift counseling training for left. Myler.

Synty Class.

X030010



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626 Lieutenant-Third Platoon

FROM: Paul A. Styles #656 Sergeant-Third Platoon

- 1	PAGE	SUBJECT	DATE
	1 of 1	Firearm Left in Zone Car 919	13 FEB 03

Sir,

On February 13, 2003 while assigned to Third Platoon as the Field Sergeant, I received a Notification to generate a report of a Firearm left in a vehicle. The following are the facts related to the incident.

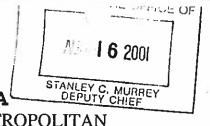
On February 4, 2003 while assigned as the Acting Watch Commander on Third Platoon, I conducted a Safety Check at 6001 Woodland (108-H) at approximately 0248 Protection Officer Wallace #220, who was assigned to the building, stated to me, that he needed to return a loaner gun to Detective Beachler #54. I advised him that I would take custody of the gun which was a .38 cal Smith and Wesson model 10, and I see to it that Detective Beachler received it. I took the gun and placed it next to my briefcase on the front passenger seat. I left and continued Safety Checks at several other buildings. At 0610 I returned to headquarters. It was still dark and there was not much light. I picked up my brief case, locked the car doors, and came into the building. I did not remember the gun was still sitting on the seat. At 0700 I was relieved by Lt. Tufts #613 and reported off duty. At approximately 1215 that day, I realized I forgot to pick the gun that I left on the seat. I immediately called and notified Deputy Chief Cobbs, who was my next chain of command due to Commander Yates being out. My actions were not intentional, being a Supervisor is a big responsibility and we must show example. I apologized for the incident, and will not make the same mistake again.

Respectfully,

type # 656

Paul A. Styles, Sergeant





RECEIVED IN THE OFFICE OF

JOSEPH W. CAINE PATROL COMMANDER





## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT

TYPE: WRITTEN REPRIMAND

TO: Paul J. Styles #656 Sergeant- Third Platoon

FROM: Ronald J. Morenz #626

Lieutenant- Third Platoon Watch Commander

**DATE:** August 16, 2001

SUBJECT: Chapter 21.2.1 of the Policies and Procedures Manual

On May 30, 2001 you were involved in a motor vehicle accident, which was found to be preventable. This is the second such accident that you have been involved in. You must take care to insure that you properly operate all Agency vehicles. Your driving habits are a direct reflection of this Agency since our vehicles are substantially marked with the CMHA logo.

You are to insure that you take any and all precautionary measures to avoid an accident.

The Department is confident that you will make the necessary adjustments to prevent a re-occurrence of these incidents.

Upon receipt you are to sign, date and return one copy.

This will remain part of your Personnel record.

By orders of:

Ronald J Morenz, Lieutenant

08-17-0180830

Date/Time

I have read the contents and I have no comments [] the attached comments []

626

# SECONDARY EMPLOYMENT

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE: REQUEST (PCM 95-012)

TO: Stanley C. Murrey, Patrol Commander

FROM: Harvey J. McGowan, Lieutenant-3th Plt Watch Commander

DATE: November 6, 1996

SUBJECT: Part Time Employment Approval Request - P.O Paul Styles

#25

Sir:

Requesting approval of the attached request, for said officer.

Said officer has a good employee performance record and a second job of 15-20 hours a week, should not hamper his performance.

The granting of this request will not adversely affect the operation of the platoon.

The officer has been counselled as to CMHA being his priority employment.

Respectfully,

for in objection & recommend

Harvey J. McGowan, Lt.

Attachment (1)

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

THE RESIDENCE A REPORT OF THE PARTY OF THE P

REQUEST OF CERTIFICATION OF OUTSIDE EMPLOYMENT

DATE: October 22, 1996
EMPLOYEE'S NAME: PAUL STYLES
ADDRESS:
Sworn Police Officer: [X] YES [] NO If no, then Commission Number:
Name of Outside Employer: TENABLE PROTECTIVE SERVICES, INC. Address: 1776 Columbus Rd. Cleveland, Ohio 44113 Phone Number: 241-0001
Number of hours to be worked per (Week - Month): 5-10 hours
Capacity you will be employed in: POLICE OFFICER
Is a Police Commission required: [X] YES [] NO Is a Uniform Required: [X] YES [] NO  **CMHA UNIFORM IS NOT AUTHORIZED**  DATE: October 22, 1996  EMPLOYEES' SIGNATURE
******************
TO THE EMPLOYER:  CMHA Division of Police does not authorize its' officers to work outside of CMHA in any capacity, if the employer does not provide Workers Compensation.  CMHA Division of Police requires that its' Non-Sworn Officers working for outside employers have that employer listed on his/her commission.  CMHA ACCEPTS NO RESPONSIBILITY FOR EMPLOYEES WORKING OUTSIDE OF CMHA. WHEN WORKING FOR AN OUTSIDE EMPLOYER, SAID EMPLOYEE IS THE AGENT OF THAT EMPLOYER, WHO ACCEPTS FULL RESPONSIBILITY FOR ACTS OF THE EMPLOYEE DONE IN THE COURSE OF THAT EMPLOYMENT.
I certify that I have read the above, understand it, and I am in full compliance with it.  Employer Signature:  Title: THE DEFT
TO THE OFFICE OF THE EXECUTIVE DIRECTOR:
I do [], do not [], endorse the above officer's request for outside employment.  DATE: //-//



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

All Personnel

FROM:

Stanley C. Murrey, Chief of Police

DATE:

August 24, 2006

Page 1 of 1	PAC Awards Certificates	DN #06-114
6		

The CMHA Police Department would like to extend its congratulations to the following officers who received certificates of appreciation from the Progressive Action Council (PAC) for their participation in the D30's / Deep Pockets investigations and their dedication to the residents of CMHA.

Lieutenant Jack J. Justus
Sergeant Dale Homerick
Sergeant Raymond Morgan
Sergeant Carol Rucker
Sergeant Paul Styles
Sergeant Theodore Troyer
RCC Supervisor Roxsann Howard
Detective Cornell Grimes
Detective James E. Harris Jr.
Detective Paul Hermensky
Detective Estel L. Justus
Detective Maurice Kennedy
Detective Charles Schultz
Detective David Whitney

Police Officer Saleem Ali Police Officer Adam Beese Police Officer Kerry Blakemore Police Officer Gregory Drew Police Officer William Higginbotham

Police Officer Ronald Hopkins
Police Officer John Kleinhenz
Police Officer Brian Salomone
Police Officer Robert Vales
Police Officer Eric Williams
Police Officer Thomas Williams

Communications Officer Michelle Ford Communications Officer Lisa Revelt Communications Officer Kelley Shealy

AUG 8 × 2006

By order of,

Stanley C. Murrey, Chief of Police

# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE

#### **CMHA**

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE: Inter-Office Memorandum

To: Stanley C. Murrey Patrol Commander

FROM: Ronald J. Morenz

Lieutenant- Second Platoon Watch Commander

DATE: February 4, 1997

SUBJECT: Outside Employment

I respectfully request permission to work part-time for the Cleveland State University Police Department and the Tenable Cleveland State University Police Department and the Tenable Protective Services. Between the two I would not be working in excess of 45 hours per month. I understand that my primary employment is with the CMHA Police Department, and that any employment is with the CMHA Police Department, and that any incident that may arise, my first concern is for CMHA. I have incident that may arise, my first concern is for CMHA. I have attached a copy of my 1996 Attendance Control Card for your attached a copy of my 1996 Attendance Control Card for your review. It shows that I did not use any sick time, nor was I tardy, during 1996.

I feel that the extra employment will not be physically or mentally taxing to the extent that it would affect my performance at CMHA. If this should happen, I will immediately correct the problem.

Attached are 2 Request of Certification of Outside Employment forms.

Respectfully Submitted,

Ronald J. Morenz, Lieutenant

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## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

REQUEST OF CERTIFICATION OF OUTSIDE EMPLOYMENT

DATE: 2-1-97
EMPLOYEE'S NAME: RODALO J. MOREJZ
ADDRESS:
Sworn Police Officer: [ \sqrt{YES} [ ] NO  If no, then Commission Number:
Name of Outside Employer: CLEVELAND STATE UNIVERSITY POLICE OEPT. Address: 2300 CHESTER AVE. CLEVELAND, OHIO 44/15 Phone Number: 687-2020
Number of hours to be worked per (Week - Month): 15
Capacity you will be employed in: Special Events officer
Is a Police Commission required: [ YES [ ] NO Is a Uniform Required: [ YES [ ] NO **CMHA UNIFORM IS NOT AUTHORIZED**
DATE: 2-1-97 EMPLOYEES SIGNATURE
**************************************
I certify that I have read the above, understand it, and I am in full compliance with it.
Employer Signature: TMarch Title: LEVIENANT
TO THE OFFICE OF THE EXECUTIVE DIRECTOR:
I do [ ], do not [ ], endorse the above officer's request for outside employment.
DATE:



DEPARTMENT OF PUBLIC SAFETY

University Police 1983 East 24th Street Cleveland, Ohio 44115 Telephone: (216) 687-2020 FAX: (216) 687-5144

January 30, 1997

Chief Anthony Jackson Cuyahoga Metropolitan Housing Authority Police Department 2685 East 79 th. Street Cleveland, Ohio, 44104

Dear Chief Jackson,

We request that ROUALD MURENZ be permitted to work as a sworn employee of the Cleveland State University Police Department on a part-time, as needed basis. It is the practice of the Cleveland State University Police Department to hire qualified, unranked, hourly contract employees, sworn in as Cleveland State University Police Officers, when their services are needed.

Any deputy sheriff or police officer, while on authorized duty at the Cleveland State University, is working in the capacity of an employee of the Cleveland State University Police Department. Therefore, his or her actions while on such authorized duty are the responsibility and liability of the Cleveland State University Police Department.

The Cleveland State University Police Department releases the Cuyahoga Metropolitan Housing Authority, and its' Police Department from any and all responsibility and/or liability for the actions of any Officer, while on such authorized duty for the Cleveland State University Police Department.

Sincerely,

Chief of Police

DRM/rjf waiver.cm

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

#### REQUEST OF CERTIFICATION OF OUTSIDE EMPLOYMENT

DATE: 2-1-97
EMPLOYEE'S NAME: RONALD JI MORENZ
ADDRESS:_
Sworn Police Officer: [ YES [ ] NO If no, then Commission Number:
Name of Outside Employer: TENABLE PROTECTIVE SERVICES  Address: 1776 Cocumbus RD. CLEVECAND, OHIO 44113  Phone Number: 241-0001
Number of hours to be worked per (Week - Month): 30
Capacity you will be employed in: SECURITY OFFICER
Is a Police Commission required: [ ] YES [ ] NO Is a Uniform Required: [ ] YES [ ] NO  **CMHA UNIFORM IS NOT AUTHORIZED**  DATE: 2-1-97  EMPLOYEES' SIGNATURE
**************************************
I certify that I have read the above, understand it, and I am in full compliance with it.
Title: Dirigh of the Employer Div
TO THE OFFICE OF THE EXECUTIVE DIRECTOR:
I do [ ], do not [ ], endorse the above officer's request for outside employment.
Chief of Police
CHIEF OF ROTICE



#### **CMHA**

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE: Inter-Office Memorandum

TO: Stanley C. Murrey

Patrol Commander

FROM: Ronald J. Morenz

Lieutenant - Second Platoon Watch Commander

DATE: February 4, 1997

SUBJECT: Outside Employment

I respectfully request permission to work part-time for the Cleveland State University Police Department and the Tenable Cleveland State University Police Department and the Tenable Protective Services. Between the two I would not be working in excess of 45 hours per month. I understand that my primary employment is with the CMHA Police Department, and that any employment is with the CMHA Police Department, and that any incident that may arise, my first concern is for CMHA. I have incident that may arise, my first concern is for CMHA. I have attached a copy of my 1996 Attendance Control Card for your attached a copy of my 1996 Attendance Control Card for your review. It shows that I did not use any sick time, nor was I tardy, during 1996.

I feel that the extra employment will not be physically or mentally taxing to the extent that it would affect my performance at CMHA. If this should happen, I will immediately correct the problem.

problem.

Attached are 2 Request of Certification of Outside Employment forms.

4 FEB '97

for a Recommend approval
Recommend approval
Respectfully Marky

Respectfully Submitted,

Ronald J. Morenz, Lieutenant



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Angel Morales, Deputy Chief

FROM:

Thomas Burdyshaw, Commander

PAGE 1 of 1	Secondary Employment Request by	DATE/NUMBER 16DEC14
	Sergeant Paul A. Styles #656	

The attached request for Sergeant Paul Styles #656 permission to engage in secondary employment with (American Communications Network, ACN) is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul Styles' Sick Time during the previous twelve months revealed he has used: **00.00 Total Hours.** Paul Styles **has not** received disciplinary action in 2014 greater than a reprimand.

Paul Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Complaint Investigation Unit (CIU) for proper recording. Approval received will initiate the issuance of two CMHAPD 94-018 forms to the officer(s) supervisor for completion. One CMHAPD 94-018 form will be filed in the C.I.U office.

Respectfully

Thomas Burdyshaw,

Zommande



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas Burdyshaw, Commander

FROM: Paul A. Styles #656, Sergeant

PAGE	SUBJECT	DATE
1 of 1	Secondary Employment Request Addendum	02JAN15

In regards to this request, there is no Workers Compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving American Communications Network.

Respectfully,

Paul A. styles, Sergeant,



#### CUYAHOGA METRC JLITAN HOUSING AUTHORITY POLICE . \_PARTMENT

### **Request for Secondary Employment**

Street		Last Name	Styles	
Address				Apartment/
City		Zip	***************************************	Phone
SWORN POLICI	E OFFICER 🛛	RESERVE OFFICER	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PROTECTION OFFICER
NAME OF PROPO	SED SECONDA	RY EMPLOYER		201 00
Company American (	Communications	Network (ACN)		(5 M)
Address				
City Cleveland		Zip 44103		Telephone
Contact Paul A. St	yles		Title Owne	er
The estimated length of employment is:	nually		My hourly rate of pay will be:	V/A
I will be		t to exceed twenty-eight (2	28) hours in a w	
working <u>0</u>		urs while on a vacation day		on a workday.
Perform Sign	n Up Customers Fo	or Gas and Electricity Ser	vices	
Police Commission Required?	□ NO ⊠	Generic Police Uniform Required?	YES NO	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPON ARE NOT AUTHORIZED.
<ul> <li>I have used <u>0</u> sick he</li> </ul>	ours within the last to AY NOT engage in sec	er than a written reprimand v welve (12) months. ondary employment involving		or dispensing of alcoholic beverages nor
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TO THE CMHA - CHIEF EXECUTIVE OFFICER:

#### CUYAHOGA METRO. LITAN HOUSING AUTHORITY POLICE L\_PARTMENT

### Request for Certification for Outside Employment

MEMBER INFORMA	TION				Last C4.	uloc			
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Address								Jnit #	· · · · · · · · · · · · · · · · · · ·
City	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Zip (	Ohio			Phone	
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SIGNATURE	W/	16-	2709						ATE 16DEC14
Company Americ				ns Network			35 42		
Address					Telepho	ne			
Supervisor Self					Title	C	)wner		
Duties You Will Perform	Sign	n Up C	ustomers	For Gas Electricity	y and Phone	Servic	es		
Police Commission Required?	YES		ио ∑	Generic Police Required?	Uniform YE	s 🔲	NO		NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
IMPORTANT NOTICE	FOR T	HE SECO	NDARY EM	PLOYER					
the employer's of CMHA requires of CMHA accepts on responsibility for CMHA requires a permitting the Moderatificate langua coverage is priming recognizing its poday notice for not comployer agrees. Subsidiaries, Affillosses, damages, injury to property employer.  The CMHA Office of Lorequire additional assistances.	turrent non-co o respondent the act of Certiff flember age mutary on osition on paying author to at a fliates, y of an egal Af	mmission on sibility cts of the ficate of the unit of the ficate of the unit of the ficate of the fi	of Compensioned member employee insecon "Coyahog ontributory ditional insecon indemnify a facility officers, a s, judgmentising directly be contactly to the contactly of the co	ation must be provided. ers to be listed on the emers working outside of CN while engaged in second urance in the amount of S dary employment, the I a Metropolitan Housing, with any insurance carri ured, and the certificate  WHA uniform or any deparand hold harmless the Cu gents, servants, and emp ts or liens, including atto titly or indirectly from, or	ployer's license ( AHA. The employary employment  \$1,000,000 per o  mployer must incomployer must incomployer must incomployer must incomployer must incomployer must incomployer and insurance shade artment issued wayahoga Metropooloyees from and rneys' fees, arising in any way relation whave any que	commissive is an accurrent clude CN dditions on all rost is a gainst a gainst ang from ang to, the estions of the estimated of the es	ce and \$  or agent co  ce and \$  or agent co  ce and \$  or agent co  or a thirty  while en  ousing Au  any and  bodily o  ne memb	of the se 2,000,0 on addit d pursu CMHA ro y (30) do gaged in uthority I all clain r person per's per	de Workers' Compensation. A copy of econdary employer who will accept full 100 aggregate. As a condition of ional insured on the policy. The sant to written agreement and equires a policy endorsement ay cancellation notice and a ten (10) in secondary employment. The its Board of Commissioners, ms, actions, causes of actions, liabilities, and injury, sickness, disease, death, or aformance of work on behalf of the coliance with these requirements, or E AND AGREE TO COMPLY WITH THE
Comployer Signature  Title Owner	M	A	Sty					Date	■ 16DEC14
OR CMHA USE ONL	Υ.	1111			Mary Company				

I DO 🗹 DO NOT 🗖 Indorse the above member's request for secondary employment.

#### **CMHA**

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE: REQUEST (PCM 95-012)

TO: Stanley C. Murrey, Patrol Commander

FROM: Harvey J. McGowan, Lieutenant-3th Plt Watch Commander

DATE: November 6, 1996

SUBJECT: Part Time Employment Approval Request - P.O Paul Styles

#25

Sir:

Requesting approval of the attached request, for said officer.

Said officer has a good employee performance record and a second job of 15-20 hours a week, should not hamper his performance.

The granting of this request will not adversely affect the operation of the platoon.

The officer has been counselled as to CMHA being his priority employment.

Respectfully,

I have no objection of recommend Harvey to. McGowan, Lt.

Attachment (1)

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

REQUEST OF CERTIFICATION OF OUTSIDE EMPLOYMENT

DATE: October 22, 1996
EMPLOYEE'S NAME: PAUL STYLES
ADDRESS:
Sworn Police Officer: [X] YES [] NO  If no, then Commission Number:
Name of Outside Employer: TENABLE PROTECTIVE SERVICES, INC. Address: 1776 Columbus Rd. Cleveland, Ohio 44113 Phone Number: 241-0001
Number of hours to be worked per (Week - Month): 5-10 hours
Capacity you will be employed in: POLICE OFFICER
Is a Police Commission required: [X] YES [] NO  IS a Uniform Required: [X] YES [] NO  **CMHA UNIFORM IS NOT AUTHORIZED**  DATE: October 22, 1996  EMPLOYEES' SIGNATURE
**************************************
I certify that I have read the above, understand it, and I am in full compliance with it.
Employer Signature: 10-/f()
TO THE OFFICE OF THE EXECUTIVE DIRECTOR:

I do [L], do not,  $[\ ]$ , endorse the above officer's request for

11.161.66

outside employment.



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Angel Morales, Deputy Chief

FROM:

Thomas M. Burdyshaw, Commander

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	PAGE	SUBJECT	DATE/NUMBER
	1 of 1	Cocondamy Francis	1/2 =
ł		Secondary Employment Request by	09DEC15
- 1			
		Sergeant Paul A. Styles #656	ļ
-			

The attached request by Sergeant Paul A. Styles #656 permission to engage in secondary employment with the (American Communication Network, ACN) is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul Styles' Sick Time during the previous twelve months revealed he has used: 00.00 Hours. Paul Styles has not received discipline greater than a reprimand in 2014 or 2015.

Paul Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Complaint Investigation Unit (CIU) for proper recording. Approval received will initiate the issuance of two CMHAPD 94-018 forms to the officer(s) supervisor for completion. One CMHAPD 94-018 form will be filed in the C.I.U office.

Respectfully

Thomas M. Burdyshaw, Commander



## CUYAHOGA [ ROPOLITAN HOUSING AUTHORITY P CE DEPARTMENT

## Request for Certification for Outside Employment

OFFICER 🖂	7ip RESERVE OFFICER	Styles	Apartmer Unit #	nt/
OFFICER 🖂			Unit #	
OFFICER 🔀			Dhoro	
OFFICER 🔀	RESERVE OFFICER		Phone	
			PF	ROTECTION OFFICER
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ASTINE			D.	ATF 09DEC15
DARY EMPLOYER Inmunications N	etwork, ACN			
		ephone	- Million Co.	
		Title Ind	ependent	Business Owner
ies Consulting			V	
□ NO 🏻	Generic Police Uniform Required?	YES	№ ⊠	NOTE: CIMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPON ARE NOT AUTHORIZED.
of the employee while ate of Liability Insurance of engage in secondary of read: "Cuyahogo Metano-contributory with a an additional insured, ent.  I the use of the CMHA untimes indemnify and ho ectors, officers, agents, penses, judgments or liberty arising directly or	engaged in secondary employing in the amount of \$1,000,000 graphoyment, the Employer must repoliten Housing Authority is any insurance carried by the Act and the certificate of insurance inform or any department issued harmless the Cuyahoga Metroservants, and employees from ens, including attorneys' fees, a indirectly from, or in any way respectively.	nent.  per occurrence is include CMHi on additional insure shall contain a  ed weapon whi ropolitan Housi and against an arising from boo elating to, the n	and \$2,000,000 A as an additions or ed pursuo d' CMHA rethirty (30) date engaged in ng Authority, y and all claim dily or personnember's perionember's perionember comporte ABOVE	00 aggregate. As a condition of onal insured on the policy. The ont to written agreement and equires a policy endorsement by cancellation notice and a ten (10) secondary employment. The its Board of Commissioners, ns, actions, causes of actions, liabilitie al injury, sickness, disease, death, or formance of work on behalf of the
ness Owner, IBO			Date	UPDEC15
	ies Consulting  NO SECONDARY EMPLOYER  its members to engage forkers' Compensation missioned members to listility for members wo of the employee while ente of Liability Insurance to engage in secondary of read: "Cuyahogo Metron-contributory with a san additional insured, ent.  In the use of the CMHA untimes indemnify and how ectors, officers, agents, expenses, judgments or library arising directly arisi	Generic Police Uniform Required?  SECONDARY EMPLOYER  To its members to engage in secondary employment if the Acriver's Compensation must be provided.  The initial of the employer with a secondary employer's lice of the employee while engaged in secondary employer at the of Liability Insurance in the amount of \$1,000,000 provided of CMHA. The engage in secondary employment, the Employer must be of Liability Insurance in the amount of \$1,000,000 provided of CMHA. The engage in secondary employment, the Employer must read: "Cuyahogo Metropolitan Housing Authority is an additional insured, and the certificate of insurance and additional insured, and the certificate of insurance and the use of the CMHA uniform or any department issued the use of the CMHA uniform or any department issued the use of the CMHA uniform or any department issued the use of the CMHA uniform or any department issued the use of the CMHA uniform or any department issued the use of the CMHA uniform or any department issued that is indemnify and hold harmless the Cuyahoga Metropolitan Housing attorneys' fees, a spenses, judgments or liens, including attorneys' fees, a party arising directly or indirectly from, or in any way refers may be contacted at (216) 271-2875 if you have any BY SIGNING BELOW, I CERTIFY THAT I HAVE READ ANI	Telephone  Title Ind  Telephone  Telephone  Title Ind  Telephone  Title Ind  Telephone  Title Ind  Telephone  Telephone  Title Ind  Telephone  Title Ind  Telephone  Title Ind  Telephone  Title Ind  Telephone  Telephone	Title Independent  See Consulting  NO Generic Police Uniform YES NO See Secondary employment if the employer does not provide to the employer does not provided.  The its members to engage in secondary employment if the employer does not provided.  The its members to engage in secondary employment if the employer does not provided.  The its members to be listed on the employer's license (commission). Sibility for members working outside of CMHA. The employee is an agent of the second the employee while engaged in secondary employment. The employee and \$2,000,000 or engage in secondary employment. The temployer must include CMHA as an additional engage in secondary employment, the temployer must include CMHA as an additionary employment, the temployer must include CMHA as an additional engage in secondary with any insurance conted by the Additional Insured "CMHA read and additional insured, and the certificate of insurance shall contain a thirty (30) does not be used to the CMHA uniform or any department issued weapon while engaged in times indemnify and hold harmless the Cuyahoga Metropolitan Housing Authority, rectors, officers, agents, servants, and employees from and against any and all claim repeases, judgments or liens, including attorneys' fees, arising from bodily or person party arising directly or indirectly from, or in any way relating to, the member's perform smay be contacted at (216) 271-2875 if you have any questions concerning compiler SIGNING BELOW, I CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE

I DO NOT D Endorse the above member's request for secondary employment.

hat hill Chat white



## CUYAHOGA! ROPOLITAN HOUSING AUTHORITY P CE DEPARTMENT

## Request for Secondary Employment

I REQUEST P	ERIV	าเรรเด	N TO ENG	GAGE IN SECONDAR	Y EMPLOY	MENT	
First Paul				Last Nam	Styles	- 10	
Street Address		Carl Interpretation				Apartn Unit #	nent/
City				Zip 4		Phor	ne
SWORN P	OFIC	E OFFI	CER 🛛	RESERVE OFFICE	R 🔲		PROTECTION OFFICER
NAME OF PR	OPC	SED S	ECONDA	RY EMPLOYER			
Company Ameri	can (	Commi	unication N	Network, ACN			
Address							
City				Zip		Telepho	one
Contact Self Person						depende	nt Business Ownwer
The estimated length of employment is:	1 Y	ear			My hourly rate of pay will be:	N/A	
I will be	.0			t to exceed twenty-eight			
Working 4 Duties You Will			elve (12) hot onsulting	urs while on a vacation da	y; or six (6) ho	ours on a	workday.
Perform	Otti	intes Co	onsutting				
Police Commission Required?	YES		№ 🛛	Generic Police Uniform Required?	YES	NO 🛛	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
I have used 0 I understand the police duty in from I understand the I UNDERSTAND INSURANCE IN ADDITIONAL IN FAIL TO PRODUCTIONAL IN Engaged in second Member Signature  Print Name Paul A SUPERVISOR'S ENDO The above member	plinary sick hat I M. ront of at a cultrant THE AI SUREI CE SAI ad ackrondary	ours with AY NOT such progress of such p	hin the last to engage in section of second ECONDARY EN OF \$1,000,000 E POLICY. ILL NAL CERTIFIC that CMHA ment.	ary employer's Workers' Con MPLOYMENT IS OF A POLICE OF PROCEURRENCE AND \$2 JNDERSTAND THAT MY REQUATE OF LIABILITY AND POLICE does not authorize the use of the use	mpensation Cer NATURE, THAT 1,000,000 AGGR UEST FOR SECC Y ENDORSEME of the CMHA un	ion or disp rtificate me CMHA RE REGATE. C ONDARY EN NT. (See A niform or a	vensing of alcoholic beverages nor or ust be provided.  QUIRES A CERTIFICATE OF LIABILITY COMMAN MUST BE ADDED AS AN APLOYMENT WILL BE DENIED IF I Appendix B, P&P Ch. 1.13) ny department issued weapon while Date 09DEC15
DO M	O N	OT L	] recomme	end approval of the above	member's re	quest to e	engage in secondary
supervisor's Signature		1	Ma	2/1		ľ	Date
Commander's Signature	X	9	1/17	The Con-	1.	C	Date 12/9/15
Penuty Chief's Signature	//	16		W10 -			3//



#### CMHA

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas M. Burdyshaw, Commander

FROM: Paul A. Styles #656, Sergeant

PAGE	SUBJECT	dimension and
1 of 1	Const. In The const.	DATE
	Secondary Employment Request Addendum	09DEC15

In regards to this request, there is no Workers Compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. No CMHA equipment will be needed. The nature of this request does not require me to dispense any alcoholic beverage. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving American Communications Network.

Respectfully,

Paul A. Styles, Sergeant # (56

MENBER 15 NOT AUTHORIZED TO CONDUCT BUSINESS AT CHILA -

12/10/265

## CERTIFICATIONS



5715 Woodland Avenue Cleveland, Ohio 44104-2740

T - 216-426-7760 F - 216-361-3728





February 11, 2013

Law Enforcement Foundation, Inc. PELC Application 6277 Riverside Drive Suite 2N Dublin, Ohio 43017-5067

RE: Statement of Nomination - Sergeant Paul A. Styles

To whom it may concern:

Please accept this letter as a nomination for Sergeant Paul A. Styles to be a candidate for an upcoming PELC Class.

Sergeant Styles is a 20 year plus veteran of police service. He is currently serving on the Cuyahoga Metropolitan Housing Authority (CMHA) Police Department assigned to the Compliant Investigation Unit. He is responsible for ensuring compliance with written directives.

Sergeant Styles has assisted in revising integrity related policy in our department. I expect Sergeant Styles to continue providing leadership and effectively communicating with citizens who may file formal complaints.

As a PELC graduate myself, I know Sergeant Styles will benefit greatly from the PELC experience. I fully support his participation and will support his attendance to sessions and assignments.

Andrés González Chief

Sincerely,

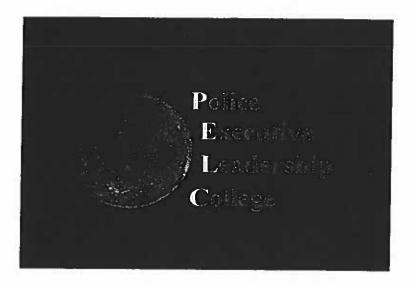
**CMHA** Police Department

Attachment: Nomination for PELC Scholarship

Cc: Paul A. Styles, Sergeant

Member File

## Application for Admission to



The Law Enforcement Foundation

The mission of the Law Enforcement Foundation, Inc. is to develop working partnerships for the common concerns of business and police executives to foster the values of good citizenship; to enhance the prospects of secure communities; and to brighten the future through constructive social change within each Ohio community. The Executive Institute is a part of the Foundation. Its goal is to provide law enforcement executives with innovative and in-depth educational opportunities. The Police Executive Leadership College was developed to meet this goal.

Indicate PELC Session preferences:

1st PELC #	
2nd PELC#	
3rd PELC#	
4th PELC#	

LEF use only					
Date received:					
Session Number:					
EIC Meeting:					

#### WHO SHOULD ATTEND?

PELC is designed for Police Chiefs, Sheriff's, Private Sector Security Executives, and Management-Level staff who are willing to devote time away from their agencies to improve their leadership skills. The course is geared to law enforcement executives from all size agencies or companies. The most important quality a participant should possess is the willingness to learn and unlearn.

#### MINIMUM QUALIFICATIONS OF APPLICANT:

Minimum qualifications for the Police Executive Leadership College include personal and job-related criteria. The applicant must:

- hold a chief executive position in a law enforcement agency/company or occupy a law enforcement management position which demonstrably includes full-time permanent responsibility to supervise full-time personnel, and has the ability to influence policy or impact the operation of the company or agency.
- → complete the attached P.E.L.C application form; an application returned with unanswered questions will not be considered.
- provide a statement of nomination and commitment from the applicant's administrator.
   (see section IV)

#### **TUITION AND LOCATION**

The student fee charged to local law enforcement agencies is \*\$2,000, or \*\$2,500 \*(subject to change) for out-of-state agencies. Tuition includes all classroom materials and program notebook, noon meals, breaks, orientation breakfast and graduation meal. Lodging is not included, but is available at a special program rate. PELC is subsidized by the Law Enforcement Foundation through the generous support of corporations, foundations and individual donors.

PELC is held in Columbus, Ohio.

## Application Police Executive Leadership College

#### TO THE APPLICANT

Please complete Section I through Section III of the Application. Please type your response. Be sure to sign your Statement of Commitment. If you are not the CEO of your agency, your Nominator must complete and sign Section IV.

Section Section	CERTSONAL ESKONALVEROS (1919) TO THE
Applicant Name/Rank: Paul Anthony Styles	
Sergeant	
Department: Cuyahoga Metropolitian Housing	9
Authority Police Department	
Work Address: 5715 Woodland Avenue	
Cleveland, Ohio 44104	
Home Address:	
Business Telephone: (216) 426-7822	Fax: (216) 361-3759
Home Telephone:	( 13, 232 272
E-mail Address: pstyles@cmhapd.org	
Nickname for Name Tag: Pablo	
County: Cuyahoga	Size of Community: 50,000
	50,000
Total Sworn Personnel: 71	Total employees: 133
Present Assignment: Officer In Charge of Complaint Investigations	
Years in present assignment: 3 years 2 Months	· · · · · · · · · · · · · · · · · · ·
1 J was a Minima	
Years in law enforcement: 20 Years 4 Months	
	Note to the Management of the Management of the Company

### SECTION II - EDUCATION, TRAINING AND EXPERIENCE

#### A. FORMAL EDUCATION

Formal education includes a degree received or courses taken at an accredited institution. List most recent education first.

Institution	Course of Study	His. Completed	Degree Received	Date
Shaker Heights Police Academy	OPOTA Basics	577	Certificate	1994

#### **B.** TRAINING

Please list any leadership or management training or related programs you have completed. List most recent training first.

Program	Presamed By	Total Hours	Date Champleted
PEALS	North Coast Polytechnic Institute	40	3/08/2002
Basic Electronics	PSI Institute	N/A	1985

## SECTION II CONTINUED

#### C. EXPERIENCE

	sent autrorist postuons malent. Neuropioni augmane	nordania katar		mon test, in
Organization: C	uyahoga Metropolitan Housing Au	thority	<u> </u>	
Date from:	December 11, 1998	To:	Present	
Title or Rank:	Sergeant			
Duties and Resp Charges to the C Violations.	onsibilities: Investigate Citizen Co Chief regarding Disciplinary Hearin	mplaints, Internal Con gs, Track Attendance	nplaints, Scheduland Sick Leave	le and Present Abuse
Update and mo Summary Files Hires.	onitor the Personnel Early Warning, review Request for Secondary	ng System (PEWS). Employment, and as	Update Discipsist in the revie	linary and ew of New
Organization: Co	ıyahoga Metropolitan Housing Au	thority		
Date from: Janu	ary 04, 1995	To: Decen	nber 11, 1998	
Title or Rank: Po	olice Officer	*****		
Duties and Respondering Property of the Restyfing in Countries	onsibilities: While assigned to the I desidents and their Guests, Patrol A rt.	Patrol Division, my Du ssigned areas, Arrest V	ties were to Prot Violators, Issue C	ect the Life and Citations, and
Organization: Cu	yahoga Metropolitan Housing Aut	hority		
Date from: Janua	ry 12, 1993	To: January	04, 1995	
Title or Rank: Sp	ecial Police Officer			
Outies and Response he Life and Prop	onsibilities: While assigned to a Hi perty of the Residents and their Gu	-Rise Building, my Re	sponsibilities we s for Lease Viola	ere to Protect

## SECTION III - REQUEST TO ATTEND THE POLICE EXECUTIVE LEADERSHIP COLLEGE

Answer the following questions in a clear and concise manner using complete sentences. Please type.

A. Please discuss your reasons for wanting to attend the Police Executive Leadership College including how you plan to utilize the knowledge gained through the program.

My reason for attending this course is to enhance my present knowledge and leadership. Upon completion, I will be able to communicate better with my subordinates and other employees, and use the knowledge I learned to help lead the department.

**B.** What is your anticipated contribution to your organization and law enforcement after the completion of the course?

Upon completion of this course, I will engage in contributing a greater wealth of knowledge to my department. That means assisting others in improving their skills and ability while assisting other Law Enforcement Agencies in my jurisdiction to be more effective.

- C. PELC program is directed toward current and future issues facing law enforcement/private security executives. Please discuss what you see as the most important emerging issues for:
- you as an executive

The most important issue for me is investigating Citizen Complaints. As an accredited Agency, we are in the national spotlight, the integrity of the department and our mission cannot be compromised. Receiving, completing, and conducting a fair, and impartial investigation in a timely manner demonstrates professionalism.

- your organization

For my organization keeping up morale, training, and staying within our budget, which has a direct impact on the topics.

- law enforcement/private security during the next 10 years
Budget, Staffing, and Equipment is essencial in order to continue the mission. Our department has demonstrated professionalism, we are a model agency that is recognized internationally by our peers.

#### **SECTION III CONTINUED**

- **D.** Cite two specific examples, one internally and one externally, wherein you personally initiated, developed, and played a major leadership role in the completion of a project.
  - internally (within your organization)

I was involved in the implementation/ restructure of the new Citizen Complaint Policy. I approached this assignment by reaching out to my supervisors and gathering their input. The idea behind this is being fair and impartial knowing that I will be the person investigating the complaints and treating everyone fairly.

externally (community, church, school, civic, fraternal group, etc.)

I currently train and participate at a martial arts school. Our youth program was basically falling apart and just short of destruction. I was given the opportunity by my instructor to find out what went wrong and to fix the problems. Within a three year period, our youth program is one of the best in the entire city as a result of my commitment and leadership. These youths performance has also excelled in academics for which I have received compliments from other instructors and parents.

In your judgment, what are the qualities needed in leadership today? I believe the following qualities that are essential for today's leadership are honesty, dependability, accountability, and commitment. I believe these qualities are the vital components that an individual must possess when it comes to strong leadership. If one does not possess these qualities, breakdown and destruction is inevitable.

#### **APPLICANT'S STATEMENT OF COMMITMENT**

- "I understand that if I am selected to attend the Police Executive Leadership College, I will be involved in an intensive educational program that will require a commitment of my time and energy and a dedication toward excellence."
- "I agree to personally complete all homework assignments and projects required for the Police Executive Leadership College by the assigned due dates. They will be my own independent, original work."
- " I understand that if I do not attend the scheduled programs and complete the required projects and assignments, I will be dropped from the program."

" If selected, I am willing to make the above commitments."

Paul A. Styles SGT- and A. Thy land APPLICANT SIGNATURE

24JAN13

DATE

Information provided in the application will be held confidential for the exclusive use of the Police Executive Leadership College. Questions may be directed to the *Law Enforcement Foundation*, (614) 761-9479.

#### THE COMPLETED AND SIGNED APPLICATION TO BE RETURNED TO:

Law Enforcement Foundation, Inc.
PELC Application
6277 Riverside Dr., Suite 2N
Dublin, OH 43017-5067

	How di	d you hear about PELC?
Brochure		Ohio Police Chief magazine
Co-worker	XX	Another Police Executive
A graduate of PELC	XX	Other:

#### **SECTION IV - STATEMENT OF NOMINATION**

To The Nominator: Your law enforcement administrator is applying for admission to the Police Executive Leadership College. Before the applicant can be accepted, your nomination of this individual and your commitment to the program are required.

Please comment in the space below, or on an attachment, the reason(s) why you would like the applicant to attend the Leadership College. Include in your discussion the role the applicant is expected to play within your organization and in the law enforcement/private security profession for the next 12 months.

Note: All applicants, except the CEO of an agency, must submit a signed "statement of Nomination" from the CEO of the agency.

"I understand my nomination of this individual to attend the Police Executive Leadership College includes a pledge of full support for the applicant to participate in the Leadership College program. My commitment to my law enforcement administrator includes release time to attend the scheduled sessions and to complete all homework assignments."

Nominator Signature	" Pulity Ingález	
Name/Title Printed:	ANDRES GONZALEZ, CUIET	_
Full Address:	CMUD POLCE DEPT - 5715 WEGDLAND DE - CLEVELAND	- - 44104
Nominator Email: 4	GONZALEZ @ CMUSPO LOG Telephone: 216 - 426-7801	

(SEE ATTOCHED LETTER.)

Officer Training Constitution of the Constitut Office of the Attorney General This is to certify that JANAGE !

PAUL A. STYLES

has completed the

**Basic Training Program** Awarded This 4th Day Of January, 1995 Shaker Heights Police Academy Ohio Peace Officer

Getter D. Montgomens

Ohio Peace Officer Training Council



951598



May 12, 2009

Sheriff Frank Bova Cuyahoga County Sheriffs Office 1215 West 3rd Street Cleveland, OH 44113-1582

Re: Update Training Complete for Officer Paul Styles

Dear Sheriff Bova:

This is to acknowledge that records have been received to substantiate that the training requirements for Missing Persons have been met.

Please retain a copy of this letter for your records.

Sincerely,

Sawh J. Thomas

Sarah Thomas Certification Officer Certification & Standards Division

cc: OPOTC Officer File Cuyahoga Metro Housing Authority Officer Styles

ST/bh



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT

#### OATH OF OFFICE

I, Paul Styles, do solemnly swear that I will support the Constitution of the United States, the Constitution and Laws of the State of Ohio, obey the rules, regulations and orders of the Cuyahoga Metropolitan Housing Authority and will discharge the duties of my office to the best of my knowledge and ability, so help me God.

Style Signature

Before me, a Notary Public, State of Ohio, personally, appeared the said Paul Styles and did solemnly swear to support the Constitution of the United States and the Constitution and Laws of the State of Ohio, obey the rules, regulations and orders of the Cuyahoga Metropolitan Housing Authority and will discharge the duties of his office to the best of his knowledge and ability, so help me God, this 11th day of December, 1998.

Chief of Police Division

Notary Public

State of Ohio, County of Cuyahoga

My commission expires\_

(SEAL)

David L. Bly Notary Public, State of Ohio Recorded in Cuyahoga Cty. My Comm. Expires 04-25-2004

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT

#### OATH OF OFFICE

I, Paul Styles, do solemnly swear that I will support the Constitution of the United States, the Constitution and Laws of the State of Ohio, obey the rules, regulations and orders of the Cuyahoga Metropolitan Housing Authority and will discharge the duties of my office to the best of my knowledge and ability, so help me God.

Yand Steles
Signature

Before me, a Notary Public, State of Ohio, personally, appeared the said Paul Styles and did solemnly swear to support the Constitution of the United States and the Constitution and Laws of the State of Ohio, obey the rules, regulations and orders of the Cuyahoga Metropolitan Housing Authority and will discharge the duties of his office to the best of his knowledge and ability, so help me God, this 4th day of Japuary, 1995.

Chief of Police Division

Notary Public

State of Ohio, County of Cuyahoga

My commission expires April 24,1999

(SEAL)



### Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cleveland, Ohio 44113 Phone: 216/348-5000 • Fax: 216/696-0636 AUGUST 18,1993

TO: PAUL STYLES

FM: MILES 7. COBBS

SUBJECT: REQUEST FOR OPEN ENROLLMENT SPONSORSHIP TO THE

BASIC ACADEMY

I am happy to approve your request for sponsorship to the basic police academy.

PLEASE FIND ATTACHED THE ENROLLMENT FORMS AND A RECOMMENDATION LETTER FROM MYSELF THAT YOU REQUESTED.

I DO NEED TO POINT OUT THAT THIS SPONSORSHIP IN NO WAY GUARANTEES APPOINTMENT AS A SWORN OFFICER WITH CMHA PD UPON YOUR GRADUATION FROM THE ACADEMY.

I POINT THIS OUT NOW BECAUSE I DO NOT WANT THERE TO BE ANY MISINTERPRETATION OF WHAT OUR SPONSORSHIP MEANS.

THE COMPLETION OF THE FINGERPRINT CARD INCLUDING MAILING TO BCI&I WITH THE \$15.00 FEE WILL BE YOUR RESPONSIBILITY. CMHAWILL SUPPLY THE CARD AND TAKE YOUR FINGERPRINTS TO ASSIST YOU IN THIS REQUIREMENT.

GOOD LUCK IN YOUR EFFORT.

#### **Board of Commissioners**

Louise Harris, Chairwoman • Karen Coats Vice-Chairwoman Dwayne Browder • Dr. Consueta Sousa • Robert Townsend, Il Claire E. Freeman Executive Director





## Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cleveland, Ohio 44113 Phone: 216/348-5000 • Fax: 216/696-0636

August 18, 1993

TO WHOM IT MAY CONCERN:

Upon successful completion of the basic training school and the Ohio Peace Officer Certification examination, I would recommend that PAUL STYLES be employed as a peace officer in the State of Ohio.

MILES T. COBBS ACTING CHIEF

#### **Board of Commissioners**



# OFFICIAL BOND

KNOW ALL MEN BY THESE PRESENTS, Th	at we PAUL STYLES	
as Principal, and THE AETNA CASUALTY AND SU		
organized under the laws of the State of CONNE		
bonds in the State of Ohio, as surety, are held and fi		
corporation in the State of Ohio, in the penal sum of		
payment of which, well and truly to be made, we	do hereby jointly and severally bind o	ourselves, ou
heirs, executors, administrators, successors and assi	gns, firmly by these presents.	
THE CONDITIONS OF THIS OBLIGATION	ON are such, that whereas, the said	PAUL
STYLES was on the 15th	day of JANUARY	19_ <del>93</del> _, duly
commissioned as a Private Policeman in the City of	Cleveland.	
NOW IF THE SAID Principal shall faithfull	y, honestly and impartially perform as	nd discharge
the duties of Private Policeman while he shall hole	d such commission in accordance with	the laws of
the State of Ohio, and the Charter and Ordinances	of the City of Cleveland, then this obli	gation shall
be void, otherwise to remain in full force and virtue		
IN WITNESS WHEREOF the parties hereto	affix their signature this	
day of JANUARY 19 93		
uay Oliganian and American and	PAUL STYLES Frincipal.	
**:	PAUL STYLES Frincipal.	-4.
		_ 93963
		••••
	«	

#### CITY OF CLEVELAND MICHAEL R. WHITE, MAYOR ARMED SECURITY GUARD'S LICENSE 3002 THIS IS TO CERTIFY THAT

Paul A. Styles
IS PERMITTED TO DO PRIVATE POLICE DUTY AT

CITY OF CLEVELAND. THIS COMMISSION MAY BE REVOKED AT ANY TIME WITHOUT NOTICE BY THE DIRECTOR OF PUBLIC SAFETY OR THE CHEEF OF POLICE. IF FOUND DOING ANY POLICE DUTY OTHER THAN AT THE PLACE DESIGNATED THIS PERMIT WILL, BE CANCELLED.

DIRECTOR OF PUBLIC SAFETY

Date of Expiration

01/15/94

## **EVALUATIONS**

#### C.M.H.A.P.D. PERFORMANCE RATING CHECKLIST

Styles, Paul # 656		POI
EMPLOYEE'S NAME / BADGE		1.0
January 1,1999 to January 2000 Vazquez, Anastacio	r <u>.                                    </u>	
RATING PERIOD / SUPERVISOR		
A numerical value shall be placed in the space	next to the item being evaluated as follows; 1-being	the lowest.
10-being the highest, 6-being average with 5-		
QUALITY OF WORK	•	
Accuracy	7 Accepts Responsibility	8
Judgement	8 Cooperative	8
Knowledge of Duties	7 Attitude Toward Department	
Thoroughness	7 Goals & Objectives	7
Ability to Learn	8 Accepts/Acts on	
Interest in Work	8 Constructive Criticism	7
Ability to Make Reports	7 PERSONAL RELATIONSHIPS	
Proper Care of Equipment	7 Tactful	7 7 7
Compliance/Policy-Directives	8 Courteous	7
Court Cases/Preparation	Proper Appearance	7
& Presentation	7 Proper Uniform / Dress	7
QUANTITY OF WORK	FOR RATING OF	· · · · · · · · · · · · · · · · · · ·
Production	7 SUPERVISORS ONLY	
Organization of Time	7 Obtains Desired Work Results	
Industriousness	7 From Subordinates	
Notice to Violator & Misd.	Explains Well the Work to be	
Citations Issued	7 Done 7 Systematically Checks the	
Arrest Record	7 Systematically Checks the	<del></del>
DEPENDABILITY	Work of Subordinates	
Reports for Work on Time		
Requires Little Supervision	<ul> <li>8 Knowledge &amp; Conformity to</li> <li>8 Departmental Directives</li> <li>8 Readily Accepts &amp; Assumes</li> </ul>	
Follows Instructions	8 Readily Accepts & Assumes	
	Responsibility Including	
	Disciplinary Action	
SUMMARY COMMENTS	1 7	-
	can except responsibility, follow instructions and perforn	ı well
under pressure. He is liked by everyone he comes i	n contact and in more than one occasions. I have receive	d
	r his professionalism that he has displayed. He has show	
	s an excellent choice for a supervisor. Sgt. Styles is respo	ected by
nis peers and subordinates.		
	,	
		<del></del>
	. 1 .	<u> </u>
SGT. Nav	1 Styles # 656 01-1	0-00
OFFICER SIGNATURE S	SUPERVISOR SIGNATURE DATE	
( $)$ $($ $)$ $($	L	_ = _
Traslace Clarque	NOSIGNATURE DATE	10, 2000
LIEUTENANT/SUPE <del>RV</del> IŠOR RZÝJE <b>/</b> W A	ND)SIGNATURE DATE	,

## FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER

Sir:



Officer's Name Styles Paul Badge: 656 Last First M.L.	
Observation Period: from 1/23/41 to 2/5/49	
F.T.O. OBSERVATIONS AND COMMENTS:  Narrative commentary required concerning the probationary officer's overall performance during this period of training. This should include but is not limited to ATTITUDINAL FACTORS, PROFESSIONAL KNOWLEDGE, APPEARANCE, JUDGEMENT, JOB RELATED SKILLS AND EQUIPMENT USAGE. Especially note extraordinary performance and or noticeable deficiencies.  Legent faul styles # 656 always in a great special special.	
per attitude toward the got, or consider and residents are always very pasitive. Set States \$656, Rommonds a good walking knowledge of the laws, duties and always desiden	٤
REMEDIAL TRAINING RECOMMENDATIONS	LE.
respond to continual remedial training.  Linguage fruit styles #656 reeds pist a little mare	
he la good all round superviser, the ability to	
Respectfully;)	
HELD TEMPTED OFFICER	
ev 6/95	

## FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER



Sir:					
Officer's Nar	ne <u>STyles</u> Last	Paul First	<u>A.</u> M.I.	Badge: <u>6<b>56</b></u>	
Observation I	Period: from 1/2	<i>3/99</i> to <i>1/3;</i>	199		
Narrative con this period of PROFESSION EQUIPMENT	VAL KNOWLEI	should includ OGE, APPEAR cially note extra ES ENTAUES	the probation to but is not ANCE, JUDO	lary officer's overall per- limited to ATTITUDIN GEMENT, JOB RELATE formance and or noticeal officer in his job CRITISISM. (LLUNY)	AL FACTORS DSKILLS AND
nclude any ren	RAINING REC nedial training the tinual remedial t	iat was given	CIONS Especially no	de when a probationary (	officer does not
	5.5				
		100	Door	C. 11	
			A)	cetfully;	
10°			FIEL	TRAINING OFFICER	<u> </u>

rev 6/95

## FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER



Sir:					
Officer's Name	<i>STylis</i> Last	First	<u>А</u> М.І.	Badge: <u>6.56</u>	
Observation Per	iod: from <u>//2</u>	1/99 10 2/6/9	74		
P.T.O. OBSERV Narrative common this period of tra PROFESSIONAL EQUIPMENT US Soft Stiller of	ATIONS AN entary require aining. This L KNOWLED SAGE. Espec	ND COMMEN ed concerning should includ OGE, APPEAR cially note extra	the probation the but is not ANCE, JUDG aordinary per	nary officer's overall perfolimited to ATTITUDINA JEMENT, JOB RELATED formance and or noticeable formance and aspecti The Appenhance Lis been a plansu	L FACTORS SKILLS AND e deficiencies. <u>ルテ</u> とバ
EMEDIAL TRA  □clude any remed  espond to continu	lial training th	nat was given. raining.	FIONS Especially no	te when a probationary of	ficer does not
		8			
Ţ.			Respondence FIELD	Straining Officer	

-:: 6/95

# TELD TRAINING OFFICER EEKLY OBSERVATION REPORT E PROBATIONARY OFFICER



Last First M.I. Badge: 656
= on Period: from $\frac{1}{23/99}$ to $\frac{1}{30/99}$
ESERVATIONS AND COMMENTS:  commentary required concerning the probationary officer's overall performance during of training. This should include but is not limited to ATTITUDINAL FACTORS, IONAL KNOWLEDGE, APPEARANCE, JUDGEMENT, JOB RELATED SKILLS AND ENT USAGE. Especially note extraordinary performance and or noticeable deficiencies.  JIYES 656 15 VERY 6000 IN THE PROCESSING OF REPORTS  TIME FOR OFFICER QUESTIONS AND IF UNSURE OF HE WILL ASK THEN 66T BACK TO OFFICERS. LOOKS TO SUPPORT AND GUIDANCE.
TRAINING RECOMMENDATIONS  Temedial training that was given. Especially note when a probationary officer does not  Continual remedial training.  THES # 656 WAS SHOWN HOW TO PROCESS DAILY ROSTERS AND  ELISTS UNDERSTANDS WHICH BUILDINGS AND ASSIGNMENTS  TO COURSE FIRST AND WHY UNDERSTANDS THE PRIORITY  TO DEPARTMENT.
Respectfully;  the May # # # # # # # # # # # # # # # # # # #

# TRAINING OFFICER ELLY OBSERVATION REPORT PROBATIONARY OFFICER



Last First M.I. Badge: 656
===== Period: from 1/31/99 10 2/5/99
E JERVATIONS AND COMMENTS:  - Immentary required concerning the probationary officer's overall performance during  - If training. This should include but is not limited to ATTITUDINAL FACTORS,  - INAL KNOWLEDGE, APPEARANCE, JUDGEMENT, JOB RELATED SKILLS AND  - INAL Especially note extraordinary performance and or noticeable deficiencies.  - STYLES FESCH HAS A GREAT ATTITUDE TOWARD IS NEW  - AND IS VERY WILLING TO ASK QUESTIONS HE  - BE A GOOD SUPERVISOR AND LEADER IN TIME.
TRAINING RECOMMENDATIONS  Temedial training that was given. Especially note when a probationary officer does not  Thinual remedial training.  TYLES #656 WAS PROVIDED TNSTRUCTION WITH PAYROLL AND  SING AND OF TIME CORDS. SGT STYLES #656 SHOWED TNTREST  TERY THROUGH IN THE COMPLETION OF SAME, IN TIME AND  THE TICE WILL COMPLETE THIS TASK WELL HE FURTHER WILL  TO ANY PLATOON ASSIENCE TO
Prespectfully;  I mald & hard # 636 So  FIELD TRAINING OFFICER

## CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

E	MPLOYEE NAME: Paul Styles
S	UPERVISOR: Lt. Ronald J. Morenz
D	ATE COMPLETED: February 19, 2002
☒	1. Employee "self-evaluation"
×	2. Previous year Objectives/Expectations Worksheet.
×	3. Copy of Employee Attendance Record for previous year
X	4. Current Performance Appraisal
X	5. Current year Objectives/Expectations Worksheet
	6. Employee comments and/or written statement regarding Performance Appraisal.
X	7. Career Counseling Form



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

#### CONFIDENTIAL

Name: Paul Styles	Position: Sergeant
Department/Area: Police	Last Appraisal Date: 01 / 01 / 01
Type: XXX AnnualMid ProbationOther  Evaluation Period: From01 _ / _01 _ / _01 _ To01 _ / _3  Instructions: Five (5) Performance Levels and associated ratings definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating Performance Factors and Employee Objectives/Expectation Performance Appraisal.  PERFORMANCE	s have been established for Performance Factors. A general ing an employee, determine the performance level for " each" to The COMMENTS: section must be completed for all is. As required, additional pages may be attached to this
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

#### PERFORMANCE FACTOR (Eight Performance Factors are to evaluated) Job Knowledge: The practical/technical skills and information used on the job. The demonstrated ability to execute 1. the duties outlined on the job description. RATING $\mathbf{E} \square$ $S \boxtimes$ $\mathbf{O}\square$ IΠ U□ 3 Points COMMENTS: Dependability: The extent to which an employee follows attendance standards, safety and conduct rules, and all 2. agency regulations. RATING S□ E 🔀 Ι□ U 4 Points COMMENTS: \_\_\_\_\_ 3. Quality: The accuracy, thoroughness and acceptability of work performed. RATING 0 $\mathbf{E} \boxtimes$ $S\square$ $\mathbf{I} \square$ U 🗀 4 Points COMMENTS: Productivity: The quality and efficiency of work completed in a specified period of time, e.g. meeting/exceeding 4. established goals. RATING 0 🗆 E S⊠ I U 3 Points COMMENTS: Initiative: The extent to which an employee is a " self starter", seeks out new assignments, expands his or her skills 5. and knowledge, and suggests better ways of accomplishing the job. **RATING** $0\square$ $\mathbf{E}\square$ S⊠ $I\square$ U 3 Points 6. Communications: Demonstrates the ability to communicate in an effective manner, both written and verbal. Demonstrates the ability to understand and execute verbal and/or written instructions. RATING $0\square$ Е□ $\mathbf{S} \boxtimes$ $I\square$ U 3 Points

Original: Human Resources

0 🗆	E 🖾	$s \square$	$\mathbf{I} \square$	U	4 Points
COMMENTS:					
ndependence: Th	he extent of wo	ork performed	with little or no	direction/sune	ervision Demonst
bility to make de	he extent of wo	ork performed vectors of	with little or no	direction/supe	ervision. Demonst
Independence: The ability to make de RATING 0□	he extent of wo	ork performed vie ownership of	with little or no their own job	o direction/supe duties.	ervision. Demons

Original: Human Resources

#### Employee Objectives/Expectation

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1:							17
	RATING 0□	EX	S			4 Points	
	COMMENTS:		<del></del>	·			
Objective #2:_				·			
	RATING 0□	E□	SÞ	] I	ם ע	3 Points	
	COMMENTS:						
Objective #3:_		<del></del>					
Objective #3	RATING		0.57	7			
	O□  COMMENTS:	E 🗆	S⊠			3 Points	
	COMMENTS:						
							<u></u>
Objective #4:_	RATING	<del></del>	····				
		E 🗆	s⊠	I 🗆	U U U	3 Points	
	COMMENTS:			<del>-</del>			
Objective #5:							
	RATING 0□	E□	S⊠	I I	l v□	3 Points	
	COMMENTS:						
Objective #6:					<del></del>		
	RATING O□	E 🗔	S⊠	] I 🗆	] V <b>_</b>	3 Points	
	COMMENTS:			·	<u> </u>	<del></del>	

Original: Human Resources

#### Overall Performance

Rate employee's overall performance:	
Total Points 45 $^{\circ}$ /. 14 = 3.21 (Overall Ra	ating: Round rating to one (1) decimal place)
	Improvement Needed (1.5 - 2.4) Unsatisfactory (O - 1.4)
Specific areas of improvement needed:	
Specific goals for improvement:	
Training needed to accomplish goals:	
Additional comments:	
ACKNOWLEDGMENT:	
Please acknowledge that this performance appraisal has been reviewed review. Signing does not indicate agreement with your performan	with you by signing your name and recording the date of this ce appraisal.
Also indicate whether you intend to submit a written statement or commust be submitted to the Director of Human Resources within ten (19)	ments in the space provided below. Your statement or comments b) days after completion of your performance appraisal review.
Written Statement/Comments: Yes No 🛛	
Employee Signature:  Reviewing Supervisor Signature:  Department Director Signature:  Market Styles  Department Director Signature:  Market Styles  Market S	Date: 02 / 19 / 02  Date: 02 / 19 / 02  Date: 5 / 3 / 02

Original: Human Resources



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Name	e: Paul J. Styles	Department/Area: Police Division
Posit	ion: Police Sergeant	Report Year: 2001
your j this r demo	position description, you will be responsible report year. Please note that your annual properties toward accomplishment and actual cofficers of six [6] objectives/expectations is required	and/or area goals established for the above report year and for accomplishing specific objectives/expectations during erformance appraisal will be based upon the progress btainment of the objectives/expectations defined below (a l). As required, additional pages may be attached to this
1.	area. Conducts roll calls, inspects appear	of police officers and non-sworn officers in an assigned ance and equipment of subordinates. Relays and, instructions, teletypes, special notices and directives.
2-	Ensures that police presence is visible wit crime. Confers with superior officers regarderformance and complaints.	hin assigned CMHA area to serve as a deterrent to arding patrol problems, crime conditions, personnel
3-	investigations conducted by subordinates.	nts and civil disturbances. Supports preliminary Conducts special investigations including accidents irearms and complaints about police personnel.
4-	Supervises subordinate staff engaged in parameters on the maintains on the staff engaged in parameters assignments when required.	atrol and other activities and assists where necessary.  g to established procedures, responding to radio
5-	forms describing circumstances of crimes,	rime reports and completes other required reports and accidents, investigations, complaints and other police vities, daily rosters, leave requests and any other
6-	Serves as Officer in Charge (OIC) of head CMHA property and department equipme certifications that are required for this posi-	quarters as needed. Observes, inspects and maintains nt. Obtains and maintains firearms and other tion.
Emplo	oyee Signature: x Saul Sty	Date: 03 / 29 / 01
Immed	diate Supervisor Signature:	Date: 03 / 29 / 01
Denari	tment Director Signature:	Date: 03 / 29 / 01

DEPARTMENT POLICE YEARLY TOTALS
USE REVERSE SIDE
FOR ADDITIONAL NOTES
Printed in U.S.A. 0 VACATION TIME DUE " 8 ABSENCE SUMMARY ABCDEF BADGE NUMBER\_ 28 29 30 31 ₹ 80 20 20 20 20 N \_ 之 之 \* \$\$\frac{4}{5}\frac{4}{5}\frac{1}{ ű, × **EMPLOYEE ATTENDENCE RECORD** P=PERSONAL S=SICK LEAVE SS=SUSPENSION W=LEAVE WITHOUT PAY X=VACATION PAY ¥ 22 24 25 26 25 ٠. 05 35 35 35 35 35 ď . , 7 ĸ MIDDLE ន Salabara and Salabara 16 17 18 19 20 21 10 SICK DAYS DUE DATE OF HIRE F=FUNERAL LEAVE
J-JURY LEAVE
L=ADMINISTRATIVE LEAVE
M=MILTARY LEAVE
O=AWOL 8) 8) 8 | 6 | 6 | 8 | 8 | 8 | 8 | 888888 888 Op C 15 SB 226 326 326 326 4 × FIRST ũ . Ų. 7 Ż 151年からてんなるように そくい とうない 1 5 ۶, , O STYLUS 00 7 治學之名名 SOCIAL SECURITY NUMBER B= DOCTOR'S CERT, REQUESTED C=COMPENSATORY LEAVE D=DID NOT CALL IN 1ST HR. E=DOCTOR'S CERT, PRESENTED ø JAN 58 58 58 58 58 58 , 40 25 4 8 8 LAST DATE OF BIRTH DEC X X A=ANNUAL LEAVE N NON NON MAR 53 NAME FEB 138 APR AUG Š ¥ 텇 SEP 엉

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### CMHA POLICE DEPARTMENT CAREER COUNSELING

NAM	IE: Paul Styles		DATE: 2/19/02
CUR	RENT ASSIGNME	NT: Third Platoon	
High Bach	ation: School/GED XX elors Degree orate	Associates Degree Masters Degree	
	alized Training: ntly attending the Police	Executive Administrative Leadersh	ip School.
1. Either	Professionally spea	aking, where would you like to ommander.	be five (5) years from now?
2. Return	What are your pro		
3. Tuition	How can CMHA a	ssist you in obtaining your pro	fessional goals?
4. a) Leo	If possible, what ty your current positi al Updates	pe of training would you like to	attend that would be beneficial to
	ice Instructor Courses		
	anced PEALS		
5.	In the past 12 mon Department, inform	ths, have you been provided wi nation on available work-relate	th or seen posted in the Police d training?
	YES XX	NO	
6.	Currently, do you l that could affect yo	have any health issues, persona our attendance and/or job perfo	l or work-related stress problems ormance? If YES, please explain.
	YES	NOXX	

#### CAREER COUNSELING (continued)

7.	Currently, are there any work-related or personal stress problems that you would like CMHA to offer you assistance with. If YES, please explain.					
	YES	NOXX				
8.	CMHA, would you	sonal or work-related stress relat prefer going for assistance? Pleate ep in the chain of command	ted problems where, within ase explain reason.			
9.	If needed, would y personal stress pro	ou talk to your immediate superv blems?	risor about work-related or			
	YES XX	NO				
10. If needed, would you talk to a Licensed Family Counselor on retainer by about work related or personal stress problems?						
	YES <u>XX</u>	NO				
11.	In the past 12 months, <u>approximately</u> how often have you had general or work-related conversation or discussions with your immediate supervisor?					
	Never	Sometimes	Often XX			
12.	Since being employ Administrative Ord	ed by CMHA, have you ever beer ler No. 11 - Personnel Policies?	n provided with a copy of			
	YES <u>xx</u>	NO				
Empl	oyee Name and Badge					
Emplo	oyee Signature:	Paul Styles	Date: 2/19/02			
Super	visor Signature:	thelly bu	Date: 2/19/02			



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

COI	NEIDENTIAL					
Nam	e: Paul Styles				Position: Sergeant	
Depa	artment/Area: Police		<u>.                                    </u>	<del></del>	Last Appraisal Dat	te: <u>01 / 01 / 01</u>
Туре	e: XXX Annual _	Mid Probat	tionOth	er	Current Date:	02 / 19 / 02
Eval	uation Period: From	01 / 01 / 01	To 21 / 31 / (	01		
defin "each	ition of each Perform  " Performance Facto	ance Level is als or and record the	so provided. Who e associated num	en appraisi eric rating	ng an employee, determi	formance Factors. A generatine the performance level for must be completed for all isal.
			PERFORMA	ANCE LI	EVELS	
	Outstanding (5): Perform ecognized as being far	-	onal in all areas		I = Improvement Neede	ed (2): Performance is as. Improvement is necessary.
po	xceeds Expectations (4 position requirements. Pen a consistent basis.	· · · · · · · · · · · · · · · · · · ·		achieved	U = Unsatisfactory (1):	Results are generally
	Meets Expectations (3):  f performance. Meets 1	_	~			
<u>PER</u>	<u>FORMANCE I</u>	ACTORS	(Eight Perform	ance Fac	tors are to be evaluate	ed)
1.	Job Knowledge: The the duties outlined on RATING			formation	used on the job. The den	nonstrated ability to execute
	0 🗆	E 🔲	M 🛮	ΙC	u 🗆	3 Points
COM	MENTS: Sgt. Styles n	eeds to work on t	he elements of cri	nes as spec	ified by the O.R.C. He still	makes mistakes that he
_					to accomplish all of the du	
descrip						
2.	Dependability: The agency regulations. RATING	extent to which	an employee foll	ows attend	lance standards, safety an	nd conduct rules, and all
	0 🗆	E 🖾	М	Ι□	U 🗖	4 Points
COMN	ÆNTS: Sgt. Styles m	issed 57 days due	to an off-duty inju	ıry. After ı	eturning from his injury, S	gt. Styles did not miss a day
of work	due to illness. He follo	ws all Departmer	ntal Rules and Reg	ulations, as	well as, Agency regulation	ıs.

COMMENTS: Sgt. Styles turns in paperwork that is accurate. His work is acceptable but would be better if he had a grasp of the ORC.  4. Productivity: The quality and efficiency of work completed in a specified period of time, e.g. meeting/excee established goals.  RATING  O  E  M  I  U  3  Points  COMMENTS: Sgt. Styles handles all of his assignments prior to reporting off duty. If he is given an assignment with date, he insures that it is completed and turned in by that date.  5. Initiative: The extent to which an employee is a "self starter", seeks out new assignments, expands his or her and knowledge, and suggests better ways of accomplishing the job.  RATING  O  E  M  I  U  3  Points  COMMENTS: Sgt. Styles is a self-motivated employee. He handles any assignment that he is given in order to expand his knowledge hase and to make him become more familiating the ORC.  Communications: Demonstrates the ability to communicate in an effective manner, both written and voluments the ability to understand and execute verbal and/or written instructions.  RATING  O  E  M  I  U  3  Points  COMMENTS: Sgt. Styles is a self-motivated employee. He handles any assignment that he is given in order to expand his knowledge base and to make him become more familiating the ORC.  Communications: Demonstrates the ability to communicate in an effective manner, both written and voluments the ability to understand and execute verbal and/or written instructions.  RATING  O  E  M  I  U  3  Points  COMMENTS: Sgt. Styles can effectively communicate verbally. His written communications  Interpersonal Relationships: The willingness and demonstrated ability to cooperate, work and effectively communicate with co-workers, supervisors, subordinates and/or outside contacts.  RATING	TING				
4. Productivity: The quality and efficiency of work completed in a specified period of time, e.g. meeting/excee established goals.  RATING  O	0 🗆	Е□ м[	I 🗆	υ 🗖	Points
established goals.  RATING  O		s in paperwork that is a	ccurate. His work	is acceptable but w	ould be better if he had a fir
O	olished goals.	ty and efficiency of wo	rk completed in a	specified period of	time, e.g. meeting/exceedir
Initiative: The extent to which an employee is a "self starter", seeks out new assignments, expands his or her and knowledge, and suggests better ways of accomplishing the job.  RATING  O  E  M  I  U  3  Points  OMMENTS: Sgt. Styles is a self-motivated employee. He handles any assignment that he is given in order to expand his knowledge to submit for outside training in an effort to expand his knowledge base and to make him become more familiate ORC.  Communications: Demonstrates the ability to communicate in an effective manner, both written and value Demonstrates the ability to understand and execute verbal and/or written instructions.  RATING  O  E  M  I  U  3  Points  Point		е□ м⊠	I 🗆	υ 🗖	3 Points
and knowledge, and suggests better ways of accomplishing the job.  RATING  O E M M I U J 3 Points  DMMENTS: Sgt. Styles is a self-motivated employee. He handles any assignment that he is given in order to expand his knowledge to submit for outside training in an effort to expand his knowledge base and to make him become more familia ORC.  Communications: Demonstrates the ability to communicate in an effective manner, both written and voluments the ability to understand and execute verbal and/or written instructions.  RATING  O B M M I U J 3 Points  MMENTS: Sgt. Styles can effectively communicate verbally. His written communications  Interpersonal Relationships: The willingness and demonstrated ability to cooperate, work and effectively communicate with co-workers, supervisors, subordinates and/or outside contacts.	S: Sgt. Styles hand es that it is complete	les all of his assignmen ed and turned in by that	ts prior to reporting date.	g off duty. If he is	1
MMENTS: Sgt. Styles is a self-motivated employee. He handles any assignment that he is given in order to expand his knowledge base and to make him become more familiated order.  Communications: Demonstrates the ability to communicate in an effective manner, both written and voluments the ability to understand and execute verbal and/or written instructions.  RATING  O  E  M  I  U  3  Points  Points  MMENTS: Sgt. Styles can effectively communicate verbally. His written communications  Interpersonal Relationships: The willingness and demonstrated ability to cooperate, work and effectively communicate with co-workers, supervisors, subordinates and/or outside contacts.	mowledge, and sugg	which an employee is a gests better ways of acc	a "self starter", see omplishing the job	eks out new assign	ments, expands his or her sk
Communications: Demonstrates the ability to communicate in an effective manner, both written and volume Demonstrates the ability to understand and execute verbal and/or written instructions.  RATING  O		е□ м⊠	Ι□	ט 🗖	_3 Points
O DE M M I DU 3 Points  MMENTS: Sgt. Styles can effectively communicate verbally. His written communications  Interpersonal Relationships: The willingness and demonstrated ability to cooperate, work and effectively communicate with co-workers, supervisors, subordinates and/or outside contacts.	munications: Demonstrates the ability t	ining in an effort to exp	and his knowledge	base and to make	him become more familiar w
Interpersonal Relationships: The willingness and demonstrated ability to cooperate, work and effectively communicate with co-workers, supervisors, subordinates and/or outside contacts.		<b>M</b> ⊠	I 🔲	υ	_3 Points
communicate with co-workers, supervisors, subordinates and/or outside contacts.	Sgt. Styles can eff	ectively communicate	verbally. His writt	en communications	3
	unicate with co-wor				work and effectively
O D E M D I U 4 Points	o □ E	M □	I 🗆	บ□	4 Points
MMENTS: Sgt. Styles has demonstrated that he can work with anyone in the Department effectively. He has an upb onality and I have never witnessed him display an outwardly negative attitude. His personality is an asset when he is racting with the residents of CMHA.	I have never witness	sed him display an outv			
Independence: The extent of work performed with little or no direction/supervision. Demonstrates an ability to make decisions and take ownership of their own job duties.  RATING	ecisions and take ow	15		ction/supervision. I	Demonstrates an ability to
O E M I U 4 Points		<b>⊠</b> м □	I 🗆	υ <b></b>	4 Points
MMENTS: Sgt. Styles works well without direct supervision. The one problem that he does have to work on is his	Sgt. Styles works w	ell without direct super	vision. The one p	roblem that he doe	s have to work on is his
wledge of the ORC. On occasion he tends to make incorrect calls, which have to be corrected by another supervisor. In he does make a mistake, Sgt. Styles takes ownership of the mistake and learns from it.	e ORC. On occasion	n he tends to make inco	of the mistake and	have to be corrected	d by another supervisor. But

#### Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1:		and coordinates t	he activities of po	lice officers and	non-sworn officers i	n an assigned area. Conducts
	RATING	[				2
	0 🗆	E□	ΜØ	Ι□	U□	_3 Points
						e 3rd Platoon. He is also aware
	<del></del>		into our shift. He	inspects these o	fficers on a daily bas	is to insure that they are
completing the	ir assigned duti	es.	····			
Objective #2:	Ensures that	police presence	is visible within a	ssigned CMHA a	rea to serve as a det	errent to crime. Confers
<b>,</b>	RATING					
	0 □	E 🗆	M 🛮	I 🗆	U□	_3 Points
COMMENTS	S: Sgt. Styles in	sures that the 3r	d Platoon Police (	Officers are provi	ding a visible preser	ice in their assigned zone, to
deter criminal a	ctivity. He con	fers with me on	personnel matters	and recommends	disciplinary action	when appropriate.
		<del>.</del>				
Objective #3:	Conducts inv	estigations of cri	mes, accidents, a	nd civil disturban	ces. Supports prelin	ninary investigations
•	RATING			· · ·		
	<b>o</b> $\square$	E 🗆	M⊠	Ι□	υ□	3 Points
COMMENTS	Sgt. Styles re	views the investi	gations of subord	inate officers whi	ile they are on-scene	to insure that their findings are
consistent with t	he evidence. H	le completes inve	estigations as nece	essitated by circu	mstances. He needs	to work on these investigations
because they free	quently lack all	of the required i	nformation.			
Objective #4	Supervises en	hardinate staff e	nagged in natrol a	nd other potivitie	s and againts whom	necessary. Maintains
Objective #4:	RATING	oordinate starr c	ngaged in patror a	nd other activities	s and assists where i	iecessary. Maintains
		E □	М 🗵	Ι□	υD	_3_Points
COMMENTS:	Set. Styles sur	nervises all of th	e officers working	during his shift:	and insures that thes	are handling their duties as
outlined in their	job descriptions	s. He maintains	radio contact with	all units and res	onds to their location	on whenever they need his
assistance, or he						
Objective #5:		completion of a	Il written crime re	ports and comple	etes other required re	eports and forms describing
	RATING O □	Е 🗆	м⊠	Ι□	υ□	_3_Points
		- 11 41		<u>—</u>	_	<del></del>
COMMENTS: that he is assigned			ng of the majority	of the 3rd Platoc	on LERS reports. He	e completes all other reports
urat ne is assigned	d on a daily bas		<u> </u>			
		<del></del>				····
Objective #6:	Serves as Offic	er in Charge (O	IC) of headquarter	rs as needed. Ob:	serves, inspects and	maintains CMHA
•	RATING					05
	0 🗆	E 🔲	M 🛛	Ι□	υ□	_3_ Points
COMMENTS:	Sgt. Styles serv	es as the Acting	Watch Commane	der in the absence	of other supervisor	s. He insures that all CMHA
equipment is mair	ntained in the p	roper working or	der. Any equipm	ent he finds to be	defective, he takes	the appropriate steps to insure
its repair. He mai	intains his firea	ms certification	as required by De	partmental rules	and regulations.	

#### Overall Performance

Rate employee's overall performance:
Total Points $\underline{45}$ $\underline{-14} = \underline{3.21}$ (Overall Rating)
Outstanding (4.5 - 5.0) Improvement Needed (1.5 - 2.4) Exceeds Expectations (3.5 - 4.4) Unsatisfactory (O - 1.4)
Specific areas of improvement needed: Sgt. Styles needs to work on his knowledge of the Ohio Revised Code. We went over to
same subject during his 2000 evaluation. He also needs to complete more thorough investigations. He frequently omits required
information that has to be added by me.
Specific goals for improvement: Improve his knowledge of the ORC. Take a little more time and obtain all of the required
information so that he can complete a proper investigation.
Training needed to accomplish goals: We discussed the possibility of taking the Legal Update class held at OPOTA. Sgt. Styles
also currently taking the Police Executive Administrative Leadership School which should also help him in this area.
Additional comments: Sgt. Styles is an asset to me and the Department. He is a positive influence and is self-motivating. He tries
to learn from the mistakes, and accepts critiques of his work in a positive manner. As time goes by he is learning to be a more
effective supervisor.
ACKNOWLEDGMENT:
Please acknowledge that this performance appraisal has been reviewed with you by signing your name and recording the date of the review in the spaces provided below.
Also, indicate whether you intend to submit a written statement or comments. A statement or comments must be submitted within 10 days after completion of the evaluation.
Written Statement/Comments: Yes XX No
Employee Signature:
Reviewing Supervisor Signature: Date: 02 / 19 / 02
Department Director Signature: Linky Suckson, Chir Date: 513 02



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Name:	Paul Styles	Department/Area: Police Division		
Positio	on: Police Sergeant	Report Year: 2002		
your po this rej demons	osition description, you will be responsible for acceptor year. Please note that your annual perform strated toward accomplishment and actual obtains faix [6] objectives/expectations is required). As	area goals established for the above report year and complishing specific objectives/expectations during mance appraisal will be based upon the progress ment of the objectives/expectations defined below (a required, additional pages may be attached to this		
I.	area. Conducts roll calls, inspects appearance a	ice officers and non-sworn officers in an assigned and equipment of subordinates. Relays and uctions, teletypes, special notices and directives.		
2-	Ensures that police presence is visible within as crime. Confers with superior officers regarding performance and complaints.	signed CMHA area to serve as a deterrent to patrol problems, crime conditions, personnel		
3-	Conducts investigations of crimes, accidents and civil disturbances. Supports preliminary investigations conducted by subordinates. Conducts special investigations including accidents and injuries to police officers, the use of firearms and complaints about police personnel. Recommends disciplinary action where necessary.			
4-	Supervises subordinate staff engaged in patrol a Maintains ongoing radio contact according to es assignments when required.	and other activities and assists where necessary. stablished procedures, responding to radio		
5-	Supervises the completion of all written crime reforms describing circumstances of crimes, accidentivities including, but not limited to, brevities, required reports.	reports and completes other required reports and dents, investigations, complaints and other police, daily rosters, leave requests and any other		
6-	Serves as Officer in Charge (OIC) of headquarte CMHA property and department equipment. Observing that are required for this position.	ers as needed. Observes, inspects and maintains btains and maintains firearms and other		
Employ	ree Signature: Jany An Str	Date: 02 / 19 / 02		
Immedi	ate Supervisor Signature:	Date: 02 / 19 / 02		
Departn	nent Director Signature:	en, chief Date: 5 13 102		

#### CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

E	MPLOYEE NAME: Paul J. Styles
S	UPERVISOR: Lt. Ronald J. Morenz
D	ATE COMPLETED: March 29, 2001
×	1. Employee "self-evaluation"
×	2. Previous year Objectives/Expectations Worksheet.
×	3. Copy of Employee Attendance Record for previous year
×	4. Current Performance Appraisal
×	5. Current year Objectives/Expectations Worksheet
×	6. Employee comments and/or written statement regarding Performance Appraisal.
×	7. Career Counseling Form



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

	NFIDENTIAĻ	,						
Nam	ne: Poul A.	Styler		=	Position: SEC	فندل	<u> </u>	
Dep	artment/Area:	olice'		_	Last Appraisal D	ate:	/	1
Тур	e: <u> </u>	Mid Proba	tionOthe	er	Current Date: _	3	128	1000/
Eval	uation Period: From		To <u>//</u>					
defin "eacl	ition of each Perform  n" Performance Factor	ance Level is all or and record th	so provided. Whe se associated nume	n appraisi cric rating.	been established for Ping an employee, deter The Comments Sections Performance App	mine the	performan	ace level fo
	, i'e		PERFORMA	NCE LE	VELS			- 100
1	Outstanding (5): Perfo nized as being far super		ional in all areas		I = Improvement Nee deficient in certain are			
position a comment	exceeds Expectations (con requirements, Performance, Meets performance	mance is of high:  Competent and	quality and is achie	ved	U = Unsatisfactory (1 unacceptable and requi		_	-
<u>PEF</u>	Job Knowledge: T the duties outlined of RATING	The practical/tecon the job descri	hnical skills and in		ors are to be evaluated on the job. The o			to execute
	0_	<b>E</b>	M <u>./</u>	I	<b>U</b>	<u>\$</u>	_ Points	
COM	MENTS:							
2.	Dependability: The agency regulations. RATING O	e extent to which	n an employee follo	ows attend	ance standards, safety  U		duct rules,	and all
СОМ	MENTS:							2
						-		

#### Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1:				G.			
•	RATING O	E_	M	I	ŭ	4 Points	
COMMENTS	S:						V.
Objective #2:							
•	RATING O_	E	M_/	I	U	3 Points	
COMMENTS	:						
Objective #3:							
	RATING O	E	M	I	<b>u_</b>	4 Points	1
COMMENTS							
Objective #4:							
	RATING O	E	M	I	Ŭ	Points	
Objective #5:							
	0_	E	M	I	U	Points	
COMMENTS:							t.
Objective #6:	RATING	<del> </del>					
COMMENTS:		E <u>/</u>	M	I &	U	4 Points	

8 8 656 DEPARTMENT POLICE YEARLY TOTALS
USE REVERSE SIDE
FOR ADDITIONAL NOTES
Printed in U.S.A. A S C D E F M O  $\mathcal{C}'$ VACATION TIME DUE 25.8 3.25 BADGE NUMBER\_ 26 27 28 29 30 31 55 55 58 **EMPLOYEE ATTENDENCE RECORD** P=PERSONAL S=SICK (LEAVE SS=SUSPENSION W=LEAVE WITHOUT PAY X=VACATION PAY Ś 15 16 17 18 19 20 21 22 23 24 25 SICK DAYS DUE DATE OF HIRE F=FUNERAL LEAVE J-JURY LEAVE L=ADMINISTRATIVE LEAVE M=MMLTARY LEAVE O=AWOL parc 4 10 11 12 13 رن ر > > > σ . SOCIAL SECURITY NUMBER STYLES A=ANNUAL LEAVE
B= DOCTOR'S CERT. REQUESTED
C=COMPENSATORY LEAVE
D=DID NOT CALL IN 1ST HR.
E=DOCTOR'S CERT. PRESENTED **9** 2 ব DATE OF BIRTH <sup>'</sup>ω 7 SEP N V NOS. X VQV 3 F68 APR MAY JUL AUG MAR 90 Ą

### CMHA POLICE DEPARTMENT CAREER COUNSELING

NAI	ME: Paul J. Styles	·	DATE: 3/29/01		
CUI	RRENT ASSIGNME	NT: Third Platoon			
High Bach	cation:  n School/GED xxx helors Degree torate	Associates Degree Masters Degree			
	cialized Training: tronics- Certified electron	nic technician.			
1. A Lie	Professionally spe	aking, where would you like to l	pe five (5) years from now?		
2. To pr	What are your progress through the ranks				
3. Send	How can CMHA a	ssist you in obtaining your prof	essional goals?		
4.	If possible, what ty your current posit vestigative Classes		attend that would be beneficial to		
	anagement type classes				
C)					
5.	In the past 12 mon Department, infor	ths, have you been provided wit nation on available work-related	h or seen posted in the Police l training?		
	YES xxx	NO			
6.	Currently, do you that could affect yo	have any health issues, personal our attendance and/or job perfo	or work-related stress problems rmance? If YES, please explain.		
	YES	NO <u>xxx</u>			

#### CAREER COUNSELING (continued)

7.	Currently, are there any work-related or personal stress problems that you would like CMHA to offer you assistance with. If YES, please explain.					
	YES	NO <u>xxx</u>	s:			
8. Imme		sonal or work-related stress relate prefer going for assistance? Plea				
9.	If needed, would yo personal stress pro	ou talk to your immediate supervi blems?	isor about work-related or			
	YES xxx	NO				
10.	If needed, would yo about work related	ou talk to a Licensed Family Coun or personal stress problems?	selor on retainer by CMHA			
	YES <sub>xxx</sub>	" NO				
11.		ths, <u>approximately</u> how often have n or discussions with your immed				
	Never	Sometimes	Often XXX			
12.	Since being employ Administrative Ord	ed by CMHA, have you ever beer ler No. 11 - Personnel Policies?	n provided with a copy of			
	YES xxx	NO				
	<del>-</del>	¥				
Empl	oyee Name and Badge	# Paul J. Styles #656 (PRINT)				
Empl	oyee Signature: 😕	Paul stylus	Date: 3/29/01			
Super	visor Signature: 🥢	ee Joy	Date: 3/29/01			



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

CONFIDENTIAL							
Name: Paul J. Styles	<u> </u>		_	Position: Sergeant		·	
Department/Area: Police				Last Appraisal D	ate:	12 / 3	1 / 99
Type: XXX Annual	_Mid Probation	Othe	r	Current Date: _		03 / 29	/ 01
Evaluation Period: From 01	/ 01 / 00 To	12 / 31 / 00	1				
Instructions: Five (5) Perform definition of each Performance "each" Performance Factor as	e Level is also prond record the asso	ovided. Wher ociated nume	appraisi ric rating	ng an employee, detern The Comments Sect	mine the	e nerforma	nce level fo
performance ratings. As requir					raisal.		
0 - Outstanding (5), Darfarman		ERFORMA			1 1 (0)	<b>5</b> . 6	
O = Outstanding (5): Performan recognized as being far sur		n an areas		I = Improvement Nee deficient in certain a	- •		
E = Exceeds Expectations (4): R position requirements. Perfor on a consistent basis.			hieved	U = Unsatisfactory (1)	: Result	ts are gener	ally
M = Meets Expectations (3): Con of performance. Meets performance.	<del>-</del>				. <u> </u>		
PERFORMANCE FA	CTORS (Eigh	ıt Performa	nce Fact	ors are to be evalua	ted)		
<ol> <li>Job Knowledge: The p         the duties outlined on th         RATING</li> </ol>	ractical/technical ne job description.	skills and inf	ormation	used on the job. The do	emonstr	rated ability	to execute
0 🗆	Ε□	м 🛛	ı 🗆	U 🗆	3	_ Points	
COMMENTS: Sgt. Styles needs	s to become more f	amiliar with th	e elements	s of crimes as outlined in	the Ohi	io Revised C	lode.
			·				
<ol> <li>Dependability: The ext agency regulations.</li> <li>RATING</li> </ol>	ent to which an er	mployee follo	ws attend	ance standards, safety a	and con	duct rules,	and all
	E 🖾	м 🗆	Ι□	U 🗆	4_	_ Points	
COMMENTS: Prior to an off-du	ity injury on 11-20-	-00, Sgt. Styles	used 3 sid	ck days. He adheres to a	ll Depar	tmental and	Agency
Rules and Regulations.							

	Quality: The accuracy, thoroughness and acceptability of work performed.  RATING							
	0 🗆	E 🔲	м 🛛	I 🔲	ບ 🗖	3 Points		
Ю	MMENTS: The work s	sgt. Styles turns in	meets all of the	e standards estab	lished by the Dep	artment.		
						<del> </del>		
	Productivity: The established goals. RATING	quality and efficion	ency of work co	mpleted in a spe	cified period of t	ime, e.g. meeting/exceedi		
	0 🗆	E 🗌	MØ	1 🔲	υ 🔲	3 Points		
O	MMENTS: Submits all	work in a timely	manner.	<del> </del>				
_								
	Initiative: The exte and knowledge, and RATING				out new assignm	ents, expands his or her s		
	o 🗆	E 🗌	м 🛛	I 🗆	U 🗆	3 Points		
	IMENTS: Handles all re efficient and producti		n to him. Has no	ot submitted any	requests for adva	nced training to make him		
	Demonstrates the ab		-			ner, both written and ver		
		ility to understand	-	erbal and/or writ		_		
	Demonstrates the ab RATING O	ility to understand	M 🛚	erbal and/or writ	ten instructions. U □	_		
	Demonstrates the ab RATING O  MENTS: Communicat	E   tes effectively both  ionships: The wil	M 🔀 h verbally and v	I   /ritten. He can formonstrated abilit	ten instructions.  U	2 Points that are given to him eith		
	Demonstrates the ab RATING O  IMENTS: Communicating, or verbally.  Interpersonal Relationment of the communicate with communi	E   tes effectively both  ionships: The wil	M 🔀 h verbally and v	I   /ritten. He can formonstrated abilit	ten instructions.  U	2 Points that are given to him eith		
wri	Demonstrates the ab RATING O  [MENTS: Communicating, or verbally.  Interpersonal Relation communicate with control RATING	E   tes effectively both  ionships: The will  -workers, superv	M M Industrial ways and was a subordinary of the su	I   /ritten. He can formonstrated abilities and/or outside	bllow instructions.  U   bllow instructions  y to cooperate, we contacts.	2 Points that are given to him eith		
wri	Demonstrates the ab RATING O IMENTS: Communicating, or verbally.  Interpersonal Relationment with control RATING O	E   tes effectively both  ionships: The will  -workers, superv	M M Industrial ways and was a subordinary of the su	I   /ritten. He can formonstrated abilities and/or outside	bllow instructions.  U   bllow instructions  y to cooperate, we contacts.	2 Points that are given to him eith		
wri	Demonstrates the ab RATING O  IMENTS: Communicate iting, or verbally.  Interpersonal Relate communicate with constraint in the constraint of the constraint in the constraint	E   tes effectively both  ionships: The will  beworkers, supervite  E   n any situation he  extent of work per	M M In the second with liter of the second wit	ritten. He can formonstrated abilities and/or outside I  n any shift.	ten instructions.  U   billow instructions  ty to cooperate, we contacts.  U	2 Points that are given to him eith		
wri	Demonstrates the ab RATING O  IMENTS: Communicate iting, or verbally.  Interpersonal Relate communicate with constraint and the constraint an	E   tes effectively both  ionships: The will  beworkers, supervite  E   n any situation he  extent of work per	M M In the second with liter of the second wit	ritten. He can formonstrated abilities and/or outside I  n any shift.	ten instructions.  U   billow instructions  ty to cooperate, we contacts.  U	2 Points  that are given to him eith  vork and effectively  3 Points		
)M	Demonstrates the ab RATING O  IMENTS: Communicate iting, or verbally.  Interpersonal Relation communicate with construing the	E   tes effectively both  ionships: The will  reworkers, supervie  E   n any situation he  extent of work per ke ownership of the	d and execute very market with their own job du	ritten. He can formonstrated abilities and/or outside and shift.  I an any shift.  I an any shift.	ten instructions.  U	2 Points  2 that are given to him either and effectively  3 Points  2 emonstrates an ability to		

#### Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1							
	RATING O □	Е 🗆	Μ⊠	Ι□	υ□	3 Points	
COMMENT			es his subordinate		expects from them.		
Objective #2:	•		<del></del>				
Objective #2.	RATING O	E 🖾	М 🔲	I 🗆	υ□	4_Points	
	S: Makes sure to Platoon needs, is		oordinates are han	dling the duties a	ssigned to them. He	confers with me to insu	ire that
Objective #3:					-		
	RATING O □	Е 🗆	M 🛮	I 🗖	υ□	3 Points	
	S: Handles all In				sperience handling o	lifferent tpes of Investiga	ations,
Objective #4:							
	RATING O □	Е 🗆	M 🖾	I 🗆	υ□	3 Points	
	: Maintains con nd Agency, Rule		ns.		insures that the Off	icers are in compliance	with
Objective #5:							
	RATING O □	E□	М	Ι□	υ□	3 Points	
COMMENTS:	Completes all	required reports	and assists his su	bordinates in prop	perly completing the	irs.	
Objective #6:		<u> </u>				<del></del>	
	RATING O □	E 🗆	м 🖾	I 🗆	υ□	3 Points	
	Insures that all les and Regulati		operly cared and	accounted for. M	aintains all Certifica	tions in compliance with	1
		<u> </u>					

#### Overall Performance

Rate employee's overall performance:	
Total Points $\underline{44}$ = $\underline{3.14}$ (Overall Rating)	
	ment Needed (1.5 - 2.4) actory (O - 1.4)
Specific areas of improvement needed: Sgt. Styles needs to work on the struct	ure and content of his Investigations, which is due
his lack of experience in this area. Also needs to improve his knowledge of the	Ohio Revised Code.
Specific goals for improvement: Become more knowledgeable of the Ohio Re	vised Code by reviewing individual crimes and the
elements.	
Training needed to accomplish goals: None.	
Additional comments. Sat Styles is progressing well as a Sergeont. He needs to	a work on a couple of same but is a same at the
Additional comments: Sgt. Styles is progressing well as a Sergeant. He needs to Department, and myself, as his immediate Supervisor.	o work on a couple of areas, but is an asset to the
Department, and mysen, as his immediate supervisor.	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
ACKNOWLEDGMENT:	
Please acknowledge that this performance appraisal has been reviewed with you by eview in the spaces provided below.	y signing your name and recording the date of this
Also. indicate whether you intend to submit a written statement or comments. A st 0 days after completion of the evaluation.	atement or comments must be submitted within
Vritten Statement/Comments:Yes XXX No	
imployee Signature: × Roul A Style 656	Date: 03 / 29 / 01
eviewing Supervisor Signature	Date: 03 / 29 / 01
Pepartment Director Signature:	Date: 3/29/0/



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL.

	TIDENTIAL	
Nar	ne: PAUL STYLES \$656	Department/Area: Police Division
Pos	ition: Police Sergeant	Report Year: 2000
you this dem total	r position description, you will be responsible for a report year. Please note that your annual performstrated toward accomplishment and actual obtains	/or area goals established for the above report year and complishing specific objectives/expectations during ormance appraisal will be based upon the progress nment of the objectives/expectations defined below (as required, additional pages may be attached to this
1:	area. Conducts roll calls, inspects appearance	olice officers and non-sworn officers in an assigned and equipment of subordinates. Relays and tructions, teletypes, special notices and directives.
2:	Ensures that police presence is visible within a crime. Confers with superior officers regarding performance and complaints.	assigned CMHA area to serve as a deterrent to ag patrol problems, crime conditions, personnel
<b>3:</b>	Conducts investigations of crimes, accidents a investigations conducted by subordinates. Con and injuries to police officers, the use of firear Recommends disciplinary action where necess	nducts special investigations including accidents ms and complaints about police personnel
4:	Supervises subordinate staff engaged in patrol Maintains ongoing radio contact according to assignments when required.	and other activities and assists where necessary. established procedures, responding to radio
5:	Supervises the completion of all written crime forms describing circumstances of crimes, accidities including, but not limited to, brevities required reports.	reports and completes other required reports and idents, investigations, complaints and other polices, daily rosters, leave requests and any other
6:	Serves as Officer in Charge (OIC) of headquare CMHA property and department equipment. Coertifications that are required for this position.	ters as needed. Observes, inspects and maintains Obtains and maintains firearms and other
_		SC Date: 03 / 14/2000.
Imme	diate Supervisor Signature: Nathacultura	Date 03 114 100
Depart	tment Director Signature:	Exen, chy Date: 3 117 108.



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Nama	Doubl Styles	Domontos and August Daling District				
	: Paul J. Styles	Department/Area: Police Division				
Positi	on: Police Sergeant	Report Year: 2001				
your p this re demor	position description, you will be responsible for a eport year. Please note that your annual perfo instrated toward accomplishment and actual obtain of six [6] objectives/expectations is required). A	or area goals established for the above report year and ccomplishing specific objectives/expectations during rmance appraisal will be based upon the progress ament of the objectives/expectations defined below (a s required, additional pages may be attached to this				
J-	area. Conducts roll calls, inspects appearance	olice officers and non-sworn officers in an assigned and equipment of subordinates. Relays and tructions, teletypes, special notices and directives.				
2-	Ensures that police presence is visible within assigned CMHA area to serve as a deterrent to crime. Confers with superior officers regarding patrol problems, crime conditions, personnel performance and complaints.					
3-	Conducts investigations of crimes, accidents and civil disturbances. Supports preliminary investigations conducted by subordinates. Conducts special investigations including accidents and injuries to police officers, the use of firearms and complaints about police personnel. Recommends disciplinary action where necessary.					
4-	Supervises subordinate staff engaged in patrol Maintains ongoing radio contact according to assignments when required.	and other activities and assists where necessary. established procedures, responding to radio				
5-	Supervises the completion of all written crime forms describing circumstances of crimes, acc activities including, but not limited to, brevitie required reports.	reports and completes other required reports and idents, investigations, complaints and other police s, daily rosters, leave requests and any other				
6-	Serves as Officer in Charge (OIC) of headquare CMHA property and department equipment. Coertifications that are required for this position	ters as needed. Observes, inspects and maintains obtains and maintains firearms and other				
Employ	yee Signature: x Paul Stylas	656 Date: 03 / 29 / 01				
Immediate Supervisor Signature:   Date: 03 / 29 / 01						
Date: 03 / 29 / 01  Department Director Signature: Line Suckey, whis Date: 3 / 25 b/						

### FILE

RECEIVED IN THE OFFICE OF

JAN 1 2 1999

STARILEY C. M

#### C.M.H.A. P.D. PERFORMANCE RATING CHECKLIST

Paul Styles EMPLOYEE'S NAME BADGE

1 Jan 98 thru 31 Dec 98 RATING PERIOD Jack J. Justus, Sqt SUPERVISOR

A numerical value shall be placed in the space next to the item being evaluated as follows; 1-being the lowest, 10-being the highest, 6-being average with 5-just below and 7-just above.

QUALITY OF WORK

Accuracy Judgement Knowledge of Duties Thoroughness Ability to Learn Interest in Work Ability to Make Reports Proper Care of Equipment Compliance/Policy-Directives Court Cases/Preparation & Presentation QUANTITY OF WORK Production Organization of Time Industriousness Notice to Violator & Misd. Citations Issued Arrest Record DEPENDABILITY Reports for Work on Time Requires Little Supervision Follows Instructions	9 Accepts Responsibility 9 8 Cooperative 9 8 Attitude Toward Department 9 Goals & Objectives 9 9 Accepts/Acts on 9 Constructive Criticism 9 8 PERSONAL RELATIONSHIPS 9 Tactful 9 9 Courteous 9 Proper Appearance 9 Proper Uniform / Dress 9 FOR SUBORDINATE'S RATING OF 9 SUPERVISOR ONLY 8 Obtains Desired Work Results 9 From Subordinates Explains Well the Work to be 9 Done 9 9 Systematically Checks the Work of Subordinates Knowledge & Conformity to 8 Departmental Directives 9 9 Readily Accepts & Assumes Responsibility Including Disciplinary Action
SUMMARY COMMENTS	
PO Styles #25 was transferred	d and promoted towards the and as a

	responsibility including
	Disciplinary Action 9
SUMMARY COMMENTS	
PO Styles #25 was tra	neferred and numerical transitions
I was proud to have	nsferred and promoted towards the end of the year, him in the unit and proud to see one of my own
Promoter. He has the	ability to learn and further his career.

PAUL, PLEASE SIGN & Found

# FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER



Sir:					
Officer's Name	STYLES	PAUL		Badge:656	
	Last	First	M.I.	2	
Observation Peri	iod: from <u>12/</u>	12 to 12/	<u>25/</u> 98		
this period of trapped period of trapped period of trapped period	entary require aining. This LKNOWLED SAGE. Espector #65 styles #65 styles #65	d concernin should included, APPEA ially note ex 6 has a p e knowled 6 has the	g the probation ude but is not RANCE, JUDO straordinary per ositive atternments willingnes	nary officer's overall performance during limited to ATTITUDINAL FACTOR GEMENT, JOB RELATED SKILLS And a rformance and or noticeable deficiencient entities, accepts responsibility be a excellent supervisor.	RS, VD es.
REMEDIAL TR Include any reme respond to contin	dial training th	nat was give		note when a probationary officer does r	
		<i>ii</i> .			_
		<del></del>			
			Let'l		_
; •			Keslin FIE	Specifully;  Manual Language Told of the Communication of the Communicat	

# FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER



Sir:		100		76	
Officer's Name	Styles	Paul	A	Badge: 656	•
Officer 3 range	Last	First	M.I.	Badge:	
Observation Per	iod: from 12-	12-98 <sub>0</sub> 12-	25-98		
this period of to PROFESSIONA EQUIPMENT UThe time that attitude and He has shown	entary require raining. This LKNOWLED ISAGE. Espect t I had Sgt professions	ed concerning should inclu oGE, APPEAF cially note extended to styles un alism towards who was adapted to the concerning towards adapted to the concerning t	the probat de but is n RANCE, JU traordinary der my Su rd his ne	ionary officer's overall per ot limited to ATTITUDIN DGEMENT, JOB RELAT performance and or notice pervision he has shown asignment as being under pressure, also projects and carries	NAL FACTORS, ED SKILLS AND table deficiencies. on a postive a supervisior.
REMEDIAL TR Include any reme respond to contin	dial training t	hat was given		y note when a probationar	y officer does not
			F	espectfully;	
			存	IELD TRAINING/OFFIC	ER /

# FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER



Sir:			4		•
Officer's Nam	ne <i>Miléi</i> Last	PAIL First	<u>M.I.</u>	Badge:	;
Observation P	eriod: from 🎉	12:98 to 12:25	<u>-91</u>		5
Narrative com this period of PROFESSION	mentary requintraining. This IAL KNOWLE USAGE. Esp	s should includ DGE, APPEAR ecially note extr	the probational le but is not le ANCE, JUDG aordinary perface for the face of the second seco	ary officer's overall primited to ATTITUD EMENT, JOB RELA Formance and or notice FORENIAL HAY ARAM E HAY THET WUNKE	INAL FACTORS, TED SKILLS AND ceable deficiencies.
	medial training	-		ote when a probation	ary officer does not
			Res <sub>I</sub>	pectfully;  Altrichwie # 6 D TRAINING OFF	<i>'40</i> ICER

# FIELD TRAINING OFFICER WEEKLY OBSERVATION REPORT FOR PROBATIONARY OFFICER



Sir:					
Officer's Name	Styles	Paul		Badge:_	656
	Last	First	M.I.	<u>-</u>	<del></del>
Observation Per	od: from _	12/15 to	23		
this period of transport of the PROFESSIONAL	entary requiaining. Th	red concerning is should includ EDGE, APPEAR	the probation le but is not ANCE, JUDO	limited to A SEMENT, JC	overall performance during TTITUDINAL FACTORS B RELATED SKILLS ANI d or noticeable deficiencies
Seargeant	Styles h	as shown a po	sitive att	itute for	learning,
he is very	interest	ed in learnin	ng the pape	rwork and	assignments.
He follows	instruct	ions, and kno	ows his law	s. His app	erance is
1023 1,000	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		proper una		.OINS
REMEDIAL TR Include any reme respond to contin	dial training	that was given.		ote when a p	probationary officer does no
		<i>H</i> 3		<del></del>	2
<del></del>	<u> </u>		<del></del>		
) (					
• **			Res	pectfully;	
\$			XI FIE	Siennia LD TRAINII	# <i>644</i> NG OFFICER

### 

JAN 1 2 1999

CEIVED IN THE OFFICE OF

CMHA

C.M.H.A. P.D. PERFORMANCE RATING CHECKLIST

HECKLIST STANDA

Paul Styles EMPLOYEE'S NAME

\_\_\_\_25 / BADGE

1 Jan 98 thru 31 Dec 98 RATING PERIOD

Jack J. Justus, Sgt. SUPERVISOR

A numerical value shall be placed in the space next to the item being evaluated as follows; 1-being the lowest, 10-being the highest, QUALITY OF WORK

	9 Accepts Responsibility 9 8 Cooperative 9 Attitude Toward Department 9 Goals & Objectives 9 Accepts/Acts on 9 Accepts/Acts on 9 Constructive Criticism 9 PERSONAL RELATIONSHIPS 9 Tactful 9 Courteous 9 Proper Appearance 9 Proper Uniform / Dress 9 FOR SUBORDINATE'S RATING OF SUPERVISOR ONLY 8 Obtains Desired Work Results 9 From Subordinates 8 Explains Well the Work to be Done 9 Systematically Checks the Work of Subordinates 9 Knowledge & Conformity to 9 Readily Accepts & Assumes Responsibility Including Disciplinary Action 9 I and promoted towards the end of the year. the unit and proud to see one of my own to learn and further his career.
SGT. Paul 1. Style 2 6.	56
OFFICER'SIGNATURE	SPERVISOR SIGNATURE
,	

PAUL PLENSE SIGN & Forward

### C.M.H.A.P.D.PERFORMANCE RATING CHECKLIST

Paul Styles Police Officer : EMPLOYEE'S NAME / B		<del></del>	HOUSING
	ADGE	÷ 1	POLICE
<del></del>	urton S		
RATING PERIOD / S	UPERVI	SOR	
A numerical value shall be pl	laced :	in the space next t	o the item
being evaluated as follows;	1-bei	ng the lowest, 10-	-being the
highest, 6-being average with	5-just	t below and 7-just a	bove.
QUALITY OF WORK			
Accuracy	フ	Accepts Responsibil	ity &
Judgement	<u>-8</u>	Cooperative	10 g
Knowledge of Duties	_8_	Attitude Toward Dep	artment
Thoroughness	-8	Goals & Objectives	_8_
Ability to Learn	-8	Accepts/Acts on	
Interest in Work Ability to Make Reports	- 8	Constructive Critic	
Proper Care of Equipment	-8	PERSONAL RELATIONSH Tactful	IPS
Compliance/Policy-Directives	<del>- ×</del>	Courteous	<u> </u>
Court Cases/Preparation		Proper Appearance	- <del>8</del> -
& Presentation	6	Proper Uniform / Dr	ess <del>8</del>
QUANTITY OF WORK		FOR SUBORDINATE'S R	
Production	<del></del>	SUPERVISOR ONLY	
Organization of Time	-7_	Obtains Desired Wor	k Results
Industriousness	_7	From Subordinates	_\$
Notice to Violator & Misd. Citations Issued	-7	Explains Well the W	ork to be
Arrest Record		Done Systematically Check	Y
DEPENDABILITY	N. <u>-0</u>	Work of Subordinates	ks the
Reports for Work on Time	8	Knowledge & Conform	- <u>·</u>
Requires Little Supervision	8	Departmental Direct	
Follows Instructions		Readily Accepts & A	
		Responsibility Incl	
SUMMARY COMMENTS		Disciplinary Action	
ABIE TO -	7 A 1-2	RESPUNSIBILITY AM	. edes mes
SAME ALSO MEET VERY Lit	TIE S	MERCHUL A PLANT	A V NESTE
WIFELL IN UNIFILM.	<u> </u>	2,0,000	1 100
	····		
OFFICER SIGNATURE		011777777	07007
/./		SUPERVISOR	SIGNATURE
Jane A. Styles		( Tal -1)	1
		1	1
		/	1 11
rev 6/95			

#### **CMHA**

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

Inter-Office Memorandum TYPE:

TO: Stanley C. Murrey

Patrol Commander

FROM: Ronald J. Morenz

Lieutenant- Third Platoon Watch Commander

DATE: January 14, 1999

SUBJECT: Secondary Employment Request dated 2-4-97

Sir:

Please review a copy of the information that I submitted for Secondary Employment on 2-4-97. As of this date I do not have a response from your Office, nor is it listed on the memo you put out ref: Secondary Employment Records. Please process the attached, the employer information is all the same.

Respectfully Submitted,

Yall Jonald Morenz, Lieutenant

Dee attached copy of what I sent

To De attached copy of what I sent

to De ables on 04 FEB 97.

To De ables on 04 FEB 97.

The negwid information

Contained in 6:1.3 of I can forward

Rubs of Regulations to I can forward

The request.

Starts Co Thurs

SIR AT THE TIME THIS WAS SUBMITTED IT WAS IN COMPLIANCE WITH THE DEPARTMENTS RIVES AND REGULATIONS THONAN FORCE. DO YOU STILL NEED IT UPDATED BUEN THOUGH I WAS IN COMPLIANCE? 3x 17 626

#### C.M.H.A.P.D. PE ORMANCE RATING CHEC PAUL A. Styles # 656 EMPLOYEE'S NAME BADGE# 1-9-99 The 1-22-99 **RATING PERIOD** / SUPERVISOR A numerical value shall be placed in the space next to the item being evaluated as follows; 1-being the lowest, 10-being the highest, 6-being average with 5-just below and 7-just above. QUALITY OF WORK Accuracy 7 Accepts Responsibility Judgement \_ Cooperative Attitude Toward Department Knowledge of Duties Thoroughness Goals & Objectives Ability to Learn Accepts/Acts on Interest in Work Constructive Criticism Ability to Make Reports B PERSONAL RELATIONSHIPS Proper Care of Equipment 8 Tactful Compliance/Policy-Directives Courteous Court Cases/Preparation Proper Appearance & Presentation Proper Uniform / Dress QUANTITY OF WORK FOR RATING OF 7 Production SUPERVISOR ONLY Organization of Time Obtains Desired Work Results Industriousness From Subordinates Notice to Violator & Misd. Explains Well the Work to HIA Citations Issued be done Arrest Record Systematically Checks the DEPENDABILITY work of Subordinates Reports for Work on Time Knowledge & Conformity to Requires Little Supervision Departmental Directives Follows Instructions Readily Accepts & Assumes Responsibility Including Disciplinary Action SUMMARY COMMENTS Set Pari Styles #654 was assigned to Frest Platon For a 2 were Perios of THEN 1-2249 FOR ORIENTOFIEN at FISHO SUPERVISOR. He HAS A Knowledge At FAR AS mothing decisions on the go at the two weeks were directed toward the I the YEARING was on Union at Field Ropiets, Officer Doly Reports Time Credy a Preparation For Propelli Sit Styla Hm Great royalid A FURERITOR, However the Fret that He HAR Just born Newwest at the Job Ne Wed to Slow Hown And

gime Administration

decision maximus

OFFICER SIGNATURE rev 12/98

SUPERVISOR SIGNATURE

## WEEKLY OBSERVATION REPORT FOR PROBATIONARY SUPERVISOR



Sir:

Supervisor' Name_	Styles	, Paul First	A.I.	Badge: Les le	~
Observation Period:	from 1-9-9	9 to 1-6	12.99		
PROFESSIONAL F AND EQUIPMENT deficiencies.	Ty required cong. This shown the control of the con	encerning the puld include but E, APPEARAL Especially not be a local edge of a	orobationary at is not limi NCE, JUDG e extraordin	ND COMMENTS: officer's overall performed to ATTITUDINA EMENT, JOB RELA ary performance and Counsed the Journel the Journel the Journel the Journel the Journel the Journel on the	L FACTORS, TED SKILLS or noticeable
REMEDIAL TRAIN Include any remedial not respond to conting the state of the state o	training that would remedial t	vas given. Esperaining Remaded to	ecially note w	vhen a probationary st س المحترون على الم	spervisor does
	-4-1-1		×		
		Reen	ectfully		

WATCH COMMANDER/UNIT OIC

rev 12/98



#### CMHA **CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION**

TYPE:

**Inter-Office Correspondence** 

TO:

Stanley Murrey, Patrol Commander

FROM:

James E. Tufts, Lieutenant, First Platoon

DATE

24 January 99

SUBJECT: Performance Rating /Sgt Paul A. Styles #656

Sir:

I am respectfully requesting an extension for the performance evaluation for Sgt Paul A. Styles until Tuesday 26 January 99.

James E. Tufts, Lt

## CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

E.	MPLOYEE NAME: Paul Styles 656
S	UPERVISOR: Thomas Imes, Lieutenant
D.	ATE COMPLETED: 0113/04
X	1. Employee "self-evaluation"
Ø	2. Previous year Objectives/Expectations Worksheet.
×	3. Copy of Employee Attendance Record for previous year
×	4. Current Performance Appraisal
X	5. Current year Objectives/Expectations Worksheet
	6. Employee comments and/or written statement regarding Performance Appraisal.
×	7. Career Counseling Form

### **SELF APPRAISAL**



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

#### CONFIDENTIAL

Name: Paul Styles	Position: Sergeant
Department/Area: Police	Last Appraisal Date: 01 / 01 / 02
Type: XX AnnualMid ProbationOther  Evaluation Period: From _01 / _01 / _02 _ To _12 / _3  Instructions: Five (5) Performance Levels and associated ratings I definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric r  Performance Factors and Employee Objectives/Expectations. As Performance Appraisal.	nave been established for Performance Factors. A general ing an employee, determine the performance level for "each" rating. The COMMENTS: section must be completed for all required, additional pages may be attached to this
PERFORMANO	LE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

#### **SELF APPRAISAL**

### 

		S□	Ι	υ□	4 Points
COMMENTS:					
	<del></del>	<u> </u>			
Dependability: The exagency regulations. RATING	ctent to which a	n employee follo	ws attendance s	tandards, safety a	and conduct rules, and
0⊠	E□	S□	Ι□	υ□	5 Points
COMMENTS:					
Quality: The accurac	y, thoroughness	and acceptabilit	y of work perfor	med.	
RATING O□	E	s□	Ι□	U 🗖	4 Points
COMMENTS:					Q
	······································				
established goals.	, oo	of or work confi	noted in a specif	ca period or uni	e, e.g. meeting/exceeding
RATING 0□	EØ	s□	ΙO	υ□	4 Points
RATING 0□					4_ Points
RATING  O  COMMENTS:  Initiative: The extent and knowledge, and	to which an en	aployee is a " sel	f starter", seeks o		
RATING  O  COMMENTS:  Initiative: The extent	to which an en	aployee is a " sel	f starter", seeks o		
RATING O  COMMENTS:  Initiative: The extent and knowledge, and RATING O  COMMENTS:	to which an em suggests better v	aployee is a " seliways of accompli	f starter", seeks on shing the job.	out new assignme	ents, expands his or her
RATING  O  COMMENTS:  Initiative: The extent and knowledge, and RATING  O  COMMENTS:	to which an en suggests better v	nployee is a " sel ways of accompli S□	f starter", seeks on shing the job.	out new assignment of the second of the seco	ents, expands his or her  4 Points
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RATING  O  COMMENTS:  Initiative: The extent and knowledge, and RATING  O  COMMENTS:  COMMENTS:	to which an em suggests better v	aployee is a " seliways of accomplises S   saling the selicity to complise ability ability to complise ability ability to complise ability	f starter", seeks of shing the job.  I	ut new assignment of the state	ents, expands his or her  4 Points  er, both written and v

Original: Human Resources

## SELF APPRAISAL

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COMMENTS:					
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dependence: The	extent of worl	c performed w	ith little or no	direction/super	vision. Demonstra
ndependence: The oblity to make dec					vision. Demonstra
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bility to make de					vision. Demonstra

Original: Human Resources

### Employee Objectives/Expectations

### **SELF APPRAISAL**

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1:						
	RATING O□	E⊠	s□	Ι□	V□	4 Points
	COMMENTS:					
Objective #2:				<u> </u>		
objective was	RATING	E	S□	Ι□	υ□	4 Points
	COMMENTS:					
Objective #3:_						
	<b>RATING</b>	E 🔀	s□	Ι□	U□	4 Points
	COMMENTS:		222222			
Objective #4:_	·					
	RATING O□	E 🖾	s□	Ι□	υ□	4 Points
	COMMENTS:					
Objective #5:_					· · · · · · · · · · · · · · · · · · ·	
	RATING	E⊠	s□	10	υ□	4 Points
	COMMENTS:					
Objective #6:_	<del></del>					
_	RATING 0□	E⊠	s□	I 🗆	U	4 Points
	COMMENTS:					

Original: Human Resources

#### Overall Performance

Rate employee's overall performance: -14 = 4.0 (Overall Rating: Round rating to one (1) decimal place) Total Points 56  $\square$  Outstanding (4.5 - 5.0) ☐ Improvement Needed (1.5 - 2.4) Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory (O - 1.4) ☐ Successful (2.5 - 3.4) Specific areas of improvement needed: Specific goals for improvement: Training needed to accomplish goals: Additional comments: ACKNOWLEDGMENT: Please acknowledge that this performance appraisal has been reviewed with you by signing your name and recording the date of this review. Signing does not indicate agreement with your performance appraisal. Also indicate whether you intend to submit a written statement or comments in the space provided below. Your statement or comments must be submitted to the Director of Human Resources within ten (10) days after completion of your performance appraisal review. Written Statement/Comments: Yes No 🗵 Employee Signature:

Original: Human Resources

Reviewing Supervisor Signature:

Department Director Signature:



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

COM			
Name:	Paul Styles #656	Department/A	rea: Police Division
Positio	on: Police Sergeant	Report Year: 2	2003
your po this rep	ctions: Based upon a review of department and osition description, you will be responsible for port year. Please note that your annual perfective toward accomplishment and actual obtains is [6] objectives/expectations is required).	accomplishing spectormance appraisale inment of the object	cific objectives/expectations during will be based upon the progress tives/expectations defined below (a
i.	Supervises and coordinates the activities of parea. Conducts roll calls, inspects appearance explains general and special police orders, in	ce and equipment o	of subordinates. Relays and
2-	Ensures that police presence is visible within crime. Confers with superior officers regard performance and complaints.	n assigned CMHA a ling patrol problem	area to serve as a deterrent to s, crime conditions, personnel
3-	Conducts investigations of crimes, accidents investigations conducted by subordinates. C and injuries to police officers, the use of fire Recommends disciplinary action where necessity	conducts special inverse and complain	vestigations including accidents
4-	Supervises subordinate staff engaged in patr Maintains ongoing radio contact according t assignments when required.	ol and other activit to established proce	ies and assists where necessary. cdures, responding to radio
5-	Supervises the completion of all written crit forms describing circumstances of crimes, a activities including, but not limited to, brevi required reports.	ccidents, investigat	tions, complaints and other police
6-	Serves as Officer in Charge (OIC) of headq CMHA property and department equipment certifications that are required for this position	t. Obtains and mair	Observes, inspects and maintains tains firearms and other
Emplo	oyee Signature: fun Sty	As 656	Date: 03 / 20 / 03
Imme	diate Supervisor Signature: 20 July	ng Cal	Date: 03 / 20 / 03
Depar	rtment Director Signature:	Gon, chief	Date: <u>'3 /3/ 103</u>

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## CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

#### CONFIDENTIAL

Name: Paul Styles 656	Position: Sergeant
Department/Area: Police Department/Third Platoon	Last Appraisal Date: 03 / 03 / 03
Type: X AnnualMid ProbationOther  Evaluation Period: From _01 / _01 / _03 _To _12 /  Instructions: Five (5) Performance Levels and associated rating definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectatio Performance Appraisal.	is have been established for Performance Factors. A general sing an employee, determine the performance level for "each". The COMMENTS: section must be completed for all ons. As required, additional pages may be attached to this
PERFORMANO	CE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

the duties outlined RATING	The practical/tech on the job descri	nnical skills and i ption.	nformation used	on the job. The d	emonstrated ability to e
0 🗆	$\mathbf{E}leftimes$	$s\square$	Ι□	U□	4 Points
COMMENTS: E reports are required	xceeds expectation l and completes the	ns in his ability to em with little supe	execute his duties. rvision.	He has the know	ledge and skills of knowin
Dependability: The agency regulations RATING	ne extent to which	an employee fo	llows attendance	standards, safety	and conduct rules, and a
0	E	$\mathbf{S}oxtimes$	Ι□	υ□	3 Points
COMMENTS: H	e is satisfactorily	in attendance and	in following Rules	and Regulations	of the Agency.
Quality: The accu	racy, thoroughnes	ss and acceptabili	ty of work perfor	med.	
0□	E⊠	$s\square$	I	υ□	4 Points
attendance records u	up to date for all th	e Protection Offic	ers he supervises.	work performed	. The keeps art his reports
attendance records t	up to date for all th	e Protection Offic	ers he supervises.		ne, e.g. meeting/exceeding
Productivity: The established goals.	up to date for all th	e Protection Offic	ers he supervises.		
Productivity: The established goals.  RATING  0	quality and effici	ency of work cor	ers he supervises.  npleted in a speci  I  ivity. He supervis	fied period of tin  U  ses over 30 Protect	ne, e.g. meeting/exceeding.  4 Points  ion Officers, collecting D
Productivity: The established goals.  RATING  O  COMMENTS: He Reports, Leave Required and knowledge, and	quality and effici	ency of work cor  S  ions in his product orts. He also assis	npleted in a speci I  ivity. He supervises with the superv	fied period of tim  U  ses over 30 Protect ision of Third Plat	ne, e.g. meeting/exceeding.  4 Points  ion Officers, collecting D
Productivity: The established goals. RATING O COMMENTS: He Reports, Leave Requirements.	quality and effici	ency of work cor  S  ions in his product orts. He also assis	npleted in a speci I  ivity. He supervises with the superv	fied period of tim  U  ses over 30 Protect ision of Third Plat	ne, e.g. meeting/exceeding  4 Points  ion Officers, collecting Doon Officers.
Productivity: The established goals.  RATING  O  COMMENTS: He Reports, Leave Requirements of the external knowledge, and RATING  O  COMMENTS: External comments of the external knowledge of the externa	quality and effici	ency of work cor  S  ions in his product orts. He also assis  mployee is a " sel ways of accompli  S  s as a self starter a ries to find ways to	ivity. He supervises sts with the supervises shing the job.	fied period of tim  U  es over 30 Protect ision of Third Plat  out new assignments.	4 Points  ion Officers, collecting Doon Officers.
Productivity: The established goals.  RATING  O  COMMENTS: He Reports, Leave Requested the communications of t	quality and effici	ency of work cor  S  ions in his product orts. He also assis  mployee is a " sel ways of accompli  S  s as a self starter a ries to find ways to nediately initiates  the ability to co	ivity. He supervises sts with the supervises shing the job.  I   nd in seeking out robbetter accomplishem.	fied period of tim  U  ses over 30 Protect ision of Third Plat  out new assignment  U  new assignments. In his duties. Any in  neffective man	
Productivity: The established goals.  RATING  O  COMMENTS: He Reports, Leave Requestion of things that she or when discipline is the communications of the	quality and effici	ency of work cor  S  ions in his product orts. He also assis  mployee is a " sel ways of accompli  S  s as a self starter a ries to find ways to nediately initiates  the ability to co	ivity. He supervises sts with the supervises shing the job.  I   nd in seeking out robbetter accomplishem.	fied period of tim  U  ses over 30 Protect ision of Third Plat  out new assignment  U  new assignments. In his duties. Any in  neffective man	

Original: Human Resources

RATING	unicate with co	o-workers, supe	rvisors, subord	linates and/or o	ooperate, work and utside contacts.
0 □	E 🖾	S 🗆	$\mathbf{I} \square$	U 🗀	4 Points
COMMENTS: He liked and respected b				work with others.	He gets along well and is v
incu and respected b	y ilis subordiliaic	s and co-workers.		·	<del></del>
I. J	1				
Independence: T	he extent of we	ork performed v	with little or no	o direction/supe	ervision. Demonstrates
Independence: T ability to make de RATING	he extent of we	ork performed ve se ownership of	with little or no their own job	o direction/supe duties.	ervision. Demonstrates
ability to make de	he extent of we cisions and tak	ork performed vice ownership of	with little or no their own job	o direction/supe duties.	ervision. Demonstrates  5 Points
ability to make de RATING 0⊠	cisions and tak	se ownership of	their own job	duties. U□	5 Points
ability to make de RATING	exceeds expectati	se ownership of  S   ions in his ability t	their own job  I  o perform his dut	duties.  U  ies with little supe	

Original: Human Resources

#### Employee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #18			activities of police	officers and non-	sworn officers in a	n assigned area
	RATING O□	EX	s□	Ι□	U	4 Points
						their activity. He keeps close
	watch on P	rotection Officers	calls and monitor	s their movements	as they do their sa	fety checks.
Objective #2: E		olice presence is v	isible within CMI	IA areas to serve a	as a deterrent to cri	me.
	RATING O□	EП	S⊠	Ι□	ט 🗆	3 Points
		_			-	<del></del>
	COMME	NTS: Is satisfacto	ory in making sure	that police presen	ce visible. He mal	kes sure that safety checks are
	their post.	otection Officers	at various interval	s and they are not	making too many s	safety checks and not being at
		-				
Objective #3:		ninary investigation	s of crimes, acciden	ts and civil disturbar	ices., as well as reco	mmending disciplinary action.
	RATING O□	E 🗆	S⊠	Ι□	U□	3 Points
	~~~	_				<del></del>
	COMME	Meets expe	ctations as a self s	tarter and in imitat	ting investigations	and conducting preliminary
	investigatio	ils. He does not i	lesnate to recomm	end disciplinary a	ction as a result of	his investigative findings.
					-	
Objective #4:S	upervises subc	ordinate staff engage	ed in patrol and othe	r activities, maintain	s radio contact and re	esponds when necessay.
	0□	E 🖾	s□	Ι□	U□	4 Points
	COMMEN	TS: Exceeds ex	pectations in moni	toring radio activi	ty and in respondin	g when needed. He constantly
	keeps track	of assignments ar	d dispositions and	takes the necessa	ry steps to assure p	proper reports are being made.
		<del> </del>				<del></del>
Objective #5: Si		completion of w	itten reports and o	ther required repo	rts, including daily	brevities and rosters.
	RATING O□	E⊠	S□	Ι□	U□	4 Points
	COMMEN	TS: He exceeds	expectations in his	s ability to collect	and file the necess	ary Duty Reports for over 30
	Protection C	Officers, as well as	maintaining cove	rage for vacations	, sick call offs and	other roster changes for
	training ect.	·	<u> </u>			
Objective #6: Se		OIC, observes an	d maintains CMH	A property, mainta	ains firearm qualifi	cation.
	RATING 0□	E□	S⊠	I 🗆	υ□	3 Points
		TS: Satisfactoril CMHA property.		m training and as	serving as OIC of I	Protection Officer and

Original: Human Resources

### Overall Performance

Rate employ	ee's overall perform	ance:		
Total	Points 51	14 = 3.6 (Over	all Rating: Round ra	ting to one (1) decimal place)
$\boxtimes$	Outstanding (4.5 - 5.6 Exceeds Expectations Successful (2.5 - 3.4)		☐ Improvement ☐ Unsatisfactory	Needed (1.5 - 2.4) v (0 - 1.4)
Specific areas	of improvement neede	d:		
Specific goals				
Training neede	ed to accomplish goals:			
He does an exc	nments: Sgt. Styles doe eptional job of maintain ts new assignments and	ing time cards, attendar	nce records and obtainin	ber of Protection Officers under his comman g the proper reports from his subordinates. H
ACKNOWLE	DGMENT:			
Please acknowle review. Signing	dge that this performance	e appraisal has been rev ement with your perfo	iewed with you by signin	g your name and recording the date of this
Also indicate wh must be submitte	nether you intend to submed to the Director of Hu	nit a written statement o man Resources within	r comments in the space ten (10) days after comp	provided below. Your statement or comments pletion of your performance appraisal review.
Written Stateme	nt/Comments: Yes 🔲	No 🖾		
Employee Signa	ature: <b>Naw</b>	Styles #6	56	Date: 13 15001 OC
Reviewing Supe	ervisor Signature:	Comer men	- Lit	Date: <u>0/1/3/04</u>
Department Dir	ector Signature	Dy helis	ou Chyf	Date: 1120104

Original: Human Resources Copy: Employe



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### **CONFIDENTIAL**

Name:	Paul Styles 656	Department/Area: Police Division
Positio	on: Police Sergeant	Report Year: 2004
your po this re- demon	osition description, you will be responsible for ac port year. Please note that your annual perfor strated toward accomplishment and actual obtain f six [6] objectives/expectations is required). As	r area goals established for the above report year and complishing specific objectives/expectations during mance appraisal will be based upon the progress ment of the objectives/expectations defined below (a required, additional pages may be attached to this
I-	area. Conducts roll calls, inspects appearance	ice officers and non-sworn officers in an assigned and equipment of subordinates. Relays and ructions, teletypes, special notices and directives.
2-	Ensures that police presence is visible within a crime. Confers with superior officers regarding performance and complaints.	ssigned CMHA area to serve as a deterrent to patrol problems, crime conditions, personnel
3-	Conducts investigations of crimes, accidents as investigations conducted by subordinates. Con and injuries to police officers, the use of firears Recommends disciplinary action where necessar	ducts special investigations including accidents as and complaints about police personnel.
4-	Supervises subordinate staff engaged in patrol and Maintains ongoing radio contact according to eassignments when required.	and other activities and assists where necessary. stablished procedures, responding to radio
5-	Supervises the completion of all written crime forms describing circumstances of crimes, accidactivities including, but not limited to, brevities required reports.	reports and completes other required reports and dents, investigations, complaints and other police, daily rosters, leave requests and any other
6-	Serves as Officer in Charge (OIC) of headquare CMHA property and department equipment. O certifications that are required for this position.	ers as needed. Observes, inspects and maintains otains and maintains firearms and other
Employ	vee Signature: Paul Style	Date: 13 / Jan oc/
Immedi	iate Supervisor Signature:	mes, 47 Date: 0/1/3/04
Departn	ment Director Signature: July Jack	Low Shirt Date: 10004

## CMHA POLICE DEPARTMENT CAREER COUNSELING

NAN	ME: Paul Styles		<b>DATE:</b> 05JAN04
CUI	RRENT ASSIGNME	NT: Third Platoon	
High Bach	cation: a School/GED XX nelors Degree torate	Associates Degree Masters Degree	
	ialized Training:	• Administrative Leadershin Sci	nool. Basic SWAT School, Mountain Bile
	ing, High Risk Raids and		basic SWAT School, Mountain Bite
1. Either	Professionally spe r a Unit OIC or Watch C		e to be five (5) years from now?
	· <del>·</del> · · · ·		
2. Retur	What are your pro		
3. Tuitio	How can CMHA as	ssist you in obtaining your	professional goals?
4. a) Le	If possible, what ty your current positi gal Updates	pe of training would you li	ke to attend that would be beneficial to
	POTA instructors train	ing	
	vanced Supervisor Train		
5.	In the past 12 mon		d with or seen posted in the Police clated training?
	YES XX	NO	
6.	Currently, do you that could affect yo	have any health issues, pers our attendance and/or job p	onal or work-related stress problems erformance? If YES, please explain.
	YES	NO <u>XX</u>	
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### CAREER COUNSELING (continued)

7.	Currently, are ther like CMHA to offer	e any work-related or personal str you assistance with. If YES, plea	ress problems that you would se explain.
	YES	NO <u>XX</u>	
B/7			
8.	CMHA, would you	onal or work-related stress related prefer going for assistance? Pleas p in the chain of command.	
9.	If needed, would yo personal stress prob	u talk to your immediate supervis lems?	or about work-related or
	YES XX	NO	
10.		u talk to a Licensed Family Couns or personal stress problems?	selor on retainer by CMHA
	YESXX	NO	
11.		ns, <u>approximately</u> how often have or discussions with your immedia	
	Never	Sometimes	Often <u>XX</u>
12.		ed by CMHA, have you ever been er No. 11 - Personnel Policies?	provided with a copy of
	YES XX	NO	
Empl	oyee Name and Badge		
Empl	oyee Signature:	Our Styles # 65	
Super	visor Signature:	Roman mu, 17	Date: <u></u>

## CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

E	MPLOYEE NAME: Paul Styles #656
S	UPERVISOR: Lt. Ronald J. Morenz #626
D	ATE COMPLETED: March 20, 2003
×	1. Employee "self-evaluation"
X	2. Previous year Objectives/Expectations Worksheet.
×	3. Copy of Employee Attendance Record for previous year
×	4. Current Performance Appraisal
×	5. Current year Objectives/Expectations Worksheet
	6. Employee comments and/or written statement regarding Performance Appraisal.
X	7. Career Counseling Form



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

CONFIDENTIAL	
Name: PAUL STYLES	Position: SERGEANT
Department/Area: Police	Last Appraisal Date: 01 / 01 / 02
Type: <u>X</u> AnnualMid ProbationOther	<del></del>
Evaluation Period: From o/ / c/ / c Z To 0/ / 3	1/102
Instructions: Five (5) Performance Levels and associated rating definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectatio Performance Appraisal.  PERFORMANCE	sing an employee, determine the performance level for "each". The COMMENTS: section must be completed for all ons. As required, additional pages may be attached to this
the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their colanned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.
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Original: Human Resources

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#### Job Knowledge: The practical/technical skills and information used on the job. The demonstrated ability to execute 1. the duties outlined on the job description. **RATING** $\mathbf{E}\square$ $o \square$ $S \boxtimes$ ΙΠ U **7** Points COMMENTS: 2. Dependability: The extent to which an employee follows attendance standards, safety and conduct rules, and all agency regulations. RATING $\mathbf{E} \boxtimes$ S□ 0 Ι□ U $\square$ 4 Points COMMENTS: 3. Quality: The accuracy, thoroughness and acceptability of work performed. RATING 0 🗆 $\mathbf{E}[K]$ $S\square$ $I\square$ U 4 Points Productivity: The quality and efficiency of work completed in a specified period of time, e.g. meeting/exceeding 4. established goals. **RATING** $0\square$ E SE I υ $\square$ 3 Points COMMENTS: \_\_\_\_\_ Initiative: The extent to which an employee is a " self starter", seeks out new assignments, expands his or her skills 5. and knowledge, and suggests better ways of accomplishing the job. **RATING** $0\square$ $\mathbf{E}[\mathbf{x}]$ $S\square$ $I\square$ U□ 4 Points COMMENTS: \_\_\_\_ Communications: Demonstrates the ability to communicate in an effective manner, both written and verbal. 6. Demonstrates the ability to understand and execute verbal and/or written instructions. RATING $0\square$ $\mathbf{E}\mathbf{X}$ $S \square$ $I\square$ $U\square$ 4 Points COMMENTS:

PERFORMANCE FACTOR Eight Performance Factors are to evaluated)

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RATING 0□	EZ	S□	$\mathbf{I} \square$	υ□	_4_ Points
COMMENTS: _		<del></del>			
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					rvision. Demonstr
Independence: Tability to make de RATING					rvision. Demonstr
ability to make de					rvision. Demonstr
ability to make de RATING	ecisions and tal	ce ownership of	their own job	duties.	

Original: Human Resources

Copy: Employee, Supervisor

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#### Employee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1:							
_	RATING 0□	ΕX	S□	Ι□	U 🗆	Points	51
	COMMENTS:	:					
Objective #2:_	RATING						
	0□	E□	SØ	Ι□	υ□	3 Points	1120
	COMMENTS:					<u> </u>	
Obi - 4i #1							
Objective #3:_	RATING				<del> </del>		
	0□	Ε□	SI	Ι□	U□	_3_Points	-
	COMMENTS:						<del></del>
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Objective #4:	RATING	· · · ·					
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	COMMENTS:			<del></del>	<del></del>	<del></del>	
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Objective #5:_	DATINO				·		(4044)
	RATING 0□	E	SI	Ι□	υ□	<b>3</b> Points	
	COMMENTS:						
Objective #6:					_		
	RATING O□	EK	S□	I 🗆	U 🗀	<u>cj</u> Points	vice.
	COMMENTS:			·-			
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#### **Overall Performance**

Rate employee's overall performance.		
Total Points 5/ 14 = 3.6 (Overal	l Rating: Round rating to one (1) decimal place	)
Outstanding (4.5 - 5.0) Exceeds Expectations (3.5 - 4.4) Successful (2.5 - 3.4)	☐ Improvement Needed (1.5 - 2.4) ☐ Unsatisfactory (O - 1.4)	
Specific areas of improvement needed:		
Specific goals for improvement:		
Training needed to accomplish goals:		
Additional comments:		o o
ACKNOWLEDGMENT:  Please acknowledge that this performance appraisal has been review review. Signing does not indicate agreement with your performance appraisal has been review.	wed with you by signing your name and recording the dat	te of this
Also indicate whether you intend to submit a written statement or comust be submitted to the Director of Human Resources within te Written Statement/Comments: Yes No	comments in the space provided below. Your statement on (10) days after completion of your performance apprai	or comments isal review.
Employee Signature: Simb Styles	Date: <u>03 120 1 03</u>	5 23 24
Department Director Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature: Little Signature:	Date: 3 /20 / 03  Date: 3 /3 / 103	48"
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Original: Human Resources



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### **CONFIDENTIAL**

Name:	Paul Styles	Department/Area: Police Division						
Position	on: Police Sergeant	Report Year: 2002						
your p this re demon	osition description, you will be responsible for acceport year. Please note that your annual perform strated toward accomplishment and actual obtains f six [6] objectives/expectations is required). As	area goals established for the above report year and complishing specific objectives/expectations during nance appraisal will be based upon the progress nent of the objectives/expectations defined below (a required, additional pages may be attached to this						
I-	area. Conducts roll calls, inspects appearance a	ce officers and non-sworn officers in an assigned nd equipment of subordinates. Relays and uctions, teletypes, special notices and directives.						
2-	Ensures that police presence is visible within as crime. Confers with superior officers regarding performance and complaints.	signed CMHA area to serve as a deterrent to patrol problems, crime conditions, personnel						
3-	Conducts investigations of crimes, accidents an investigations conducted by subordinates. Cond and injuries to police officers, the use of firearm Recommends disciplinary action where necessar	ucts special investigations including accidents and complaints about police personnel						
4-	Supervises subordinate staff engaged in patrol a Maintains ongoing radio contact according to es assignments when required.	nd other activities and assists where necessary. tablished procedures, responding to radio						
5-	Supervises the completion of all written crime reforms describing circumstances of crimes, accid activities including, but not limited to, brevities, required reports.	ents, investigations, complaints and other police						
6-	Serves as Officer in Charge (OIC) of headquarte CMHA property and department equipment. Obcertifications that are required for this position.	ers as needed. Observes, inspects and maintains tains and maintains firearms and other						
Employ	vee Signature: Jary A Str	Date: 02 / 19 / 02						
Immedi	iate Supervisor Signature:	Date: 02 / 19 / 02						
Danasts	ment Director Signature	10/2/2 22						

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### CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

CONFIDENTIAL	
Name: Paul Styles	Position: Sergeant
Department/Area: Police	Last Appraisal Date: 01 / 01 / 02
Type: XXX Annual Mid Probation Other	Current Date: 03 / 20 / 03
Evaluation Period: From 01 / 01 / 02 To 12 /	31 / 02
Instructions: Five (5) Performance Levels and associated rating definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectation Performance Appraisal.	sing an employee, determine the performance level for " each".  The COMMENTS: section must be completed for all
PERFORMANO	CE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.
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Original: Human Resources

Copy: Employee, Supervisor

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Job Knowledge: T the duties outlined RATING	he practical/tecl on the job descr	hnical skills and in iption.	nformation used	on the job. The d	emonstrated ability	to execu
0 □	E□	S⊠	Ι□	U□	3 Points	
COMMENTS: Sg	t. Styles possesse	s the knowledge ar	nd ability to execu	te his job duties as	outlined in his job o	lescription
If he has a question of He was assigned as	the OIC of the SI	VAT/TAC Units fr	or answer, he doe	esn't hesitate to che	eck with me on the c	orrect ac
TO Was assigned as	ine of e of the b	WATTAC OILLS II	oni rebidary diroc	ugii Julie.		94.7
Dependability: The agency regulations.	e extent to whic	h an employee fol	lows attendance	standards, safety	and conduct rules,	and all
RATING O□	E⊠	S□	Ι□	u□	4 Points	100
COMMENTS: Sg which resulted in no	t. Styles only mis t receiving any di	sed 3 days last yea sciplinary action d	r due to illness. H uring 2002.	le follows all Depa	artmental Rules and I	Regulati
			·			10.0
Quality: The accura	acy, thoroughne	ss and acceptabili	ty of work perfor	med.		N.
0□	E	$\mathbf{S}oldsymbol{oldsymbol{\boxtimes}}$	Ι□	U	3 Points	
to continue to work of	on improving the	investigations that	he submits. Each	successive investi	npietely filled out. F gation has been an it	nprove
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Productivity: The cestablished goals.  RATING O  COMMENTS: Sgt assignments that he notes that he notes and knowledge, and RATING O  COMMENTS: Dure completed it. He subfor us to handle our a communications: Demonstrates the stating o	E  Styles checks on may receive from to which an e suggests better  E  ring 2002 Sgt. Stymitted for the trassignments, he designments ability to under the suggests better to the trassignments.	siency of work com  Simple a number of office me. He accomplise mays of accomplise significant strength of the point of the point of the point of the ability to constand and executive significant strength of the significant strength of the ability to constand and executive significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength of the significant strength strength of the significant strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength strength s	ers each night at these everything that these everything that the starter", seeks of shing the job.  I    olice Executive Accepartment issuing opose it. He took mmunicate in and the verbal and/or the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of th	heir assigned build he is assigned on the is assigned on the unit of the contractive Lead on the responsibility of the contractive manner written instructive to the contractive manner written instructive to the contractive manner written instructive to the contractive manner written instructive to the contractive manner written instructive to the contractive manner written instructive to the contractive to th		her ski
Productivity: The cestablished goals.  RATING O  COMMENTS: Sgt assignments that he number of the external knowledge, and RATING O  COMMENTS: Dur completed it. He subfor us to handle our a Communications: Demonstrates the RATING	E  Styles checks of nay receive from to which an e suggests better  E  ring 2002 Sgt. Stymitted for the trassignments, he described by the control of the trassignments ability to under the control of the trassignments.	iency of work com  S  n a number of officeme. He accomplise  mployee is a " sel ways of accomplise  S  vles attended the Posining prior to the Discent hesitate to present and executed and executed selections.  S  nstrated that he can	ers each night at these everything that these everything that the severything the job.  I Delice Executive Accepartment issuing opose it. He took oppose it.	heir assigned build he is assigned on the responsibility or written instruction of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control o		her ski

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RATING $0 \square$	E⊠	s□	TΠ	U□	4 D. I. 4	
<b>о</b> Ц	E Z	8 🗆	<b>*</b> -	U L	4 Points	
COMMENTS: Se	t. Styles works we	ell with everyone t	hat he comes in c	ontact while work	ing. He is able to talk	33/
Officers under his co	ommand and have	them feel comfor	table telling him t	hings that they are	having problems wit	h
		— · · · · ·				
	The extent of w	ork parformed	with little on m			
Independence: 7	The extent of w	ork performed	with little or no	o direction/supe	ervision. Demonstr	at
	The extent of w	ork performed vec	with little or no	o direction/supe duties.	ervision. Demonstr	at
Independence: Table to make de	The extent of wecisions and tak	ork performed vice ownership of	with little or no their own job	o direction/supe duties.		at
Independence: Tability to make de	ecisions and tal	ce ownership of	their own job	duties.	ervision. Demonstr	
Independence: 7 ability to make de RATING 0□	ecisions and tal	se ownership of S⊠	their own job	duties. U□		

99 : 91 :

## Employee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #18	upervises and c	oordinates the a	activities of police	officers and non-	sworn officers in a	n assigned area. Cor	iducts
	RATING						1311. 1 1 1 1
	0□	E	S⊠	Ι□	U□	3 Points	19.1
	COMMENT	S: Sgt. Styles	insures that the off	ficers assigned to	his areas are prope	rly equipped and pre	nared for
	their shift. He	e insures that th	ey understand wha	t their responsibi	lities are, and if the	ey are unsure, he revi	ews them
	with them. Pa	asses along all	pertinent information	on that officers no	ed to properly con	nplete their assignme	ent
					-		
Objective #2: I	Ensures that pol	ice presence is	visible within assig	ned CMHA area	to serve as a deteri	rent to crime. Confe	rs with
	RATING 0□	E□	S⊠	I	U	3 Points	
	COMMENT	S: Sgt. Styles	insures that the off	icers in his zone a	are patrolling the a	reas that they are ass	ioned in an
	effort to deter	criminal activit	ty. While he is cor	npleting this he co	onfers with the off	icers to insure they k	now the
	areas in their 2	zone that are kn	own to be active c	rime areas.			
011 11 114 114							į.
Objective #3:5	Onducts investi	gations of crim	es, accidents and c	ivil disturbances.	Supports prelimin	ary investigations co	nducted
	RATING O□	E 🗀	$\mathbf{S}oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol{olbbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol{ol}}}}}}}}}}}}}}}$	Ι□	υロ	3 Points	<u>15.</u>
	COMMENT	<b>a</b>				<del></del>	
	COMMENT	S: Sgt. Styles a	assists his subordin	ates in completin	g their investigatio	ns to insure that all p	ertinent
	information is	contained in th	e original submissi	on. He complete	s all investigations	that are assigned to	him d
		<del></del>	·				3.16a
Objective #4·S	unervises subor	dinate staff eno	raged in natrol and	other activities or	ad assistah	cessary. Maintains c	
	RATING		sagea in patrol and	other activities at	id 4551515 Whele He	cessary. Maintains c	ngoing
	0 🗆	E 🗆	$\mathbf{S}oxtimes$	Ι□	U	3 Points	11.
	COMMENTS	S: Sgt. Styles I	nelps any officer w	ho needs assistan	ce in either safely a	completing their call,	an :64h
	have a question	n pertaining to	the call they are cu	rrently handling.	Monitors radio tra	ffic to insure that all	officers
	speaking on th	e radio are doin	ig so correctly.			The to moure that all	Onticers
				·	·	<del></del>	100
Objective #5: <u>S</u>	upervises the co	mpletion of all	written crime repo	rts and completes	other required rep	orts and forms descr	ibing
	RATING 0□	E	S⊠	r□	υ□	_3_Points	icu.
	COMMENTS	S. While review	ving reports Sat S	tulas insuras that	the Third Distance		
	are in complian	nce with Denart	mental procedures	If the report is 1	acking Set Styles	officers complete represent which reviews the report w	orts that
	officer and rev	iews why chans	ges need to be mad	e. He completes	all daily reports red	nired of him	4.6 x 6.
			3	o. Tro completes	an daily reports fee	quired of fillin.	1011
Objective #6: <u>Se</u>	erves as Officer RATING	in Charge (OIC	c) of headquarters	as needed. Obser	ves, inspects and m	naintains CMHA pro	perty
	0 □	E 🗔	$\mathbf{S}oxtimes$	Ι□	TI ()	2 10 1 4	OH
	<b>0</b>	# L.J	3 🔼	1 🕒	U 🗀	3 Points	10
	COMMENTS	S: Sgt. Styles se	erves as the OIC as	needed. He insu	res that all Departr	nental equipment is	
	functioning pro	perly and is no	t in need of service	. If equipment ne	eeds service, he ins	ures that it is properl	y
	documented an	d forwarded for	r repair. Maintaine	d all certification	s as required by De	epartmental Regulati	ons.

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## **Overall Performance**

Rate employee's overall performance:	
Total Points 45 14 = 3.2 (Overall Rating: Round rating to one (1) decimal place	ee) 111
☐ Outstanding (4.5 - 5.0) ☐ Improvement Needed (1.5 - 2.4) ☐ Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory (O - 1.4) ☐ Successful (2.5 - 3.4)	- (X
Specific areas of improvement needed: Continued improvement in investigation completion.	-cm -55
Specific goals for improvement: Turn in reports that are concise and contain all of the information needed in the formation by the Department.	ormat required
Training needed to accomplish goals: None.	
Additional comments: Sgt. Styles knows what I expect of him, and completes all assignments in the time frame that continually strives to improve upon his performance by asking questions when he is not sure of the correct answer. He are officer that has a question or just needs someone to talk to all the contents and the second of the correct answer.	t I give him. I le always help
an officer that has a question or just needs someone to talk to about personal matters. He is an asset to my Platoon.	F
ACKNOWLEDGMENT:	0.5
Please acknowledge that this performance appraisal has been reviewed with you by signing your name and recording the creview. Signing does not indicate agreement with your performance appraisal.	late of this
Also indicate whether you intend to submit a written statement or comments in the space provided below. Your statement must be submitted to the Director of Human Resources within ten (10) days after completion of your performance approximately.	or comments
Written Statement/Comments: Yes □ No ☒	
	in.
Employee Signature: 1 201 9 tyles # 156  Date: 03 / 20 / 03	
Reviewing Supervisor Signature: Date: 03 / 20 / 03	
Department Director Signature: Lieby July Okief Date: 3 13/103	13
	1

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# CMHA POLICE DEPARTMENT CAREER COUNSELING

NAM	E: Paul Styles #656		DATE: 3/20/03
CUR	RENT ASSIGNMENT	Third Platoon	
Bache	ation: School/GED XX Flors Degree brate	Associates Degree Masters Degree	
	alized Training: I Technologies and repair,	Police Executive Administrative	Leadership School, Basic SWAT.
1. Be a U	Professionally speak	sing, where would you like to	be five (5) years from now?
2. Becom	What are your profe to Deputy Chief of Police	0	
3. Continu	How can CMHA ass	ist you in obtaining your pro ent program.	fessional goals?
4. a) Def	If possible, what type your current position ensive Tactics Instructor	n?	o attend that would be beneficial to
	oort writing	<u> </u>	
	nputer Training		
5.		s, have you been provided wi ation on available work-relate	th or seen posted in the Police ed training?
	YES XX	NO	
6.	Currently, do you ha that could affect you	ive any health issues, persona r attendance and/or job perfo	l or work-related stress problems ormance? If YES, please explain.
	YES	NO <u>XX</u>	

## CAREER COUNSELING (continued)

7.	Currently, are the like CMHA to offe	re any work-related or personal st r you assistance with. If YES, plea	ress problems that you would ase explain.
	YES	NO <u>XX</u>	
8.	If you had any pers CMHA, would you diate Supervisor due to cl	sonal or work-related stress relate prefer going for assistance? Pleas	d problems where, within se explain reason.
		an or commune.	
9.	If needed, would yo personal stress pro	ou talk to your immediate supervis blems?	sor about work-related or
	YES XX	NO	
10.	If needed, would yo about work related	ou talk to a Licensed Family Couns or personal stress problems?	selor on retainer by CMHA
	YESXX	NO	
11.	In the past 12 mont related conversation	hs, <u>approximately</u> how often have n or discussions with your immedi	you had general or work- ate supervisor?
	Never	Sometimes	Often XX
12.	Since being employ Administrative Ord	ed by CMHA, have you ever been ler No. 11 - Personnel Policies?	provided with a copy of
	YES <u>xx</u>	NO	
Empl	oyee Name and Badge		
Empl	oyee Signature:	PRINT) Styles #65	6 Date: 3/20/03
Super	visor Signature:	t Gulfy can	Date: 3/20/03



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

### **CONFIDENTIAL**

Name	Paul Styles #656	Department/Area: Police Division			
Positi	on: Police Sergeant	Report Year: 2003			
your p this re demon	position description, you will be responsible for a port year. Please note that your annual performated toward accomplishment and actual obtaint is [6] objectives/expectations is required).	or area goals established for the above report year and accomplishing specific objectives/expectations during ormance appraisal will be based upon the progress nment of the objectives/expectations defined below (a required, additional pages may be attached to this			
I-	area. Conducts roll calls, inspects appearance	olice officers and non-sworn officers in an assigned and equipment of subordinates. Relays and structions, teletypes, special notices and directives.			
2-	Ensures that police presence is visible within crime. Confers with superior officers regarding performance and complaints.	assigned CMHA area to serve as a deterrent to ng patrol problems, crime conditions, personnel			
3-	Conducts investigations of crimes, accidents investigations conducted by subordinates. Co and injuries to police officers, the use of firea Recommends disciplinary action where necess	nducts special investigations including accidents rms and complaints about police personnel.			
4-	Supervises subordinate staff engaged in patro Maintains ongoing radio contact according to assignments when required.	and other activities and assists where necessary. established procedures, responding to radio			
5-	Supervises the completion of all written crime forms describing circumstances of crimes, accactivities including, but not limited to, brevitie required reports.	e reports and completes other required reports and cidents, investigations, complaints and other police es, daily rosters, leave requests and any other			
6-	Serves as Officer in Charge (OIC) of headqua CMHA property and department equipment. Of certifications that are required for this position	rters as needed. Observes, inspects and maintains Obtains and maintains firearms and other			
Employ	yee Signature: fun Styl	6 656 Date: 03 / 20 / 03			
Immed	iate Supervisor Signature:	Date: 03 / 20 / 03			
Departi	ment Director Signature La Shedis	Date: <u>3 /3/ 103</u>			

# CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

Ľ	MPLOYEE NAME: Sergeant Paul Styles #656
S	UPERVISOR: Anastacio T. Vazquez, Lieutenant #650
D	ATE COMPLETED: 04JAN05
×	1. Employee "self-evaluation"
×	2. Previous year Objectives/Expectations Worksheet.
X	3. Copy of Employee Attendance Record for previous year
×	4. Current Performance Appraisal
×	5. Current year Objectives/Expectations Worksheet
	6. Employee comments and/or written statement regarding Performance Appraisal.
X	7. Career Counseling Form



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

## **CONFIDENTIAL**

Name: Paul A. Styles	Position: Sergeant
Department/Area: Police	Last Appraisal Date: 01 / 13 / 04
Type: X Annual Mid Probation Other	Current Date: 12 / 30 / 04
Evaluation Period: From 01 / 01 / 04 To 12 / 3	31 / 04
Instructions: Five (5) Performance Levels and associated rating definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectatio Performance Appraisal.	ing an employee, determine the performance level for "each" The COMMENTS: section must be completed for all
PERFORMANO	CE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

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the duties outlined	I on the job descr	nnical skills and	information used	on the job. The c	demonstrated ability to e
RATING	·	•			
0□	E⊠	s□	Ι□	$v\Box$	4 Points
COMMENTS: 1	have the practical	technical skills a	nd other informati	on necessary for m	y job description. I have
demenstrate the ab	ility and I execute	the duties has out	lines in my job des	scription.	
			····		
Dependability: The agency regulations RATING	he extent to whics.	h an employee fo	ollows attendance	standards, safety	and conduct rules, and
0□	E⊠	s□	Ι□	U□	4 Points
COMMENTS: I:	am verv dependah	le when it comes	to working I follo	w the denartments	attendance control policy
rules, and agency re	egulations. Out of	365 days, I was a	bsent 2 days due t	o personal illness.	attendance control poricy
Quality: The accu	racy, thoroughne	ss and acceptabil	ity of work perfo	rmed.	
0□	E🛛	S□	Ι□	υ $\square$	4 Points
Productivity: The			mpleted in a spec	ified period of tir	ne, e.g. meeting/exceedi
Productivity: The established goals. RATING	quality and effic	iency of work co			•
Productivity: The established goals.			mpleted in a spec	ified period of tin	ne, e.g. meeting/exceedi
Productivity: The established goals. RATING	quality and effic	iency of work co	ΙQ	υ□	4 Points
Productivity: The established goals. RATING	quality and effic	iency of work co	ΙQ	υ□	4 Points
Productivity: The established goals. RATING O  COMMENTS: The	quality and effic  E  ne quality of work  ent to which an e	iency of work co S  that I forward is e	fficient and complete the starter", seeks	U□ eted in a timely m	4 Points
Productivity: The established goals.  RATING  O  COMMENTS: The external and knowledge, and	quality and effic  E  ne quality of work  ent to which an e	iency of work co S  that I forward is e	fficient and complete the starter", seeks	U□ eted in a timely m	4 Points
Productivity: The established goals.  RATING  O  COMMENTS: The external knowledge, and RATING  O  O  O  O  O  O  O  O  O  O  O  O  O	quality and effic  E   me quality of work  ent to which an ed suggests better  E   y current assignment	iency of work co  S  that I forward is e  mployee is a " se ways of accompl  S  ent allows me to u	fficient and complete starter", seeks ishing the job.	U□ leted in a timely m out new assignment	4 Points  anner.  ents, expands his or her
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Copy: Employee, Supervisor

Original: Human Resources

SELF APPRAISAL Interpersonal Relationsh :: The willingness and demonstrated at y to cooperate, work and 7. effectively communicate with co-workers, supervisors, subordinates and/or outside contacts. **RATING** 0 🗆  $\mathbf{E} \boxtimes$  $S \square$  $\Pi$  $U\square$ 4 Points COMMENTS: I have demonstrated the ability to work and cooperate effectively with my fellow co-workers, supervisors, subordinates, and outside contacts. Independence: The extent of work performed with little or no direction/supervision. Demonstrates an 8. ability to make decisions and take ownership of their own job duties. **RATING**  $\Box$  $\mathbf{E} \boxtimes$  $S \square$  $I\square$ U 4 Points COMMENTS: I have demonstrated that I can perform my work with little and no supervision. I have the ability to make decisions and take ownership for my duties.

Original: Human Resources

## Employee Objectives/Expectations

## **SELF APPRAISAL**

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #15		oordinates the	activates of police	officers and non-s	worn officers in an	assigned area.
	RATING O□	E	s□	10	U	4 Points
		The officer areas to patrol		and reports to me	on a daily basis for	their assignments, I advised
	mem or men	areas to patror	ually.		· · · · · · · · · · · · · · · · · · ·	·····
Objective #2:		ce presence is	visible within assig	gned CMHA area	to serve as a deterro	ent to crime.
	RATING O□	E⊠	s□	Ι□	υ□	4 Points
			at the officers under is and deter crime.	r my command ar	e present at their de	esignated post. They confer
Objective #3:	Conducts investi	igation of crime	es, accidents and ci	vil disturbances. S	Supports prelimina	y investigation.
	0□	E 🖾	s□	ΙD	U□	4 Points
	COMMENT conduct prelim	S: I respond to minary investig	and conduct inve	stigations of crime end discipline.	es, accidents, and c	ivil disturbances. I also
Objective #4:5		rdinate staff eng	gaged in patrol and	other activates an	d assists where nec	cessary.
	RATING O□	E	s□	Ι□	υロ	4 Points
	COMMENT	S: I supervise	the officers in the	patrol division and	l assist where neces	ssary.
Objective #5: S		ompletion of all	written crime repe	orts and completes	other required rep	orts and forms
	RATING O□	EX	s□	Ι□	υ□	4 Points
	COMMENT forwarding.	S: I supervise	and see to it that al	l written crime rep	oorts are complete a	and concise prior to
Objective #6: S	Serves as Officer	in Charge ) of	headquarters as n	eeded. Observes, i	nspects and mainta	ins CMHA property.
_	RATING O□	E⊠	s□	I 🗀	U 🗆	4 Points
	COMMENTS	S: From time t	o time I am require	ed to serve as the (	Officer In Charge o	f headquarters as needed. I
		- IIII IIII WIII WIII	Divini property III	nusica to file.		

Original: Human Resources

### Overall Performance

Rate employee's overall performance: "/- 14 = 4.0 (Overall Rating: Round rating to one (1) decimal place) Total Points 56 ☐ Outstanding (4.5 - 5.0) ☐ Improvement Needed (1.5 - 2.4) Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory (O - 1.4) ☐ Successful (2.5 - 3.4) Specific areas of improvement needed: More training pertaining to my position as a supervisor. Specific goals for improvement: More in service training Training needed to accomplish goals: None Additional comments: My skills and knowledge here at CMHA has allowed me to better understand how to Law Enforcement. My plans are to retire from the CMHA Police Department holding the rank of Commander. ACKNOWLEDGMENT: Please acknowledge that this performance appraisal has been reviewed with you by signing your name and recording the date of this review. Signing does not indicate agreement with your performance appraisal. Also indicate whether you intend to submit a written statement or comments in the space provided below. Your statement or comments must be submitted to the Director of Human Resources within ten (10) days after completion of your performance appraisal review. No 🛭 Written Statement/Comments: Yes Employee Signature: Date: 12 / 30 / 04 Reviewing Supervisor Signature Material Date: 01 104 105 Department Director Signature:



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

CONFID	ENTI	${f AL}$
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COM		
Name:	Paul Styles 656	Department/Area: Police Division
Positio	on: Police Sergeant	Report Year: 2004
your po	osition description, you will be responsible to port year. Please note that your annual per strated toward accomplishment and actual obtentials of the six [6] objectives/expectations is required).	d/or area goals established for the above report year and raccomplishing specific objectives/expectations during formance appraisal will be based upon the progress ainment of the objectives/expectations defined below (a As required, additional pages may be attached to this
j.	area. Conducts roll calls, inspects appearar explains general and special police orders,	police officers and non-sworn officers in an assigned and equipment of subordinates. Relays and instructions, teletypes, special notices and directives.
2-	crime. Confers with superior officers regar performance and complaints.	in assigned CMHA area to serve as a deterrent to ding patrol problems, crime conditions, personnel
3-	· · · · · · · · · · · · · · · · · · ·	ts and civil disturbances. Supports preliminary Conducts special investigations including accidents earms and complaints about police personnel. essary.
4-	Maintains ongoing radio contact according assignments when required.	trol and other activities and assists where necessary. to established procedures, responding to radio
5-	forms describing circumstances of crimes, activities including, but not limited to, brevequired reports.	ime reports and completes other required reports and accidents, investigations, complaints and other police vities, daily rosters, leave requests and any other
6-	Serves as Officer in Charge (OIC) of head CMHA property and department equipment certifications that are required for this positions.	quarters as needed. Observes, inspects and maintains nt. Obtains and maintains firearms and other tion.
Empl	oyee Signature: Land 5 ty	les Date: 13 1 Jan Oct
	ediate Supervisor Signature: Coming	mes, LT Date: 0/ 1/3/04
	artment Director Signature:	nebrou, Oking Date: 10004

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# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

### CONFIDENTIAL

Name: Paul Styles	Position: Sergeant #656
Department/Area: CMHA Division of Police	Last Appraisal Date: 01 / 13 / 04
Type: XX AnnualMid ProbationOther  Evaluation Period: From01 _ / _01 _ / _04 _ To12 _ / _3  Instructions: Five (5) Performance Levels and associated ratings definition of each Performance Level is also provided. When appraise Performance Factor and record the associated numeric rating.  Performance Factors and Employee Objectives/Expectation Performance Appraisal.  PERFORMANCE	s have been established for Performance Factors. A general ing an employee, determine the performance level for "each" The COMMENTS: section must be completed for all ns. As required, additional pages may be attached to this
O = Outstanding (5 Points): Performance consistently exceeds	I = Improvement Needed (2 Points): Performance is
the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

RATING	the practical/tech d on the job descri	nnical skills and i iption.	nformation used o	on the job. The de	emonstrated ability to exe
0	E	s⊠	Ι□	$\mathbf{u} \square$	3 Points
COMMENTS:	Sgt. Styles is thorou	ighly familiar with	the skills and info	rmation necessary	to execute his job duties.
Dependability: Tagency regulation RATING	The extent to which	h an employee fol	lows attendance s	standards, safety	and conduct rules, and al
0	E 🗀	$\mathbf{S}oldsymbol{oldsymbol{\boxtimes}}$	Ι□	U□	3 Points
COMMENTS: Scomplain when inv	Sgt. Styles consister vestigations require	ntly reports for dut that he work long	y on time and prep or inconvenient ho	ared to perform his	s assigned duties, and does safety and conduct standar
Quality: The acco	uracy, thoroughne	ss and acceptabili	ty of work perfor	med.	
0 🗆	E□	S⊠	Ι□	U	3 Points
COMMENTS: S	Sgt. Styles needs to	improve with repo	rt writing and time	ely completion of	tasks.
established goals.	e quality and effici	iency of work con	npleted in a specif	fied period of tim	e, e.g. meeting/exceeding
RATING					
RATING O□	E	S□	Ι□	υ□	4 Points
O□  COMMENTS: S		ery effort to comp	letes all required in	vestigations on ti	
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RATING 0□	E⊠	S□	Ι□	υ□	4 Points
COMMENTS, C.	4 Ctulos	1 1		141 61	
					at ease and also provide
			himself to the pu	blic in a profession	nal manner and works w
his fellow co-worker	rs and subordinate	s.			· <del>-</del> -
Independence: T	• • •		with little or no	direction/cupe	ruicion Demonstrat
Independence: Tability to make de	he extent of w	ork performed		(A) -	ervision. Demonstrat

Original: Human Resources

## Employee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #150		rdinates the activ	ities of police office	ers and non-swor	n officers in an ass	igned area
	RATING O□	E⊠	s□	ΙŪ	υロ	4 Points
		: Sgt Styles ensu	res that patrol and	protection officers	respond to their a	ssigned duties and carry
	them out.					
		<del></del>		<del>-</del>		
Objective #2: <u>E</u>		presence is visib	le within assigned	CMHA area to se	rve as a deterrent t	o crime.
	RATING O□	E⊠	S□	Ι□	U	4 Points
			dates that patrol and complete necessa		ers patrol their ass	igned areas and take
			<del></del>			<del></del>
Objective #3:		tions of crimes, a	ccidents and civil	disturbances.		
	RATING O□	E 🗀	S⊠	10	U□	3 Points
	COMMENTS: during his tour o	Sgt. Styles 's con	nduct investigation	s on all incidents	and complaints tha	t come to his attention
	during ms tour o	1 duty.	·		·····	
	******			·	<del></del>	
Objective #4: Si	pervises subordina	te staff engaged in	patrol and other activ	vities, maintains rad	io contact and resnon	ds to calls when necessary.
• -	RATING					The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
	0 🗆	E 🖾	s□	I	U	4 Points
	COMMENTS:	Sgt. Styles ensur	res that all officers	assigned under hi	s direct supervision	respond to their
	assignments with	out undue delays	. Sgt. Styles consta	antly reminding hi	s subordinates that	they must take ownership
	of their assigned					
Objective #5: St		pletion of all writ	tten crime reports a	and completes other	er required reports	and forms
	RATING O□	E	S⊠	Ι□	υ□	3 Points
	COMMENTS: needed.	Sgt. Styles revie	ws platoon person	nel reports and re	turns reports to off	icers for corrections if
			· · · · · · · · · · · · · · · · · · ·			
		rge (OIC) of headqua	rters as needed, observe	es and maintains CMH	A Property. Maintains	firearm qualification
	RATING					-
	0	E	S□	I 🗆	U	4 Points
						toon and performs well in
	that position. He	consistently meet	ts all standard requ	ired to maintain c	ertification.	
	<del> </del>					

Original: Human Resources

#### Overall Performance

Rate employee's overall performance: 1.14 = 3.45 (Overall Rating: Round rating to one (1) decimal place) Total Points 48  $\Box$  Outstanding (4.5 - 5.0) ☐ Improvement Needed (1.5 - 2.4) ☐ Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory (O - 1.4) **⊠** Successful (2.5 - 3.4) Specific areas of improvement needed: Any laws updates and First Line Supervision courses that become available. Specific goals for improvement: Continue education on law enforcement sciences. Training needed to accomplish goals: Sgt. Styles should be given opportunities to attend courses that will enhance his field supervisory and administrative skills. Additional comments: Sgt. Styles has the ability to be an outstanding supervisor with the CMHA Police Department. ACKNOWLEDGMENT: Please acknowledge that this performance appraisal has been reviewed with you by signing your name and recording the date of this review. Signing does not indicate agreement with your performance appraisal. Also indicate whether you intend to submit a written statement or comments in the space provided below. Your statement or comments must be submitted to the Director of Human Resources within ten (10) days after completion of your performance appraisal review. Written Statement/Comments: Yes No  $\square$ Employee Signature: SGT. Reviewing Supervisor Signature: husland Varyung Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Signature: husland Supervisor Sig Department Director Signature:

Original: Human Resources



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

### **CONFIDENTIAL**

Name:	Paul Styles , Sergeant #656	Department/A	Area: Police Division
Positio	on: Police Sergeant	Report Year:	2005
your po this re- demons	etions: Based upon a review of department and/or position description, you will be responsible for account year. Please note that your annual perfor strated toward accomplishment and actual obtain f six [6] objectives/expectations is required). As seet.	ccomplishing sp mance appraisa ment of the obje	ecific objectives/expectations during al will be based upon the progress ectives/expectations defined below (a
J-	Supervises and coordinates the activities of po area. Conducts roll calls, inspects appearance explains general and special police orders, inst	and equipment	of subordinates. Relays and
2-	Ensures that police presence is visible within a crime. Confers with superior officers regarding performance and complaints.		
3-	Conducts investigations of crimes, accidents as investigations conducted by subordinates. Con and injuries to police officers, the use of firears Recommends disciplinary action where necessary	ducts special in ms and complain	vestigations including accidents
4-	Supervises subordinate staff engaged in patrol Maintains ongoing radio contact according to eassignments when required.		
5-	Supervises the completion of all written crime forms describing circumstances of crimes, acci activities including, but not limited to, brevities required reports.	dents, investiga	tions, complaints and other police
6-	Serves as Officer in Charge (OIC) of headquar CMHA property and department equipment. O certifications that are required for this position.	btains and main	Observes, inspects and maintains tains firearms and other
	vee Signature: \$47. 5tyles	#656	Date: 0/104/05
	nent Director Signature: A. The his	Sign hil	Date: 13 105

# CMHA POLICE DEPARTMENT

### **CAREER COUNSELING**

NAM	IE: Paul A. Styles		DATE: <u>04JAN05</u>
CUR	RENT ASSIGNME	NT: CMHA Division of Police	/ Sergeant #656
High Bach	sation: School/GED XX elors Degree orate	Associates Degree Masters Degree	
	ialized Training: al Arts, ASP and Monad	lnock Baton Training, Mountain	Bike Training, Basic Swat Training,
Prepa	ration and Planning for	Search Warrants & OPOTA.	
	10, 10	, 65 S	
1. Five y		aking, where would you like like to be a Watch Commander of	to be five (5) years from now? or Unit OIC in a Specialize Unit.
			2
2. Profes	What are your prossional goal is to continu	ofessional goals? ne my education in Police Scienc	e /Law Enforcement.
3. CMH	How can CMHA a	assist you in obtaining your partition reimbursement.	professional goals?
4.	your current posit		te to attend that would be beneficial to
	gal updates		
	omputer Training eight Room Training wh	ile en Dutu	
C) WE	right Koom Training wh	ne on Duty.	
5.		nths, have you been provided mation on available work-re	l with or seen posted in the Police lated training?
	YES XX	NO	
6.			onal or work-related stress problems erformance? If YES, please explain.
	YES	NO <u>XX</u>	

## CAREER COUNSELING (continued)

7.	Currently, are then like CMHA to offe	re any work-related or personal stre r you assistance with. If YES, pleas	ss problems that you would e explain.
	YES	NO <u>XX</u>	
8. My In	CMHA, would you	sonal or work-related stress related prefer going for assistance? Please s my first line supervisor.	
9.	If needed, would yo personal stress pro	ou talk to your immediate superviso blems?	r about work-related or
	YES XX	NO	
10.		ou talk to a Licensed Family Counse or personal stress problems?	lor on retainer by CMHA
	YES <u>XX</u>	N O	
11.		hs, <u>approximately</u> how often have y n or discussions with your immediat	
	Never	Sometimes	Often XX
12.		ed by CMHA, have you ever been p ler No. 11 - Personnel Policies?	rovided with a copy of
	YES <u>xx</u>	NO	
Empl	oyee Name and Badge	# Paul A. Styles, Sergeant #656 (PRINT)	58 d.J.
Empl	oyee Signature:	S 51. 5 tyles # 656	Date: 04JAN04
Supei	visor Signature: Fin	stend Yangun Fla	Date: 004JAN04

# CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

E	MPLOYEE NAME: Paul Styles #656
S	UPERVISOR: Lt. Ronald J. Morenz #626
D	ATE COMPLETED: January 30, 2006
⊠	1. Employee "self-evaluation"
×	2. Previous year Objectives/Expectations Worksheet.
×	3. Copy of Employee Attendance Record for previous year
×	4. Current Performance Appraisal
×	5. Current year Objectives/Expectations Worksheet
☒	6. Employee comments and/or written statement regarding Performance Appraisal.
×	7. Career Counseling Form



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

### CONFIDENTIAL

Name: Paul A. Styles	Position: Sergeant
Department/Area: Police/ Security	Last Appraisal Date: 12 / 30 / 04
Type: x Annual Mid Probation Other	Current Date: 01 / 24 / 06
Evaluation Period: From 01 / 01 / 05 To 12 /	31 / 05
Instructions: Five (5) Performance Levels and associated rating definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectation Performance Appraisal.	sing an employee, determine the performance level for " each". The COMMENTS: section must be completed for all
PERFORMANO	CE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

# <u>PERFORMANCE FACTORS</u> (Eight Performance Factors are to be evaluated)

0□	$\mathbf{E}\square$	S⊠	Ι□	υ□	3 Points
	for as job knowle	edge, I have patrol	just right, howeve	er as for as narcotic	cs I have some knowledg
learning each day.					
		<u> </u>	<del> </del>		
Dependability: The agency regulations. RATING		n an employee fol	lows attendance s	standards, safety	and conduct rules, and
0□	EX	s□	Ι□	บ	4 Points
COMMENTS: La	m verv dependabl	le. I come to work	evervday usually a	early before my tir	ne. I don't call off sick, r
too much time off.	vory dependuo.	io, i come to work	overyddy ddainy c	- Carry octore my in	ne. I don't can on siek, i
Quality: The accur	acy, thoroughnes	ss and acceptabili	ty of work perfor	med.	
RATING 0□		s⊠	, I 🗆		2 n.t.
VШ	E□	36	1 🛶	U 🗆	3 Points
Productivity: The		then my work wou			ne, e.g. meeting/exceedi
Productivity: The established goals. RATING	quality and effici	iency of work con	npleted in a speci	fied period of tim	ne, e.g. meeting/exceedi
Productivity: The established goals. RATING O□	quality and effici	iency of work con	npleted in a speci	fied period of tim	ne, e.g. meeting/exceedi
Productivity: The established goals. RATING O□	quality and effici	iency of work con	npleted in a speci	fied period of tim	ne, e.g. meeting/exceedi
Productivity: The cestablished goals.  RATING  O  COMMENTS: My	quality and effici	iency of work con	npleted in a speci	fied period of tim	ne, e.g. meeting/exceedi
Productivity: The destablished goals.  RATING O  COMMENTS: My reports on time.  Initiative: The external knowledge, and	equality and effici E  verification  ont to which an e	iency of work con  S  requires a lot of re	npleted in a speci  I  ports, its time cons	fied period of tim  U  suming and I do m	ne, e.g. meeting/exceedi
Productivity: The cestablished goals.  RATING O  COMMENTS: My reports on time.  Initiative: The exte	equality and effici E  verification  ont to which an e	iency of work con  S  requires a lot of re	npleted in a speci  I  ports, its time cons	fied period of tim  U  suming and I do m	ne, e.g. meeting/exceedi  3 Points  y best to forward all nece
Productivity: The destablished goals.  RATING O  COMMENTS: My reports on time.  Initiative: The external knowledge, and RATING O  O	E  current position  nt to which an example suggests better	SIM  requires a lot of regularies a lot of regularies a lot of regularies as a " sel ways of accomplishing size."	ports, its time cons  f starter", seeks on the job.	fied period of tim  U  suming and I do m  out new assignme	Points  y best to forward all necessaris, expands his or her  Points
Productivity: The destablished goals.  RATING O  COMMENTS: My reports on time.  Initiative: The external knowledge, and RATING O  O	ent to which an end suggests better to suppression.	SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT SINTERPORT	ports, its time constitutions on a daily bas	fied period of tim  U  suming and I do m  out new assignme	Points  y best to forward all neces
Productivity: The destablished goals.  RATING O  COMMENTS: My reports on time.  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I   ents on a daily base my job.	fied period of tim  U  suming and I do m  out new assignme  U  is, my skills and k	Points  y best to forward all neces  onts, expands his or her
Productivity: The destablished goals.  RATING O  COMMENTS: My reports on time.  Initiative: The externand knowledge, and RATING O  COMMENTS: As positions allows me to the communications.  Demonstrates the	recurrent position  ont to which an ensuggests better was supervisor, I reconsuggest better was suggest better was suggest better was supervisor.	sizency of work considerations.  Six requires a lot of regularies a lot of regularies a lot of regularies as a " sel ways of accomplished the ability to consideration of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second sec	ports, its time constitutions on a daily bas my job.	fied period of tim  U  suming and I do m  out new assignme  U  is, my skills and k	Points  y best to forward all neces  nts, expands his or her  3 Points  nowledge from previous
Productivity: The destablished goals.  RATING O  COMMENTS: Myreports on time.  Initiative: The external knowledge, and RATING O  COMMENTS: Aspositions allows metals.	recurrent position  ont to which an ensuggests better was supervisor, I reconsuggest better was suggest better was suggest better was supervisor.	sizency of work considerations.  Six requires a lot of regularies a lot of regularies a lot of regularies as a " sel ways of accomplished the ability to consideration of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second sec	ports, its time constitutions on a daily bas my job.	fied period of tim  U  suming and I do m  out new assignme  U  is, my skills and k	Points  y best to forward all neces  nts, expands his or her  3 Points  nowledge from previous

Copy: Employee, Supervisor

Original: Human Resources

0 🗆	E	s 🗆	$\mathbf{I} \square$	U□	4 Points
COMMENTS: 11	nave demonstrated	the ability to worl	k and effectively o	ommunicate with	co-workers, supervisors
subordinates, and or	utside contacts. I a	am somewhat know	wn through the ag	ency and to my kn	owledge I get along with
					<del></del>
Independence:					rvision. Demonstrat
everyone o.k.					rvision. Demonstrat
Independence: 7 ability to make d					rvision. Demonstrate

Original: Human Resources

## Employee Objectives/Expectations

## **SELF APPRAISAL**

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Onlective #150		demaies in	e activities of police of	incers and nor	1-sworn officers in an	assigned area.
	RATING O□	E	S⊠	Ι□	U□	3 Points
	COMMENTS	:				
O1 4 8A T				100 0714		
Objective #2: E	RATING	e presence i	s visible within assign	ied CMHA are	a to serve as a deterre	nt to crime.
	0□	E⊠	S□	Ι□	UΠ	4 Points
	COMMENTS	:				
Objective #3:	Conducts investiga	ations of cri	mes, accidents and civ	vil disturbance:	S.	
	RATING O□	E□	S⊠	Ι□	U□	3 Points
	COMMENTS		_			_
				·		
						<del></del> .
Objective #4:S		inates staff	engages in patrol and	other activities	and assist where nec	essary.
	RATING O□	E 🛛	s□	Ι□	υ□	4 Points
	COMMENTS	:				
					<u>.                                    </u>	
Objective #5: S	upervises the con	npletion of a	all written crime repor	ts and complet	es other required repo	orts and forms.
_	RATING 0□	E□	S⊠	ΙÜ	υ□	3 Doints
	V.	- <del></del>	~ <b>_</b>			3 Points
	COMMENTS:					
Objective #6: <u>S</u>		n Charge of	headquarters as neede	ed. Oberves, ii	spects and maintains	CMHA property.
	RATING O□	E⊠	s□	I 🗆	U	4 Points
					_	
	COMMENTS:		· · · · · · · · · · · · · · · · · · ·			

Original: Human Resources

Rate employee's overall performance:

Total Points 47	nd rating to one (1) decimal place)
	ement Needed (1.5 - 2.4) actory (O - 1.4)
Specific areas of improvement needed: More computer training.	
Specific goals for improvement: Attend as much training classes that offered.	
Training needed to accomplish goals: N/A	
Additional comments: This is the start of my thirteenth year, CMHA as made the best of my ability and would like to retire from this agency.	a big impact on my life. I serve the community to
ACKNOWLEDGMENT:  Please acknowledge that this performance appraisal has been reviewed with you by review. Signing does not indicate agreement with your performance appraisa	
Also indicate whether you intend to submit a written statement or comments in the must be submitted to the Director of Human Resources within ten (10) days afte	
Written Statement/Comments: Yes \( \square\) No \( \square\)	



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

### **CONFIDENTIAL**

Name:	Paul Styles, Sergeant #656	Department/Area: Police Division
Positio	on: Police Sergeant	Report Year: 2005
your po this re demon	osition description, you will be responsible for acceptant year. Please note that your annual perform strated toward accomplishment and actual obtains f six [6] objectives/expectations is required). As	area goals established for the above report year and complishing specific objectives/expectations during nance appraisal will be based upon the progress nent of the objectives/expectations defined below (a required, additional pages may be attached to this
1-	area. Conducts roll calls, inspects appearance a	ce officers and non-sworn officers in an assigned nd equipment of subordinates. Relays and uctions, teletypes, special notices and directives.
2-	Ensures that police presence is visible within as crime. Confers with superior officers regarding performance and complaints.	
3-	Conducts investigations of crimes, accidents an investigations conducted by subordinates. Cond and injuries to police officers, the use of firearm Recommends disciplinary action where necessar	ucts special investigations including accidents s and complaints about police personnel.
4-	Supervises subordinate staff engaged in patrol at Maintains ongoing radio contact according to es assignments when required.	
5-	Supervises the completion of all written crime reforms describing circumstances of crimes, accid activities including, but not limited to, brevities, required reports.	ents, investigations, complaints and other police
6-	Serves as Officer in Charge (OIC) of headquarte CMHA property and department equipment. Ob certifications that are required for this position.	
Employ	ree Signature: \$67. Styles #	5656 Date: 0/104105
Immedi	ate Supervisor Signature:	1 Date: 01 104 105
Departn	nent Director Signature:	1,0 /m / Date: / 13 175

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PL	о С	2	X		×			X			X		Š	UESTED T HR.
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# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

## **CONFIDENTIAL**

Name: Paul Styles	Position: Sergeant
Department/Area: Police Department	Last Appraisal Date: 01 / 01 / 05
Type: XXX AnnualMid ProbationOther  Evaluation Period: From01 _ / _01 _ / _05 _ To12 _ / _3  Instructions: Five (5) Performance Levels and associated ratings definition of each Performance Level is also provided. When appraisi Performance Factor and record the associated numeric rating.  Performance Factors and Employee Objectives/Expectation Performance Appraisal.  PERFORMANCE	s have been established for Performance Factors. A general ing an employee, determine the performance level for " each" The COMMENTS: section must be completed for all ns. As required, additional pages may be attached to this
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources Copy: Employee, Supervisor

## PERFORMANCE FACTORS (Eight Performance Factors are to be evaluated)

$o \square$	$\mathbf{E} \square$	s⊠	I 🗆	$\mathbf{U}\square$	3 Points
COMMENTS: Sgr he understands his jo					ce then he has demons
Dependability: The agency regulations.	e extent to which	an employee foll	lows attendance s	standards, safety	and conduct rules, an
0⊠	E	S□	Ι□	U□	5 Points
COMMENTS: Sgregulations, as well a		ceive any discipli	ne during 2005, in	dicating that he fo	llows the Department 1
Quality: The accura	acy, thoroughnes	s and acceptabili	ty of work perfor	med.	
0□	E	S⊠	Ι□	U 🗀	3 Points
Productivity: The castablished goals.  RATING  O	quality and effici	ency of work con	npleted in a speci	U	ne, e.g. meeting/excee
					_3_Points
	nt to which an e	mployee is a " sel	f starter", seeks	out new assignme	ents, expands his or h
Initiative: The extend knowledge, and RATING  O				υ□	_3_Points
and knowledge, and RATING O□  COMMENTS: Sg	E . Styles received	ways of accompli S⊠ an on-duty injury v	shing the job.  I   which limited his a	ability in this area.	He has a good unders
and knowledge, and RATING O  COMMENTS: Sgt of his units responsible  Communications Demonstrates the	E Styles received a collities and is deve	s an on-duty injury voloping better, more the ability to co	shing the job.  I  which limited his a e efficient ways of ommunicate in a	ability in this area.  If handling their as:  In effective man	He has a good unders signments.
and knowledge, and RATING  O  COMMENTS: Sgt of his units responsib	E Styles received a collities and is deve	s an on-duty injury voloping better, more the ability to co	shing the job.  I  which limited his a e efficient ways of ommunicate in a	ability in this area.  If handling their as:  In effective man	He has a good unders signments.

Original: Human Resources

0 🗆	E	s□	I	U□	4 Points
COMMENTS: Sg	t. Styles works we	ell with his subord	inates, other offic	ers and supervisor	s, and anyone he comes
	ly basis. He has a	"laid-back" deme	eanor which make	s him relate well t	o others
contact with on a da	ity basis. Tie has a	Tara Davit Goin	Junior William		<u> </u>
contact with on a da	ily basis. Tie has a			-	
			9:		
			9:		
ndependence: T	he extent of w	ork performed	with little or no	o direction/supe	
Independence: Tability to make de	he extent of w	ork performed	with little or no	o direction/supe	ervision. Demonstra
	he extent of w	ork performed	with little or no	o direction/supe	

Original: Human Resources

## Employee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #1 <u>\$</u>		rdinates the activ	ties of police offic	ers/detectives in a	n assigned unit. C	onducts briefings,
	RATING 0□	Е	s⊠	Ι□	U	3 Points
	COMMENTS	: Sgt. Styles direc	cts the actions of hi	s subordinates. H	le keeps them info	med of any Departmental
	changes and pro	vides them with a	any information per	rtinent to their mis	ssion.	
Objective #2: I		subordinates are in	nvestigating compl	aints assigned to t	he unit, addressing	g in a proactive manner,
	RATING O□	E⊠	s□	I	U□	4 Points
	COMMENTS	Sgt. Styles insur	es that his subordi	nates are completi	ng the investigatio	ns that they are assigned,
		ner. When he obs	erves trends occuri	ring on the estates	, he directs his unit	ts activities to address
	them.					
Objective #3:	Conducts follow-u	p investigations o	f crimes, accidents	and civil disturba	nces. Reviews pre	eliminary investigations
	0□	E 🗀	S⊠	Ι□	U	3 Points
	COMMENTS	Sgt. Styles revie	ws all of the report	s and investigatio	ns submitted by hi	s subordinates. He also
					his subordinates vi	olates departmental rules
	and regulations,	ne recommends t	he discipline witho	ut input from me.	<u> </u>	
Objective #4: S		nate staff engaged	l in investigations	and assists where	necessary. Mainta	ins investigative files
	RATING 0□	E 🗆	s⊠	Ι□	U	3 Points
					th the Narcotics Ur	nit. He keeps me informed
	in reference to o	n-going investigat	tions and their statu	1S		
Objective #5:S		pletion of all writ	ten reports and con	npletes other requ	ired reports and fo	rms describing
	RATING O□	E	S⊠	I□	υ□	3 Points
			its all of the report		from him. He also	o insures that his
Objective #6: Se		Charge (OIC) as	needed. Observes	, inspects and mai	ntains CMHA pro	perty and department
	RATING O□	E⊠	s□	I 🗆	U□	4 Points
	COMMENTS: he was scheduled		ained his certificat	ions as required.	He completed all s	upervisory training that
	ne was selleduled	anena.		<u> </u>		

Original: Human Resources

## Overall Performance

Rate employee's overall performance:	
Total Points 48 -/. 14 = 3.4 (Overall Rating: Round rate	ing to one (1) decimal place)
☐ Outstanding (4.5 - 5.0) ☐ Improvement ☐ Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory ☐ Successful (2.5 - 3.4)	
Specific areas of improvement needed: Sgt. Styles needs to improve on his written of effective leader of the Narcotics Unit.	communications. Otherwise, he is a very
Specific goals for improvement: Improve written communications, both content and	format.
Training needed to accomplish goals: Word computer classes. Continued feedback Sgt. Styles.	relating to written reports submitted by
Additional comments: Sgt. Styles is an effective leader of the Narcotics Unit. They have statistics are improving. When Sgt. Styles missed a month due to an on-duty injury, his continued to work as though he was there, which is a tribute to his leadership.	nave taken on a revitalized approach and their s subordinates didn't miss a beat. They
ACKNOWLEDGMENT:	
Please acknowledge that this performance appraisal has been reviewed with you by signing review. Signing does not indicate agreement with your performance appraisal.	g your name and recording the date of this
Also indicate whether you intend to submit a written statement or comments in the space product be submitted to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within the Director of Human Resources within ten (10) days after compared to the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources within the Director of Human Resources with Human Resourc	provided below. Your statement or comments letion of your performance appraisal review.
Written Statement/Comments: Yes No 🗵	
Employee Signature: 557- Puntan 5 tylus #656	Date: 01 / 30 / 06
Reviewing Supervisor Signature: Je July 626	Date: 01 / 30 / 06
Department Director Signature: July Mc Blevi, Chief	Date: 216 106

Original: Human Resources



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Name: Paul Sty	yles #656	Department/Area: Poli	ce Division
	ce Sergeant -Administration	Report Year:	
your position this report ye demonstrated	description, you will be responsible ear. Please note that your annual toward accomplishment and actual	for accomplishing spe performance apprais obtainment of the obje	blished for the above report year and cific objectives/expectations during al will be based upon the progress ectives/expectations defined below (a tional pages may be attached to this
briefir	vises and coordinates the activities on ngs, inspects appearance and equipment orders, instructions, teletypes, special	ent of subordinates. Rel	ays and explains general and special
proact	res that their subordinates are investive manner, crimes occurring on CMI ems, crime conditions documented, per	HA properties. Confers	with superior officers regarding unit
invest injurie	ucts follow-up investigations of criming igations conducted by subordinates to police officers, the use of firear linary action when necessary.	. Conducts special inve	estigations including accidents and
invest	vises subordinate staff engaged in igative files and statistical reports o igations, preparing reports as required	n unit activities. Advis	ses superior officers' of all ongoing
	vises the completion of all written bing circumstances of crimes, acciden		
departi	s as Officer in Charge (OIC) as need ment equipment. Obtains and maintain on. Completes supervisory training rise.	ns firearms and other ce	ertifications that are required for this
Employee Sign	ature: South tyl	# 656	Date: 01 / 30 / 06
Immediate Sup	ervisor Signature:	426	Date: 01 / 30 / 06
Department Dir	rector Signature:	referen, chief	Date: 21 6 106

# CMHA POLICE DEPARTMENT CAREER COUNSELING

NAM	E: Paul A. Styles		DATE: 24JAN06
CUR	RENT ASSIGNMENT	T: Sergeant OIC of the N	arcotics Unit
	School/GED <u>x</u> lors Degree	Associates Degree Masters Degree	
	alized Training:		
Police	Executive Administrative	Leadership School, Basi	c SWAT School, Mountain Bike Training,
1. Five ye			like to be five (5) years from now? my employment with the CMHA Police
Depart	ment. And if the a Lieute	enant position becomes av	ailable, I would like the opertuninty to apply.
2. My pro	What are your professional goals stays the		s, to continue my education and continue
providi	ng for my family.		
<b>3.</b> As far :		sist you in obtaining yo bursement remains the sar	our professional goals? ne. If not the Agency can allow me the time off
to seek	my goals on my own.		
4.	your current positio	n?	a like to attend that would be beneficial to
			o me for my current position.
	rch Warrant preparatio	n, Legal Updates,	
C) Polic	ce Instructor Course		
5.	In the past 12 month Department, informa	ns, have you been prov ation on available worl	ided with or seen posted in the Police c-related training?
	YES <u>×</u>	NO	
6.			personal or work-related stress problems b performance? If YES, please explain.
	YES	NO <u>x</u>	

### CAREER COUNSELING (continued)

7.	Currently, are the like CMHA to off	ere any work-related or personal str er you assistance with. If YES, plea	ress problems that you would ase explain.
	YES	NO <u>XX</u>	
8.	If you had any per	rsonal or work-related stress related	d problems where, within
Imme	CMHA, would yo	u prefer going for assistance? Pleas nation is kept confidential.	se explain reason.
9.	If needed, would y personal stress pr	ou talk to your immediate supervis	sor about work-related or
	YES XX	NO	
10.		ou talk to a Licensed Family Couns d or personal stress problems?	selor on retainer by CMHA
	YES <u>XX</u>	NO	
11.	In the past 12 mon related conversation	ths, <u>approximately</u> how often have on or discussions with your immedia	you had general or work- ate supervisor?
	Never	Sometimes	Often <u>XX</u>
12.	Since being emplo Administrative Or	yed by CMHA, have you ever been der No. 11 - Personnel Policies?	provided with a copy of
	YES <u>xx</u>	NO	
 Empl	oyee Name and Badg	e# Paul A. Styles #656	
Empl	oyee Signature:	Punt A. Styles #	Date: 30JAN06
Super	visor Signature: 🏒	x Guz zan	Date: 30JAN06

### CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

E.	MPLOYEE NAME: Paul Styles #656
SI	UPERVISOR: Lt. Ronald J. Morenz #626
D	ATE COMPLETED: March 7, 2007
×	1. Employee "self-evaluation"
X	2. Previous year Objectives/Expectations Worksheet.
×	3. Copy of Employee Attendance Record for previous year
X	4. Current Performance Appraisal
X	5. Current year Objectives/Expectations Worksheet
X	6. Employee comments and/or written statement regarding Performance Appraisal.
X	7. Career Counseling Form



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

#### **CONFIDENTIAL**

Name: Paul A. Styles	Position: Sergeant
Department/Area: Police Department	Last Appraisal Date: 01 / 01 / 06
Type: X AnnualMid ProbationOther  Evaluation Period: From01 _ / _01 _ / _06 _ To12 _ / _3  Instructions: Five (5) Performance Levels and associated ratings definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectation Performance Appraisal.  PERFORMANCE	s have been established for Performance Factors. A general ing an employee, determine the performance level for " each" The COMMENTS: section must be completed for all ns. As required, additional pages may be attached to this
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

### **SELF APPRAISAL**

### <u>PERFORMANCE FACTORS</u> (Eight Performance Factors are to be evaluated)

	$\mathbf{E}\square$	$\mathbf{S}ledown$	Ι□	υ□	3 Points
COMMENTS: I p execute the duties of			skills and informa	tion used on the jo	b. I demonstrate the al
Dependability: Th agency regulations. RATING		an employee fol	lows attendance :	standards, safety	and conduct rules, and
<b>0</b>	E	$S\square$	Ι□	U	4 Points
COMMENTS: As	an employee I fo	llow the attendance	e standards, safety	and conduct rules	s, and all agency regula
Quality: The accur RATING	acy, thoroughnes	s and acceptabili	ty of work perfor	med.	
valing 0□	E□	$\mathbf{S}lacktriangledown$	Ι□	Ü□	3 Points
0.03434955900 -					<del></del>
_			in the work I do,	its usually accepta	ble by my supervisor a
often return for corre	ections as when I i	irst started.		-	
	quality and effici	ency of work cor	npleted in a speci	fied period of tin	ne, e.g. meeting/excee
stablished goals.	quality and effici E□	ency of work cor S⊠	npleted in a speci I□	fied period of tin	ne, e.g. meeting/excee
stablished goals.  RATING  O  COMMENTS: La	E□ tely I am learning	S⊠ to format the qual	Ι□	υ□	3 Points
stablished goals.  RATING  O  COMMENTS: La	E□ tely I am learning	S⊠ to format the qual	Ι□	υ□	3 Points
stablished goals.  RATING O  COMMENTS: La with managers, coun  nitiative: The extend knowledge, and	E am learning sel personnels, an	S to format the qual d the LAC.	I ☐  ity of work that I p  f starter", seeks o	U□ perform in a specif	3 Points
established goals.  RATING  O  COMMENTS: La  with managers, coun	E am learning sel personnels, an	S to format the qual d the LAC.	I ☐  ity of work that I p  f starter", seeks o	U□ perform in a specif	Points  ic time frame. I attendents, expands his or he
established goals.  RATING O  COMMENTS: La with managers, coun  nitiative: The extend knowledge, and RATING O	tely I am learning sel personnels, and to which an end suggests better to EX	to format the qual d the LAC.  mployee is a " sel ways of accompli	ity of work that I put of starter", seeks of shing the job.	U□  perform in a specification  out new assignment	2 Points  ic time frame. I attend  ents, expands his or he  4 Points
comments: La with managers, count initiative: The extend knowledge, and RATING O COMMENTS: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La comments: La co	E I am learning sel personnels, and to which an end suggests better to E I	s⊠  to format the qual d the LAC.  mployee is a " sel ways of accompli S□  elf starter in my co	ity of work that I put of starter", seeks of shing the job.  I   urrent position, I classes	U□  perform in a specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specification of the specificatio	3 Points ic time frame. I attend
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I attend  Tents, expands his or he  4 Points  Seek out new assignment the ideas with the other  ther, both written and

Original: Human Resources

SELF APPRAISAL

0 🗖	E⊠	S 🗆	$\mathbf{I} \square$	U	4 Points
COMMENTS: 1h	ave a good worki	ng relationship wit	h my fellow co-w	orkers, I can also	effectively communicate
my supervisors, sub	ordinates, and out:	side contacts.			
					rvision. Demonstrat
Independence: 1 ability to make de RATING					rvision. Demonstrate

Original: Human Resources

### Employee Objectives/Expectations

#### **SELF APPRAISAL**

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #15		oordinate the ac	tivities of police/	detectives in an as	signed unit.	
	RATING O□	E⊠	$s\square$	Ι□	U□	4 Points
	COMMENT	S: At my pres	ent position I supe	rvise the police de	tectives in the nar	cotics unit.
Objective #2:		ir subordinates	are investigating c	omplaints assigne	d to the unit.	
	RATING O□	E⊠	S□	Ι□	υ□	4 Points
	COMMENT	S: I assign con	nplaints to my det	ectives to follow-u	ip on as we receiv	ed them.
Objective #3:	Conducts follow	-up investigation	ons of crimes, acci	dents and civil dis	turbances.	
•	RATING O□	E	S□	I□	U 🗆	4 Points
	COMMENT	S: I personally	conducts follow-	up on investigation	ns of crimes, accid	lents, and civil disturbances.
Objective #4:5		rdinate staff eng	aged in investigat	ions and assist wh	ere necessary.	
	RATING O□	E	s□	Ι□	U	4 Points
	COMMENT	S: I supervise:	subordinates staffs	to follow-up on i	nvestigations and	assist where necessary.
Objective #5:5		npletion of all wr	itten reports and con	npletes other require	d reports and forms	describing citcumstances of crimes
	RATING O□	E□	S⊠	Ι□	U□	3 Points
		S: I supervise to circumstances		all written reports	and completes oth	er required reports and forms
Objective #6:		r in Charge as n	eeded.		<u>.</u>	
	RATING O□	E⊠	S□	I 🗆	U	4 Points
	COMMENT	S: From time to	o time I serve as C	Officer in Charge a	s needed.	
			·····			

Original: Human Resources

#### **Overall Performance**

**SELF APPRAISAL** 

-14 = 3.6 (Overall Rating: Round rating to one (1) decimal place) Total Points 51 ☐ Outstanding (4.5 - 5.0) ☐ Improvement Needed (1.5 - 2.4) ■ Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory (0 - 1.4) ☐ Successful (2.5 - 3.4) Specific areas of improvement needed: Reviewing of case reports specifically the narrative. Specific goals for improvement: I need to attend an updated English class Training needed to accomplish goals: In service training on report writing. Additional comments: None ACKNOWLEDGMENT: Please acknowledge that this performance appraisal has been reviewed with you by signing your name and recording the date of this review. Signing does not indicate agreement with your performance appraisal. Also indicate whether you intend to submit a written statement or comments in the space provided below. Your statement or comments must be submitted to the Director of Human Resources within ten (10) days after completion of your performance appraisal review. Written Statement/Comments: Yes No 🛛 Employee Signature: SGT- Styles # 656 Date: 3/7/07 Reviewing Supervisor Signature: A Control of the Department Director Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Control of the Signature: A Cont Date: 3 /3 /07 Date: 03,08,07 Department Director Signature:

Original: Human Resources

Rate employee's overall performance:



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Department Director Signature:

Name	Paul Styles #656 Department/Area: Police Division
Positi	ion: Police Sergeant -Administration Report Year: 2006
this red	position description, you will be responsible for accomplishing specific objectives/expectations during eport year. Please note that your annual performance appraisal will be based upon the progress instrated toward accomplishment and actual obtainment of the objectives/expectations defined below (a of six [6] objectives/expectations is required). As required, additional pages may be attached to this
1:	Supervises and coordinates the activities of police officers/detectives in an assigned unit. Conducts briefings, inspects appearance and equipment of subordinates. Relays and explains general and special police orders, instructions, teletypes, special notices and directives.
2:	Ensures that their subordinates are investigating complaints assigned to the unit, addressing in a proactive manner, crimes occurring on CMHA properties. Confers with superior officers regarding unit problems, crime conditions documented, personnel performance and complaints under investigation.
3:	Conducts follow-up investigations of crimes, accidents and civil disturbances. Reviews preliminary investigations conducted by subordinates. Conducts special investigations including accidents and injuries to police officers, the use of firearms and complaints about police personnel. Recommends disciplinary action when necessary.
4:	Supervises subordinate staff engaged in investigations and assists where necessary. Maintains investigative files and statistical reports on unit activities. Advises superior officers' of all ongoing investigations, preparing reports as required by policy and procedure.
5:	Supervises the completion of all written reports and completes other required reports and forms describing circumstances of crimes, accidents, investigations, complaints and other unit activities.
6:	Serves as Officer in Charge (OIC) as needed. Observes, inspects and maintains CMHA property and department equipment. Obtains and maintains firearms and other certifications that are required for this position. Completes supervisory training and obtains additional training relevant to the unit they supervise.
Employe	ee Signature: Poula tyle #656 Date: 01 / 30 / 06
Immedia	ate Supervisor Signature: Date: 01 / 30 / 06

30 31 A 8 C O E F M O P S W S DEPARTMENT YOUCE YEARLY TOTALS
USE REVERSE SIDE
FOR ADDITIONAL NOTES
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M=MILTTARY LEAVE
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B= DOCTOR'S CERT, REQUESTED
C=COMPENSATORY LEAVE
D=DID NOT CALL IN 1ST HR.
E=DOCTOR'S CERT, PRESENTED φ N) 4 7 I DATE OF BIRTH\_ Z 900261 ~ DEC | | | X JUN . SEP CT. -APR NAME 7 <u>></u> N N MAR. 8 MAY NOV. AUG



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

#### CONFIDENTIAL

Name: Paul Styles	Position: Sergeant
Department/Area: Police Department	Last Appraisal Date: 01 / 01 / 06
Type: XXX AnnualMid ProbationOther  Evaluation Period: From _01 / 01 / 06 To _12 / 3	Current Date: 03 / 07 / 07
Instructions: Five (5) Performance Levels and associated ratings definition of each Performance Level is also provided. When appraise Performance Factor and record the associated numeric rating.  Performance Factors and Employee Objectives/Expectation Performance Appraisal.	s have been established for Performance Factors. A general ing an employee, determine the performance level for " each" The COMMENTS: section must be completed for all
PERFORMANO	CE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources Copy: Employee, Supervisor

### PERFORMANCE FACTORS (Eight Performance Factors are to be evaluated)

0 🗆	$\mathbf{E}\square$	S⊠	Ι□	υ□	3 Points
COMMENTS: Sgrand responsibilities,				as demonstrated th	nat he understands his j
	- · ·	<u> </u>			
Dependability: The agency regulations.	e extent to which	n an employee fo	lows attendance	standards, safety	and conduct rules, and
RATING					
0⊠	E□	S□	Ι□	U	5 Points
					llows the Department r
regulations, as well a an on-duty injury sus		le used 7 days of :	sick time at the beg	ginning of the year	which was a "carry-ov
in on daty injury suc	samed in 2005.		· · · · · · · · · · · · · · · · · · ·		
Quality: The accura	acy, thoroughne:	ss and acceptabil	ty of work perfor	med.	
KAIING O□	E□	S⊠	Ι□	U□	_3 Points
-				<del>_</del>	orough and insure that
	quality and effici	iency of work co	npleted in a speci	fied period of tim	ne, e.g. meeting/excee
stablished goals.	quality and effic	iency of work co	npleted in a speci	fied period of tim	ne, e.g. meeting/excee
stablished goals.	quality and effici	iency of work co S⊠	npleted in a speci	fied period of tim U□	ne, e.g. meeting/excee
stablished goals. RATING O	Е□	S⊠	ΙΠ	υ□	
stablished goals.  RATING  O  COMMENTS: Sgt	E□ . Style's insures t	S⊠ hat all of the assig	<b>I</b> □ nments that his un	U□ it receives are com	_3_Points
stablished goals.  RATING O  COMMENTS: Sgt  nitiative: The exte and knowledge, and	E  Style's insures the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of	S⊠ hat all of the assig mployee is a " se	nments that his un	U□ it receives are com	_3_Points
stablished goals.  RATING  O  COMMENTS: Sgt	E  Style's insures the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of	S⊠ hat all of the assig mployee is a " se	nments that his un	U□ it receives are com	_3_Points
stablished goals.  RATING  O  COMMENTS: Sgt  nitiative: The exte and knowledge, and  RATING  O  O	E  nt to which an e suggests better	hat all of the assig	I numents that his under the starter", seeks a shing the job.	U□ it receives are com out new assignme	
established goals.  RATING O  COMMENTS: Sgt  mitiative: The exte and knowledge, and  RATING O  COMMENTS: Sgt  buys on the family es	E  nt to which an e suggests better  E  Styles has used states, as well as i	hat all of the assigemployee is a " se ways of accomplemant of the sources that other the high rises. It	I numents that his under supervisors left to e uses "disguises"	U   out new assignme  U   untouched. His un in order to get as c	
stablished goals.  RATING O  COMMENTS: Sgt  nitiative: The exte nd knowledge, and  RATING O  COMMENTS: Sgt	E  nt to which an e suggests better  E  Styles has used states, as well as i	hat all of the assigemployee is a " se ways of accomplemant of the sources that other the high rises. It	I numents that his under supervisors left to e uses "disguises"	U   out new assignme  U   untouched. His un in order to get as c	
stablished goals.  RATING O  COMMENTS: Sgt  nitiative: The exte nd knowledge, and RATING O  COMMENTS: Sgt  buys on the family es cossible. His unit is	E  nt to which an e suggests better  E  Styles has used states, as well as i always looking for the states.	hat all of the assigemployee is a " se ways of accomplemployee is a becomplemployee is a beco	I I I I I I I I I I I I I I I I I I I	U   out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new a	
stablished goals.  RATING O  COMMENTS: Sgt  nitiative: The exte nd knowledge, and RATING O  COMMENTS: Sgt  uys on the family es ossible. His unit is	E  nt to which an e suggests better  E  Styles has used states, as well as i always looking for the states.	hat all of the assigemployee is a " se ways of accomplemployee is a becomplemployee is a beco	I I I I I I I I I I I I I I I I I I I	U   out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new a	
stablished goals.  RATING O  COMMENTS: Sgt  nitiative: The exte nd knowledge, and RATING O  COMMENTS: Sgt  uys on the family es ossible. His unit is  Communications: Demonstrates the	E  nt to which an e suggests better  E  Styles has used states, as well as i always looking for the states.	hat all of the assigemployee is a " se ways of accomplemployee is a becomplemployee is a beco	I I I I I I I I I I I I I I I I I I I	U   out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new assignment out new a	

Original: Human Resources

0□	E	S 🗆	I	U□	4 Points
COMMENTS: Sg	t. Styles works we	ll with his subord	inates, other offic	ers and supervisor	s, and anyone he comes
contact with on a da	ily basis. He has a	a "laid-back" deme	anor which make	s him relate well t	o others.
				<u> </u>	
Independence: T	The extent of w	ork performed	with little or no	direction/supe	rvision Demonstrat
					rvision. Demonstrat
ability to make de					rvision. Demonstrat
					rvision. Demonstrat
ability to make de					rvision. Demonstrat

Original: Human Resources

### unployee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Onlective #125		numates the activ	mes of police offic	cers/detectives in a	in assigned unit. C	conducts briefings,									
	RATING O□	Е	S⊠	Ι□	U	3 Points									
	COMMENTS: Sgt. Styles directs the actions of his subordinates. He keeps them informed of any Departm changes and provides them with any information pertinent to their mission.														
			, , , , , , , , , , , , , , , , , , ,												
					·										
Objective #2: E	Ensures that their s	subordinates are i	nvestigating comp	plaints assigned to	the unit, addressin	g in a proactive manner,									
	<b>0</b> □	E⊠	S□	I	U	4 Points									
	COMMENTS: Sgt. Styles insures that his subordinates are completing the investigations that they are assigned in a timely manner. When he observes trends occurring on the estates, he directs his units activities to address														
		ner. When he obs	serves trends occui	rring on the estate:	s, he directs his uni	ts activities to address									
	them.					·-									
Objective #3:		p investigations of	of crimes, accident	s and civil disturb	ances. Reviews pr	eliminary investigations									
	RATING O□	Е	S⊠	Ι□	U	3 Points									
	COMMENTS: Sgt. Styles reviews all of the reports and investigations submitted by his subordinates. He also completes any report that is required of him as a supervisor. If one of his subordinates violates departmental rules														
						iolates departmental rules									
	and regulations,	ne recommends i	the discipline with	out input from me											
Objective #4.5	unarvisas subardi	note stoff anaesa	d in investisations	and assists where		ins investigative files									
Objective #4:3	RATING	mate starr engage	u iii iiivestigations	and assists where	necessary. Iviainia	ins investigative files									
	0□	E 🖾	s□	Ι□	U□	4 Points									
					ith the Narcotics U	nit. He keeps me informed									
	in reference to o	n-going investiga	tions and their stat	tus.											
Objective #5: S		pletion of all wri	tten reports and co	mpletes other requ	uired reports and fo	orms describing									
	RATING O□	E	S□	ΙØ	U□	2 Points									
					from him. He als										
			at they are responsed approves are poor			area of reviewing reports.									
Objective #6: S		n Charge (OIC) as	s needed. Observe	es, inspects and ma	intains CMHA pro	perty and department									
	RATING			-											
	0	E	S□	Ι□	U	4 Points									
	COMMENTS: he was scheduled		tained his certifica	ations as required.	He completed all	supervisory training that									
	ne was schedule	u to atteilu.													

Original: Human Resources

### Overall Performance

Rate employee's overall performance:	
Total Points 49 -/- 14 = 3.5 (Overall Rating: Round ra	ating to one (1) decimal place)
☐ Outstanding (4.5 - 5.0) ☐ Improvement ☐ Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactor: ☐ Successful (2.5 - 3.4)	t Needed (1.5 - 2.4) y (0 - 1.4)
Specific areas of improvement needed: Sgt. Styles needs to improve on his written Otherwise, he has proven to be a very effective leader of the Narcotics Unit.	communications, including report review.
Specific goals for improvement: Improve written communications, both content and	d format.
Training needed to accomplish goals: Word computer classes. Continued feedback reports submitted by, Sgt. Styles.	k relating to written reports submitted by, and
Additional comments: Sgt. Styles is an effective leader of the Narcotics Unit. They statistics have improved under his leadership. He has infused a new energy into the under Agency and the Department.	have taken on a revitalized approach and their nit that it was lacking. He is an asset to the
ACKNOWLEDGMENT:	
Please acknowledge that this performance appraisal has been reviewed with you by signi review. Signing does not indicate agreement with your performance appraisal.	ng your name and recording the date of this
Also indicate whether you intend to submit a written statement or comments in the space must be submitted to the <b>Director of Human Resources within ten (10) days</b> after com	provided below. Your statement or comments pletion of your performance appraisal review.
Written Statement/Comments: Yes ☐ No ☒	
Employee Signature:	Date: 03 / 07 / 07  Date: 03 / 07 / 07  Date: 03 / 07 / 07

Original: Human Resources Copy: Employee, Supervisor



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Name:	Paul Styles #656 Department/Area	: Police Division										
Danisia												
	-	ear: 2007										
your po this re demon	ctions: Based upon a review of department and/or area goals osition description, you will be responsible for accomplishin port year. Please note that your annual performance apastrated toward accomplishment and actual obtainment of the f six [6] objectives/expectations is required). As required, theet.	g specific objectives/expectations during praisal will be based upon the progress objectives/expectations defined below (a										
1:	Supervises and coordinates the activities of police officers, briefings, inspects appearance and equipment of subordinates police orders, instructions, teletypes, special notices and dire	s. Relays and explains general and special										
2:	Ensures that their subordinates are investigating complain proactive manner, crimes occurring on CMHA properties. Co problems, crime conditions documented, personnel performance of the conditions documented of the conditions documented.	nfers with superior officers regarding unit										
3:	Conducts follow-up investigations of crimes, accidents and civil disturbances. Reviews preliminary investigations conducted by subordinates. Conducts special investigations including accidents and injuries to police officers, the use of firearms and complaints about police personnel. Recommends disciplinary action when necessary.											
4:	Supervises subordinate staff engaged in investigations a investigative files and statistical reports on unit activities. Investigations, preparing reports as required by policy and provided in the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of	Advises superior officers' of all ongoing										
5:	Supervises the completion of all written reports and complete describing circumstances of crimes, accidents, investigations	pletes other required reports and forms, complaints and other unit activities.										
6:	Serves as Officer in Charge (OIC) as needed. Observes, insidepartment equipment. Obtains and maintains firearms and ot position. Completes supervisory training and obtains addisupervise.	her certifications that are required for this										
Employ	ree Signature: SET: Styles # 656	Date: 03 / 07 / 07										
Immedi	ate Supervisor Signature: It Goung - 626	Date: 03 / 07 / 07										
Denartn	ment Director Signature	Date: / /										

# CMHA POLICE DEPARTMENT

## CAREER COUNSELING

NAN	IE: Paul Styles #656		DATE: March 7, 2007
CUF	RRENT ASSIGNME	NT: Narcotics Unit OIC	W
High Bach	School/GED XX elors Degree orate	Associates Degree Masters Degree	
	ialized Training: T School, PEALS, First	Responder HazMat/WMD/PPF A	wareness, Controlled/ Direct Buys in Drug
	tigations, and Defensive		materious, connected Effect Buys in Diag
1. A Lie	Professionally spe	aking, where would you like t	o be five (5) years from now?
2. Retur	What are your pro		be an instructor in the Basic Police
Acade	emy.		
3. Tuitio	How can CMHA a	essist you in obtaining your pr	rofessional goals?
<b>4.</b>	your current posit	ype of training would you like ion?	to attend that would be beneficial to
	gal Updates		<del></del>
	ditional Instructor Co		
C) Ad	vanced Narcotics Identif	ication Classes	
5.	In the past 12 mon Department, infor	iths, have you been provided v mation on available work-rela	with or seen posted in the Police ted training?
	YES XX	NO	
6.	Currently, do you that could affect ye	have any health issues, person our attendance and/or job per	nal or work-related stress problems formance? If YES, please explain.
	YES	NO <u>XX</u>	
		The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	

### CAREER COUNSELING (continued)

7.	Currently, are there any work-related or personal stress problems that you would like CMHA to offer you assistance with. If YES, please explain.													
	YES	NO <u>xx</u>												
8.	CMHA, would you	prefer going for assistance? Plea	ed problems where, within see explain reason.											
9.			isor about work-related or											
	YES XX	NO												
10.			selor on retainer by CMHA											
	YESXX	NO												
11.														
	Never	Sometimes	Often <u>XX</u>											
12.	Since being employ Administrative Or	ed by CMHA, have you ever beer ler No. 11 - Personnel Policies?	n provided with a copy of											
	YES <u>xx</u>	NO												
Empl	oyee Name and Badge	Paul Styles #656 (PRINT)												
Empl	oyee Signature:	S 67. Style # 68	Date: 07MAR07											
Sometimes   No   No   No														

### CMHA POLICE DEPARTMENT PERFORMANCE APPRAISAL CHECKLIST

EMPLOYEE NAME: Sgt. Paul Styles #656	
SUPERVISOR: Commander William Likes #604	
DATE COMPLETED: 02-20-08	
■ 1. Employee "self-evaluation"	
☐ 2. Previous year Objectives/Expectations Worksheet.	
3. Copy of Employee Attendance Record for previous year	r
4. Current Performance Appraisal	
5. Current year Objectives/Expectations Worksheet	
6. Employee comments and/or written statement regarding Performance Appraisal.	<b>,</b>
7. Career Counseling Form	

# SELF APPRAISAL



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

CONFIDENTIAL	
Name: Paul A. Styles	Position: Sergeant
Department/Area: Police/ Security	Last Appraisal Date: _02 /_15 /_07
Type: X Annual Mid Probation Other Evaluation Period: From 01 / 01 / 07 To 12 / Instructions: Five (5) Performance Levels and associated ratin definition of each Performance Level is also provided. When apprair Performance Factor and record the associated numeric rating Performance Factors and Employee Objectives/Expectation Performance Appraisal.	gs have been established for Performance Factors. A gene ising an employee, determine the performance level for "
PERFORMAN	CE LEVELS
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  E = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their clanned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrate performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistent below standard and expectations for the position are rarel met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.

Original: Human Resources

Conv. Funtaria C

SELF APPRAISAL PERFORMANCE FACTORS (E.g. Performance Factors are to be evaluated) Job Knowledge: The practical/technical skills and information used on the job. The demonstrated ability to execute 1. the duties outlined on the job description. RATING

O □	E□	S⊠	Ι□	υ□	3 Points
COMMENTS: Since information to succession	ce assigned as su	pervisor of the Crithe job.	me Suppression	Unit, I have gained	the necessary knowledge a
Dependability: The agency regulations. RATING	extent to which	an employee fol	lows attendance	standards, safety	and conduct rules, and all
0⊠	E□	S□	I	υ□	5 Points
and conduct rules, and had perfect attendance	a an agency regul	iacions. During the	lepartment I have e year 2007, I wa	e always followed t as late for duty on t	he attendance standards, sa wo occasions, other than tha
Quality: The accurace RATING	cy, thoroughness	s and acceptabilit	y of work perfo	rmed.	
0□	E□	S⊠	Ι□	υ□	3 Points
COMMENTS: I alw	/avs strive to ensi	ure the work I nod	form is secret.		•
their are some days the	bulk of work is	in ahidance their	fore the required	e and thorough. Th	ne work is not hard, howeve
		in actualice, then	rore the required	necessary work is	completed first.
RATING O□	E⊠	s□	ΙΠ	υ□	4_ Points
COMMENTS: Being	g the only superv	isor of the unit the	work load some	times are in abunda	nce. In other words I prior
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	re serie nie nilitei	is Dabei Work are a	ገበጠይደር፤ ඉහළ ድርቋነነበና	Note Teles males -	4
complete and forward i	s also done in a s	pecific time perior	1. This also incl	ude meetings assigt	iments.
Initiative: The extent and knowledge, and su RATING	to which an emp aggests better wa	ployee is a " self ays of accomplisl	starter", seeks ( ling the job.	out new assignmen	nts, expands his or her ski
<b>0</b> □	E⊠	S□	ΙD	υ□	A District
		_	~—		4 Points
COMMENTS: From	time to time I lea	ve the paper work	alone and go ou	t into the field the	
COMMENTS: From developed. This allows	time to time I lea	we the paper work e some of the skill	alone and go ou	t into the field the	
developed. This allows the elements.	time to time I lea	ive the paper work e some of the skil	alone and go ou	t into the field the	
the elements.	Demonstrates th	ne ability to com	alone and go ou ls that I possess,	t into the field with including wearing of	new ideas that I have disguises and blending in w
the elements.  Communications: D Demonstrates the abi	Demonstrates th	ne ability to com	alone and go ou ls that I possess, amunicate in an e verbal and/o	t into the field with including wearing of the field with including wearing of the field with including wearing of the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the field with including the fi	new ideas that I have disguises and blending in weer, both written and verteions.
the elements.  Communications: D Demonstrates the abs RATING O	Demonstrates the ility to underst	ne ability to com	alone and go out is that I possess, amunicate in an everbal and/o	t into the field with including wearing of the effective manner written instruction.	new ideas that I have disguises and blending in w er, both written and vert etions.  4 Points
the elements.  Communications: D Demonstrates the abs RATING O	Demonstrates the ility to understand	ne ability to comtand and execut	alone and go out is that I possess, amunicate in an everbal and/o	t into the field with including wearing of the effective manner written instruction.	new ideas that I have disguises and blending in weer, both written and vertions.

Original: Human Resources

SELF APPRAISAL Interpersonal Relationships: 1 he willingness and demonstrated ability to cooperate, work and effectively communicate with co-workers, supervisors, subordinates and/or outside contacts. **RATING**  $\Box$  $\mathbf{E} \mathbf{X}$  $S \square$ II 🗀  $U\square$ 4 Points COMMENTS: I done believe I have any problems cooperating with anyone in the department, agency, or the general Independence: The extent of work performed with little or no direction/supervision. Demonstrates an ability to make decisions and take ownership of their own job duties. RATING  $0\square$  $\mathbf{E} oldsymbol{oldsymbol{\boxtimes}}$  $S\square$ U  $\Pi$ 4 Points COMMENTS: Under the leadership of my former supervisor I did not need much supervision. I am now demonstrating to

my new supervisor that I can accomplish the same task, making good decisions, and taking ownership of my job duties.

Original: Human Resources

8.

#### 1ployee Objectives/Expectations

### **SELF APPRAISAL**

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #12		coordinates me	activities of police	detectives in an a	assigned unit.	
	RATING O□	E⊠	S□	Ι□	U	4 Points
	COMMENT	rs: On a daily	basis I give assign	ments to my dete	ectives to carry out.	
Objective #2:	Ensures that the	ir subordinates	are investigating co	omplaints assign	ed to the unit.	
	RATING O□	E	S□	I	υ□	4 Points
	COMMENT a timely man	Once my d	etectives are given	an assignments I	follow-up to make	sure its been done fairly and in
Objective #3:	Conducts follow	-up investigati	ons of crimes, accid	lents, and civil d	isturbances.	
		E 🔀	S□	Ι□	U	4 Points
	COMMENT	S: The answer	r to this question we	ould be the same	as the answer I gav	e for question #3.
Objective #4:	Supervises subor	rdinate staff en	gaged in investigati	ons and assists w	here necessary.	
	0□	E 🖾	s□	Ι□	U□	4 Points
	calls when I ar	S: When time m not initially o	allows I assist my out with them.	detectives with as	ssignments that thei	r given. I also respond to their
Objective #5: <u>s</u>	Supervises the co	ompletion of all	written reports and	d completes other	r required reports.	
	RATING O□	E	S□	ΙŪ	υ□	4 Points
	my detectives	S: Unless I am generates.	not at work, I appr	ove the completi	on of all written rep	orts and other paper work that
Objective #6: <u>s</u>	erves as Officer in	n Charge (OIC) a	s needed. Observes,	inspects and maint	ains CMHA property	and department equipment.
	<b>0</b> □	E⊠	S□	I 🗆	U	4 Points
	COMMENTS maintain CMH	From time to A property and	o time I would serv	e as the Officer i	n Charge. I make s	ure I observe, inspects and

Original: Human Resources

Rate employee's overall performance:

Tota	al Points 56	/• 14 = <u>4.0</u> (Overa	ıll Rating: Round rat	ing to one (1) decimal place)
	Outstanding (4.5 - 5. Exceeds Expectations Successful (2.5 - 3.4)		☐ Improvement ☐ Unsatisfactory	Needed (1.5 - 2.4) (0 - 1.4)
Specific area internet and e	s of improvement neede xcel.	d: I could use a little in	nprovement with the Co	mputer system specifically in the area of
Specific goal	s for improvement: The	e goal for this improvem	ent would be better kno	wledge in surfing the system.
	<u> </u>			
Training need	led to accomplish goals	In service training offe	ered by CMHA.	
			<del></del>	
Additional co	mments: I enjoy my job	and the people I work	with and for. The only w	way I would voluntary leave this position
Also indicate w must be submit	ledge that this performanc ag does not indicate agre whether you intend to subr	ement with your perfor nit a written statement or	mance appraisal.  comments in the space	g your name and recording the date of this provided below. Your statement or comments letion of your performance appraisal review.
Reviewing Su	nature: <u>JGT · J</u> pervisor Signature: irector Signature:	LA. Sty Latt Coy Sulit Injer	154656 	Date: 01 / 30 / 08  Date: 02 /21 /08  Date: 2 /25 /08



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Name: Paul Styles #656	Department/Area: Police Division										
Position: Police Sergeant -Administration	Report Year: 2007										
your position description, you will be responsithis report year. Please note that your ann demonstrated toward accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment and accomplishment accomplishment accomplishment and accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment accomplishment	ent and/or area goals established for the above report year and ble for accomplishing specific objectives/expectations during tal performance appraisal will be based upon the progress tal obtainment of the objectives/expectations defined below (a uired). As required, additional pages may be attached to this										
1: Supervises and coordinates the activities briefings, inspects appearance and equipolice orders, instructions, teletypes, s	ies of police officers/detectives in an assigned unit. Conducts pment of subordinates. Relays and explains general and special secial notices and directives.										
proactive manner, crimes occurring on	vestigating complaints assigned to the unit, addressing in a CMHA properties. Confers with superior officers regarding unit I, personnel performance and complaints under investigation.										
investigations conducted by subordin	Conducts follow-up investigations of crimes, accidents and civil disturbances. Reviews preliminary investigations conducted by subordinates. Conducts special investigations including accidents and injuries to police officers, the use of firearms and complaints about police personnel. Recommends										
4: Supervises subordinate staff engage investigative files and statistical report investigations, preparing reports as required.	d in investigations and assists where necessary. Maintains ts on unit activities. Advises superior officers' of all ongoing aired by policy and procedure.										
5: Supervises the completion of all wridescribing circumstances of crimes, acc	ten reports and completes other required reports and forms idents, investigations, complaints and other unit activities.										
department equipment. Obtains and mai	eeded. Observes, inspects and maintains CMHA property and ntains firearms and other certifications that are required for this ing and obtains additional training relevant to the unit they										
Employee Signature: SET: Styles	# 656 Date: 03 / 07 / 07										
Immediate Supervisor Signature: <u>Le Ga</u>	Date: 03 / 07 / 07										
Department Director Signature:	Date: / /										

NAM	ME_STYLES								PAUL ANTHONY  DATE OF HIRE MIDDLE/15/93							DEPARTMENT POLICE BADGE NUMBER 656																								
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# CUYAHOGA METROPOLITAN HOUSING AUTHORITY PERFORMANCE APPRAISAL

#### **CONFIDENTIAL**

Name: Paul Styles #656	Position: Sergeant					
Department/Area: Crime Suppression Unit	Last Appraisal Date: 02 / 15 / 07					
Type: XX AnnualMid ProbationOther  Evaluation Period: From01 _ / _01 _ / _07 _ To01 _ /  Instructions: Five (5) Performance Levels and associated rating definition of each Performance Level is also provided. When apprais Performance Factor and record the associated numeric rating. Performance Factors and Employee Objectives/Expectatio Performance Appraisal.	s have been established for Performance Factors. A general ing an employee, determine the performance level for " each" The COMMENTS: section must be completed for all ns. As required, additional pages may be attached to this					
PERFORMANO	CE LEVELS					
O = Outstanding (5 Points): Performance consistently exceeds the overall requirements of the position. These employees are viewed as role models by the rest of the agency. They set the standard for achievement in their work group. They are innovative in their approach to work and are able to positively influence functions outside their span of control.  EE = Exceeds Expectations (4 Points): Performance is often beyond the level expected for the position. Performance demonstrates a skill level that exceeds that required to fulfill the basic requirements of the position. Employees performing at this level are consistently completing more high quality work than their peers in similar positions.  S = Successful (3 Points): Performance results are meeting the stated objectives of the position. Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames.	I = Improvement Needed (2 Points): Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.  U = Unsatisfactory (1 Point): Performance is consistently below standard and expectations for the position are rarely met. Employees performing at this level require constant oversight and direction in order to approach acceptable performance levels.					

Original: Human Resources

#### PERFORMANCE FACTORS ("ight Performance Factors are to be valuated) Job Knowledge: The practical/technical skills and information used on the job. The demonstrated ability to execute 1. the duties outlined on the job description. **RATING** $o\square$ $\mathbf{E}\Box$ $S \boxtimes$ $\Pi$ $\mathbf{U}\square$ 3 Points COMMENTS: Sergeant Styles has demonstrated that he has the knowledge and skills to execute his job duties. He has a basic understanding of the Policy and Procedures, Rules and Regulations and City and State Laws. Dependability: The extent to which an employee follows attendance standards, safety and conduct rules, and all 2. agency regulations. RATING $0\square$ $\mathbf{E} \boxtimes$ $S\square$ ΙΠ U 4 Points COMMENTS: Sergeant Styles had no sick days in 2007, but was tardy twice. He follows all safety and conduct rules. 3. Quality: The accuracy, thoroughness and acceptability of work performed. RATING $S \boxtimes$ 0 🗆 $\mathbf{E}\Box$ $\mathbf{I} \square$ U 🗆 3 Points **COMMENTS:** Sergeant Styles work is usually completed in a thorough manner. Productivity: The quality and efficiency of work completed in a specified period of time, e.g. meeting/exceeding 4. established goals. RATING $\mathbf{E}\mathbf{X}$ $S\square$ $\mathsf{T}\square$ $0\square$ 4 Points COMMENTS: Sergeant Styles completes all his assignments in a timely manner. He needs to focus on completing assignments with writing documentation. Initiative: The extent to which an employee is a " self starter", seeks out new assignments, expands his or her skills 5. and knowledge, and suggests better ways of accomplishing the job. RATING SX $0\square$ $\mathbf{E}\Box$ T U 🔲 3 Points COMMENTS: Sergeant Styles is a self starter, but needs to break up his officers to handle follow-ups. He looks for betters ways to handle his assignments.

verbal instructions.

**COMMENTS:** Sergeant Styles is an effective communicator. He has demonstrated the ability to execute both written and

Communications: Demonstrates the ability to communicate in an effective manner, both written and verbal.

 $\Pi$ 

Demonstrates the ability to understand and execute verbal and/or written instructions.

 $\mathbf{S} \boxtimes$ 

RATING

 $\mathbf{E}$ 

6.

3 Points

U

0 🗆	E	s 🖾	Ι□	U□	3 Points
	Sergeant Styles worl	cs well with his su	periors, other sup	ervisors, and subor	dinates. He works well v
onici departments	or oamide condens.				
omer departments	or oubled contacts.				
Independence:	The extent of w				rvision. Demonstrate
Independence:					rvision. Demonstrate
Independence:	The extent of w				rvision. Demonstrate
Independence:	The extent of w				rvision. Demonst

Original: Human Resources

#### Employee Objectives/Expectations

Rate employee performance toward accomplishment of the objectives/expectations defined on the attached Employee Objectives/Expectations Worksheet.

Objective #151		rdinates the activi	ties of police offi	cers and non-swor	n officers in an ass	igned area
	RATING O□	E	S□	Ι□	U□	4 Points
	COMMENTS	Sergeant Styles	supervises and co	ordinates all activi	ties with the Crime	e Suppression Unit. He
				ts that require a su		c Supplession Offic. The
						·····
Objective #2: E	nsures that police	presence is visib	le within assigned	CMHA area to se	rve as a deterrent t	o crime
	RATING					
	0□	E□	S⊠	I	U	3 Points
						ealing with high crime
	areas. He condu	icts details to redu	ice criminal activ	ity on CMHA prop	erty.	
Objective #3:	onducts investigation	of crimes, accidents a	nd civil disturbances.	Supports preliminary is	nvestigation conducted	by subordinates
	RATING 0□	E⊠	S	Ι□	U□	4 Points
	00		البيية 13	10	VШ	T Cluts
	COMMENTS:	Sergeant Styles	investigates all in	cidents the comes	to his attention dur	ing his tour of duty. He
				cordance with the		
		e CMHA Police I				
Objective #4: S	upervises subordina	ite staff engaged in	patrol and other act	ivities and assists wh	ere necessary. Main	tains ongoing radio contact
	RATING		a <b>5</b> 7			
	0□	E 🗆	s⊠	I	U 🗆	3 Points
						ssignments and advise
	RCC of their star	tus. He responds	to all broadcast a	ssignments that rec	uire a supervisor.	
Objective #5: so		on of all written crime	e reports and complete	other required reports	a forms describing circu	umstances of crimes
	RATING O□	E	S⊠	rΠ	υ□	3 Points
	<b>U</b> L	E L.	5 <u>0</u>	1	0	5 roints
	COMMENTS:	Sergeant Styles	reviews reports as	nd makes sure that	all reports are com	pleted.
Objective #6: se		irge of Headquarters a	s needed. Observes, i	inspects and maintains	CMHA Property and D	epartment Equipment
	RATING	n (5)	6.		V - 400mg	4 20 1 4
	<b>0</b> □	EX	S□	I 🗆	υ□	4 Points
	COMMENTS.	Carganut Chiles	nompleten ell ed	injopativa dutica -	nd carves as OIO -	f handauartara when
		rrent with all cert		minoriative duties a	ilu serves as OIC 0	f headquarters when
	moded. He is th	arone with all cell	arivations.		<u> </u>	

Original: Human Resources Copy: Employee, Supervisor

#### **Overall Performance**

Rate employee's overall performance:	
Total Points 47 - 14 = 3.4 (Overall Rating: Round rat	ing to one (1) decimal place)
☐ Outstanding (4.5 - 5.0) ☐ Improvement I ☐ Exceeds Expectations (3.5 - 4.4) ☐ Unsatisfactory ☐ Successful (2.5 - 3.4)	
Specific areas of improvement needed: No specific are of improvement needed.	
Specific goals for improvement: None	
Training needed to accomplish goals: Advanced supervisor and administrative class	es.
Additional comments:	
ACKNOWLEDGMENT:	
Please acknowledge that this performance appraisal has been reviewed with you by signing review. Signing does not indicate agreement with your performance appraisal.	g your name and recording the date of this
Also indicate whether you intend to submit a written statement or comments in the space p must be submitted to the Director of Human Resources within ten (10) days after comp	
Written Statement/Comments: Yes  No  \	
Employee Signature: 156 Paul A Styles # (56) Reviewing Supervisor Signature: 15604	Date: 62/21/08
Reviewing Supervisor Signature:	Date: 02 12 1 1 017
Department Director Signature:	Date: 2 / 25 / 08

Original: Human Resources Copy: Employee, Supervisor



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY EMPLOYEE OBJECTIVES/EXPECTATIONS WORKSHEET

#### CONFIDENTIAL

Name	; Paul A. Styles	Department/Area: Police Division
Positi	on: Police Sergeant Crime Suppression Unit	Report Year: 2008
your p this re demon	position description, you will be responsible for acceport year. Please note that your annual perfornstrated toward accomplishment and actual obtain of six [6] objectives/expectations is required). As	r area goals established for the above report year and ecomplishing specific objectives/expectations during mance appraisal will be based upon the progress ment of the objectives/expectations defined below (a required, additional pages may be attached to this
I-	area. Conducts roll calls, inspects appearance	lice officers and non-sworn officers in an assigned and equipment of subordinates. Relays and ructions, teletypes, special notices and directives.
2-	Ensures that police presence is visible within a crime. Confers with superior officers regarding performance and complaints.	
3-	Conducts investigations of crimes, accidents a investigations conducted by subordinates. Con and injuries to police officers, the use of firear Recommends disciplinary action where necessary	ducts special investigations including accidents ns and complaints about police personnel.
4-	Supervises subordinate staff engaged in patrol Maintains ongoing radio contact according to eassignments when required.	and other activities and assists where necessary. stablished procedures, responding to radio
5-		reports and completes other required reports and dents, investigations, complaints and other police s, daily rosters, leave requests and any other
6-	Serves as Officer in Charge (OIC) of headquar CMHA property and department equipment. O certifications that are required for this position.	ters as needed. Observes, inspects and maintains btains and maintains firearms and other
Emplo	oyee Signature: SGT- Jun 4- St	The # 15 Date: 01 / 30 / 08
Immed	diate Supervisor Signature:	Date: 02 /31 / 08
Depart	tment Director Signature:	Date: 2 /25 / 08

# CMHA POLICE DEPARTMENT CAREER COUNSELING

NAM	IE: Paul A. Styles		DATE: 28JAN08
CUR	RENT ASSIGNMEN	T: Sergeant Crime Suppress	ion Unit
High	sation: School/GED X elors Degree orate	Associates Degree Masters Degree	_
	alized Training:	WAS D. G	
Contro	olled Buy/ Direct Buy Ce	ertified, Police Executive Adm	anadknox Expandable Baton Instructor, ninistrative Leadership School, and High Risk
Searcl	h Warrant Execution Cert	ified.	
1. Five y	ears from now I would li		ke to be five (5) years from now?  mmander, if not I would like to be in my current
positio	30.	1	
<b>2.</b> My pr	What are your properties of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the cont		education in Criminal Justice.
3. Fuitio	How can CMHA as	ssist you in obtaining your	professional goals?
4.	If possible, what ty your current position		ike to attend that would be beneficial to
	·	<del></del>	
	arch and Seizure	JAJ DEATC	<del> </del>
L) Nai	rcotics Field Operation ar	Id Advance PEALS	
5.	In the past 12 mont Department, inform	ths, have you been provide nation on available work-r	ed with or seen posted in the Police elated training?
	YES X	NO	
5.	Currently, do you h that could affect yo	nave any health issues, per ur attendance and/or job	sonal or work-related stress problems performance? If YES, please explain.
	YES	NO <u>X</u>	
		***	

### CAREER COUNSELING (continued)

7.	Currently, are there any work-related or personal stress problems that you would like CMHA to offer you assistance with. If YES, please explain.									
	YES	NO <u>x</u>								
8. My in	CMHA, would you	sonal or work-related stress relate prefer going for assistance? Plea et step in the chain of command.								
9,	If needed, would yo personal stress pro	ou talk to your immediate supervi blems?	isor about work-related or							
	YES X	NO								
10.		ou talk to a Licensed Family Cour or personal stress problems?	nselor on retainer by CMHA							
	YES <u>x</u>	NO								
11.		hs, <u>approximately</u> how often hav n or discussions with your immed								
	Never	Sometimes	Often <u>X</u>							
12.	Since being employ Administrative Orc	ed by CMHA, have you ever beer ler No. 11 - Personnel Policies?	n provided with a copy of							
	YES <u>x</u>	NO								
 Empl	oyee Name and Badge									
Empl	oyee Signature: <u>£</u>	T. Prust . Staffer	#656 Date: 28JAN08							
Super	visor Signature:	A41604	Date: <u>3-2/-08</u>							



Knowledge of Laws and Ordinances

Identifies and Reports Hazards

# CMHA PD PERFORMANCE EVALUATION



	_		_									_		_			•	Viennioso
Styles				F	)			656		Burdyshaw			Т			64	ი	in the
Member's Last Name								Rated by Last Nan				10.		Badge #				
Sergeant					Second Platoon					24N	IAR10				-			
Position		•			Assignment						Date							
RATING INSTRUCTIONS the N/A Box if the evaluation Unacceptable performance	on de	oes 1	e me not a	mb ppl	y to	a m	embe	er's ass	signme	ence to the scale belont. nce - 3, 4 & 5		heck iperi						
SECTION I- ATTITUDE																		24
	T	2	3	4	5	6	7	N/A	П			2	3	4	5	6	7	N/A
Attitude Toward Work					XX	Г			Accep	ts Additional Duties			+-	+-	XX		<del>                                     </del>	3 . X
Attitude Toward Public	+	_		$\vdash$	XX			<del>                                     </del>	Exhib	its Proper Grooming		+	+	+-	XX			1.10
Reports To Work On Time	1		_		1		XX		<del></del>	Appearance			+	┼-	XX		-	7.4100 90 154
Reports Off As Required	T	_	1	Н	XX		-		<u> </u>	ous With Citizens		+	╫	╫	XX		700	200 9820 88
Call off/ Sick time usage	<del>                                     </del>	+	1	_	701	-	XX		Courte	ous With Other Members	_	+-	┿┈	+	XX		200	277
Follows Orders	⇈	<del>                                     </del>	XX				72.			ous With Other Employees	$\vdash$	+-	+-	-	XX		<del>  .</del>	in designer or
Obeys Rules and Regulations	<del>                                     </del>	<del> </del>	XX	$\vdash$	<del>                                     </del>	_			<u> </u>	tion With Other Ethnic Grou	ıps	+	+	+	+		-	N N
Supports/ Complies With Department	╆	15	, AA	-		$\vdash$		<del>                                     </del>	1	tes CMHA / Community	+	+	┼	$\vdash$	XX		-	
Goals	<del> </del>	↓		_	XX				Partne	rship			Ш.		XX			
Accepts Constructive Criticism	ـــــ	ــــــــــــــــــــــــــــــــــــــ		<u> </u>		XX		<u> </u>	Care o	f Vehicles and Equipment					XX			ork.
Self Motivation				<u> </u>		XX			Teamv	ork: Works Well With Othe	rs				XX			
SECTION II: QUALITY OF	WO	RK 2	3	4	5	6	7	N/A	Comm	unication	1	2	3	4	5	6	7	N/A
Organization					I		_											and analysis
		$\vdash\vdash$	$\longrightarrow$		XX	<u> </u>				mmunicates effectively		ļ	彩	Ш	XX	٠.	.,-	
Completeness		$\vdash \vdash$			XX	<u> </u>	Ш			s Proper Diction					XX		Ì	1:4242
Legible		Ш			XX					ntrols Radio Traffic			Ш		XX			
Proper Grammar					XX				Mo	nitors Security Systems			LI		XX		12	
ECTION III: PERFORMAN	CE											-					8	
<u>.</u>	1	2	3	4	5	6	7	N/A			1	2	3	4	5	6	7	- N/A
Reports Arrival and Completion Time				ХX					MVA	Record				XX	$  \neg  $		+3	
Responds to / Dispatches assignments				77					Driving	g Ability		_	厂		Н			
in timely manner Investigative /Interviewing Ability	<del> </del>	├		XX					Attend	s Court When Subpoenaed	$\rightarrow$	-	—	XX	Ш			
Promptness of Required Reports	├	<del> </del>	$\vdash$	XX	Н					s Court when Subpoenaed		+	—	XX	$\vdash \downarrow$			
Ability to Multi-Task	<del> </del>	—	-	XX	$\vdash\vdash$	$\vdash$					<u>`</u>	$\bot$	<del> </del>	XX	$\sqcup \downarrow$			
Problem Solving Ability		_	_	XX	Н	$\Box$				Deadlines	-		-	XX	$\sqcup \downarrow$			
Arrests	$\vdash$	$\vdash$	├─┤	XX					<u> </u>	unity Relations Skills		$\bot$	igspace	XX	$\sqcup$	ļ		
(Consistent with Platoon Average)								NA	MMCs (Consis	stent with Platoon Average)	_						-	NÄ
UTTs (Consistent with Platoon Average)								NA	PINs				П		$\Box$	_	- 22	10.100.00
Knowledge of Policy and Procedures	$\vdash\vdash$	$\vdash\vdash$		VV	$\vdash$	-		M		tent with Platoon Average)	ms	+	┞—┦		$\rightarrow$	_	12	NA

Use of Computer

Maintains Positive Relationships

	1	T 2	3	] 4	5	6	7	N/A	I	Ti	1 2	3	1 4	5	6	7	N/A
Promptness of Required Reports	7/1	╁	十	xx		$\vdash$			Knowledge of Policy and Procedures	+	╀	ļ -	XX	<u> </u>	۳	<u> </u>	1000
Maintains High-quality Case Files	1	_		XX		-			Cultivates Informants	╁┈	╫	$\vdash$	$\Lambda\Lambda$	┝	-		NA
Search Warrant Completeness	╁		┼┈	1		┝~		NA	Investigates Cases in Timely Manner	┼~	$\vdash$		XX				INA
Ability to Solve Assigned Cases		†	$\vdash$	xx				<del></del>	Prosecutor Relationships	╫	$\vdash$	-	XX	-		<del> </del> -	911
Creativity in Assignment Handling	<del>                                     </del>		┢	XX			-		Knowledge of Laws and Ordinances	+	-	┝	XX	-		-	2827
Keep Supervisors Informed of Matters				xx	_				Investigative Clearance Rate	$\dagger$	_		XX			-	
Problem Solving Ability				ХX					Community Relations Skills	<del>                                     </del>	$\vdash$		XX			25	****
Attends Court when Subpoenaed				ХX		_			Grand Jury Packages	1-		_	1	_			NA
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s		1															
	-		$\vdash$	XX		Н	<del>  -</del>		Use of Computer	<del>                                     </del>			XX				001122
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOR	RS			•					Use of Computer  Escalates Critical Issues Appropriately				XX XX				200
Interview Skills Ability to Multi-Task	RS	2	3	ХX	5	6	7	N/A	<u> </u>	1	2	3	-	5	6	7	man and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOR	RS	2	3	XX	5	6	7	N/A	<u> </u>	1	2		-	$\rightarrow$	6	7	man and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOR  Moniturs Performance of Members	RS	2	3	XX XX	5	6	7	N/A	Escalates Critical Issues Appropriately	1	2		-	XX	6	7	man and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOR  Monitors Performance of Members  Timely Completion of Assignments	RS	2	3	XX XX	5	6	7	N/A	Escalates Critical Issues Appropriately  Promotes Departmental Goals	1	2	3	<b>XX</b>	$\rightarrow$	6	7	man and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOF  Monitors Performance of Members  Firmely Completion of Assignments Discovers Employee Errors	RS I	2	3	XX XX 4 XX XX	5	6	7	N/A	Escalates Critical Issues Appropriately  Promotes Departmental Goals  Monitors Safety of Members	1	2	3	XX 4 XX	XX	6	7	man and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOR  Monitors Performance of Members  Timely Completion of Assignments  Discovers Employee Errors  Offers Constructive Criticism	RS	2	3	XX XX 4 XX XX XX	5	6	7	N/A	Escalates Critical Issues Appropriately  Promotes Departmental Goals  Monitors Safety of Members  Monitors Use of Overtime	1	2	3	4 XX XX	XX	6	7	and the second
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOR  Monitors Performance of Members  Timely Completion of Assignments Discovers Employee Errors  Offers Constructive Criticism  Recommends Appropriate Discipline	SS I	2	3	AXX XXX XXX XXX XXX	5	6	7	N/A	Escalates Critical Issues Appropriately  Promotes Departmental Goals  Monitors Safety of Members  Monitors Use of Overtime  Effectively Assigns Members	1	2	3	4 XX XX XX	XX	6	7	POR POR POR POR POR POR POR POR POR POR
Interview Skills Ability to Multi-Task  ECTION V- SUPERVISOF  Monitors Performance of Members  Timely Completion of Assignments Discovers Employee Errors  Offers Constructive Criticism  Recommends Appropriate Discipline Accepts and Assumes Responsibility Delegates Authority Appropriately	RS	2	3	XX XX XX XX XX XX XX	5	6	7	N/A	Promotes Departmental Goals Monitors Safety of Members Monitors Use of Overtime Effectively Assigns Members Effectively Allocates Resources	1	2	3	4 XX XX XX XX	XX	6	7	N/A
Interview Skills Ability to Multi-Task	RS I	2	3	XXX XXX XXX XXX XXX XXX XXX	5 XX	6	7	N/A	Promotes Departmental Goals Monitors Safety of Members Monitors Use of Overtime Effectively Assigns Members Effectively Allocates Resources Knowledge of Policy and Procedures	1	2	3	4 XX XX XX	XX	6	7	POR POR POR POR POR POR POR POR POR POR

AREAS OF IMPROVEMENT NEEDED: Sgt. Styles has proven he is an effective leader and has the trust of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contr	officers he
supervises. I see no areas of improvement at this time needed.	23

GOALS FOR	NEXT	RATING	PERIOD:	None at this	time.
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TRAINING NEEDS TO ACCOMPLISH GOALS: None at this time.

COMMENTS: Sgt. Styles received verbal counseling for failing to obey an order in not notifying his personnel of SARA Meetings. Sgt. Styles was never late for duty nor did he call off sick. He is one of the most dependable supervisors this agency has. He is respected and always willing to help those that need it. He is very much an asset to our agency.

	an agreement of the second
MEMBER JGT. Door A. Stop # LSC	DATE: 2 Ymurio
SUPERVISOR LA COMPS Allow	DATE: 24MARIO
COMMANDER STATE OF	DATE: 3-24-10
DEPUTY CHIEF MANN \$602	DATE: 3-25-10
CHIEF Cheling of gold Chef	DATE: 4-7-10

# Cuyahoga Letropolitan Housing Authority lice Department PERFORMANCE EVALUATION

1	Styles	_	P	658	Homeric	k		D	63	86
## ASTING INSTRUCTIONS: Rate the member's performance in reference to the scale below by checking a rating value. Check the N/A Box if the evaluation does not apply to a member's assignment.  Unacceptable performance = 1 & 2	Member's Last Name		First Initial	Badge #	Rated by I	Last Name	F	First Initia	l Ba	dge #
RATING INSTRUCTIONS: Rate the member's performance in reference to the scale below by checking a rating value. Check the N/A Box if the evaluation does not apply to a member's assignment.  Unacceptable performance = 1 & 2  Acceptable performance = 3, 4 & 5  Superior performance = 6 & 7  SECTION I: ATTITUDE   Attitude Toward Work  Attitude Toward Work  Attitude Toward Public  Reports To Work On Time  Reports Off As Required  Reports Off As Required  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Members  Courteous With Other Ethnic Groups  Support/Complies With Department  Coals  Accepts Constructive Criticism  Self Motivation  Teamwork: Works Well With Others  SECTION II: QUALITY OF WORK   Reports  Communicates efficively  Compliations  Corporations  Communicates efficively  Compliations  Communicates efficively  Compliations  Communicates efficively  Compliations  SECTION III: PERFORMANCE  Reports Arrival and Completion Time  Reports Arrival and Completion Time  Reports Courteous With Other Scaling  Anders Security Systems  SECTION III: PERFORMANCE  Reports Arrival and Completion Time  Reports Arrival and Com			Complai			2/22/2	2011			
to the scale below by checking a rating value. Check the N/A Box if the evaluation does not apply to a member's assignment.  Unacceptable performance = 1 & 2	Position			Assign	ment			Date		
to the scale below by checking a rating value. Check the N/A Box if the evaluation does not apply to a member's assignment.  Unacceptable performance = 1 & 2  Acceptable performance = 3, 4 & 5  Superior performance = 6 & 7  SECTION I: ATTITUDE    1 2 3 4 5 6 7 N/A							START		END	
1	• -	_		N/A Box	if the		1/1/201	10	12/31/201	10
1	Unacceptable performance = 1 &	& 2	Accepta	able perfor	mance = $3, 4 \&$	: 5	Superior p	erformai	nce = 6 &	7
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Communication   Communicates effectively   Communication   Completeness   Communicates effectively   Communicates   Co	Attitude Toward Work  Attitude Toward Public  Reports To Work On Time  Reports Off As Required  Call off / Sick time usage  Follows Orders  Obeys Rules and Regulations  Supports/ Complies With Department  Goals  Accepts Constructive Criticism  Self Motivation			Ac	hibits Proper Groomican Appearance urteous With Citizens urteous With Other Murteous With Other E eraction With Other E omotes CMHA / Com re of Vehicles and Eq	ng Sembers Employees Ethnic Groups Emunity Partnersh Juipment				
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# Cuyahog: 1etropolitan Housing Authorit olice Department PERFORMANCE EVALUATION

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SECTION III: PER	FORMANCE, c 'nued	4	
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	Members Promote Monitor Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monitor Promote Monito	s Departmental Goals s Safety of Members s Use of Overtime ely Assigns Members ely Allocates Resources es Authority Appropriately s Performance of Members	2 3 4 5 6 7 N/A
Sgt. Styles needs	to continue to monitor all investigations to assure the be imposed on any member that were with their cor	at we stay within the time line	so that if
ΓRAINING NEEDS  COMMENTS  Sgt. Styles has imp	T RATING PERIOD  TO ACOMPLISH GOALS  Toved in the quaility of work Sgt Styles does take or roved on the turn around of time sensitive assignment	n additional responsibility wit	h no reservations
MEMBER	SG / Jan / A. Sty + 1	'S DATE	22 FEB12
SUPERVISOR	Half 117	DATE	22 FEBIL
COMMANDER	fonds of the	DATE	
DEPUTY CHIEF		DATE	:
СНІЕБ	de a briler	DATE	2/26/2012

# Cuyahog Metropolitan Housing Authorit Police Department PERFORMANCE EVALUATION

Styles	Р	656	Burdysh	aw			Т		640
Member's Last Name	First Initial	Badge	# Rated by	Last Name		Fi	rst Init	ial	Badge #
Sergeant	CIU			2/25/	2013				
Position		Assign	ment			-	Date		
RATING INSTRUCTIONS: Rate the	member's perforr	nance in re	eference					·	
to the scale below by checking a rating	g value. Check th			REVIEW	START			END	
evaluation does not apply to a membe	r's assignment.			PERIOD	0	1/01/12	?	12/3	1/2012
Unacceptable performance = 1 & 2	Accept	able perfo	rmance = 3, 4 &	2.5	Supe	rior pe	erform	ance =	6&7
SECTION I: ATTITUDE									
1 2	3 4 5 6	7 N/A		<u> </u>	1	2 3	3 4	5 6	7 N/A
Attitude Toward Work		A	ccepts Additional Dut	ies	表表	33 ] 2	3 74		
Attitude Toward Public		Tel-6 300756	chibits Proper Groomi	ing	Attack				
Reports To Work On Time		-70	ean Appearance		差數		1 美国		
Reports Off As Required  Call off / Sick time usage			ourteous With Citizen	STREET, STANK STORY CO., NO.	9000				
Call off / Sick time usage		1000	ourteous With Other N	reastrement and the soul	M. H.				
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Goals		⊥ L Pa	rtnership			$\sqcup \sqcup$	١Ц		
Accepts Constructive Criticism		100	are of Vehicles and Ec	The second second		強差的			
Self Motivation			amwork: Works Well	With Others			J		
SECTION II: QUALITY OF WORK									
1 2	3 4 5 6	7 N/A			1	2 3	4	5 6	7 N/A
Reports			Communication						
Organization		7 2 1 2	Communicates effe	ectively		有多数	Q 25 00 00 00 00 00 00 00 00 00 00 00 00 00		· 经高品。
Completeness			Uses Proper Dictio	ກ				$\overline{\boxtimes}$	
Legible		製業園間	Controls Radio Tra	iffic		塞音题	7 Sept. 10		重量
Proper Grammar			Monitors Security	Systems					
SECTION III: PERFORMANCE									
1 2	3 4 5 6	7 N/A	27 12/102 05==		ı	2 3	4	5 6	7 N/A
Reports Arrival and Completion Time		] 🛛 M	IVA Record		1 選	學養監	27 2		1 基 4 2 2
Responds to / Dispatches assignments in timely manner			riving Ability					$\nabla \Box$	
Investigative/Interviewing Ability		200 0000	ttends Court When Su	ihnoensed		19 2 2			
Promptness of Required Reports			reativity in Handling	THE RESERVE THE PROPERTY OF THE PARTY OF THE			H		31 35 WE
Ability to Multi-Task	HHMHH	37.3	leets Deadlines		K 10 1	33 8 00			<b>西欧翅</b> 鱼及
Problem Solving Ability	HHAH	7000	ommunity Relations S	Skills		340 (3) (400		식님	\$1 DAT \$160 MAY 500
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(Consistent with Platoon Average)			INs Consistent with Platoo	n Average)					
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Knowledge of Laws and Ordinances			se of Computer	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Πi	٦Ħ	Πř	<del>d</del> H	3 145
Identifies and Reports Hazards		ППм	laintains Positive Rela	tionships	<b>養康</b>	遊童家		7 🖂	

SECTION III: PERFO	ORMANCE,	vtinued				(							
Maintains High-quality Case Search Warrant Completeness Creativity in Assignment Han Escalates Critical Issues Appr Keep Supervisors Informed of	dling   ropriately   rof Matters   romanical control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control control c	2 3 4		7 N/A	Cultivates Investigates Prosecutor Grand Jury	s Cases in Tir Relationships			2   [ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	3 4	5 6	7	N/A
SECTION IV: SUPE	RVISORS											_	
Monitors Performance of Mer Timely Completion of Assign Discovers Employee Errors Offers Constructive Criticism Recommends Appropriate Dis Accepts and Assumes Respon Provides Leadership	scipline sibility			7 N/A	Promotes D Monitors Sa Monitors Us Effectively Effectively Delegates A	epartmental of fety of Membrese of Overtin Assigns Mem Allocates Res authority App performance of	bers ne bers cources ropriately					7	N/A
AREAS OF IMPROV  The only area of improvements			is investi	gations de	o not get b	ehind and	monitor	the due	dates				
	10/2004												
GOALS FOR NEXT I Keep track of due dat  TRAINING NEEDS T Any form of Complai  COMMENTS Sgt. Styles is a very p relationships with bot orders and knowledge	CO ACOMPI	LISH GOA	LS ng. Also superviso ents. He	attending r. He alw leads by e	PELC or yays goes a	ibove and	beyond h	is dutie	s cult	ivating	positi o follo	ve	
MEMDED+		1 /	·		<del>-</del>								
MEMBER*	J'G7-	JOHN A	1. St					DATE	6	25F	es,	13	
SUPERVISOR	18	( D	M	wi				DATE		25F6 2-5	25-1	3	
COMMANDER	1							DATE		2-25-			
DEPUTY CHIEF	Cin	AA	Tore	Les				DATE	: 2	2 - 2	25-	13	<sup>'</sup>
CHIEF		hills	- And	ly				DATE		2 - 7 2/25/	12013	3	
* Signature is only as	n acknowledg	ment of rece	eipt.	0	3								

Appendix B (Ch. 20.1) Revised 1/27/2012

# Cuyanoga Metropolitan Housing Authority Employee Performance Appraisal

Employee Name:	Paul Styles	Last Four Digits of Social: 7073	
Employee Title:	Police Sergeant	Department:	
Supervisor Name:	Thomas M. Burdyshaw	Review Date:	
Evaluation Period: From	01/01/13 12/31/ To 13	Non- Supervisory Supervisory	Union

### Instructions:

The Employee Performance Appraisal is a set time the employee and supervisor plan together to build on strengths and develop those areas needing improvement. Objectives for this process include:

Restate expectations about job responsibilities and performance standards

Evaluate job performance

Discuss future development opportunities and relate them to CMHA's needs.

Assess performance with 12 performance factors.

The general definition of each Performance Level is provided below. The Performance Levels are associated with the employee's current job responsibilities and have been established with 12 overall Agency Performance Factors that relate to the employee's daily job responsibilities. When appraising an employee determine the Performance Level for each Performance Factor. **Comment are required.** If necessary, additional pages may be attached to this Performance Appraisal.

Performance Levels:	
Exceeds Expectations	Performance consistently exceeded expectations in all essential areas of responsibility and the quality of work overall is excellent. Performance demonstrates a skill level that exceeds the basic requirements of the position. Employees are viewed as role models by the rest of the Agency. They are innovative in their approach to work and are able to positively influence functions outside of their span of control.
Meets Expectations	Performance results are meeting the stated objectives of the position.  Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames. Meets the expected levels of performance established by the supervisor.
Improvement Needed	Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant amounts of coaching and direction to achieve and maintain acceptable performance levels.

# m CMHA

# Employee Performance Appraisal – Supervisory

POLICE

Name and

Badge# Paul Styles 656

Date 2/22/14

## **PERFORMANCE FACTORS**

# Leadership

Supports the development of CMHA's vision, mission and departmental goals; provides clear direction and priorities; steps up to address difficult issues; demonstrates high standards of integrity engages staff and supports staff development. Monitors the performance of members and delegates authority properly.

- Exceeds Expectations
- ← Meets Expectations
- C Needs Improvement

Sgt. Styles has a high level of integrity. He leads by example, and will not tell someone to do something he would not do himself. He supports the goals of the department and its members. In his role in the Complaint Investigation Unit he tracks the agency discipline and sends out notification as to members status.

# Judgment/Decision Making

Shows good judgment and decisiveness; acts independently (and appropriately) when faced with Escalates critical issues; keeps supervisors informed of matters. Recommends appropriate discipl monitors the use of overtime; effectively assigns and allocates members. Able to efficiently mult projects and assignments. Demonstrates proper judgment and control while operating agency ve equipment.

- **C** Exceeds Expectations
- Meets Expectations
- ← Needs Improvement

Sgt. Styles work independently conducting complaint investigations. He is able to make sound decisions and escalates critical issues. He recommends appropriate discipline should an investigation lead to that. He needs to focus on organization and time management when handling multiple investigations.

# **Problem Solving**

Develops creative and logical approaches when solving problems and addressing issues. Provide: alternatives. Identifies and reports hazards. Is creative in approach to handle an assignment.

- **C** Exceeds Expectations
- Meets Expectations
- Needs Improvement

Comments:

Sgt. Styles is creative in his approach to assignments. He is logical and able to address those issues that come up.

# **Accountability**

Proactively meets all established deadlines, reporting requirements, and established goals and objectives. Takes ownership and accepts responsibility for any mistakes or errors done within the area they are responsible for. Discovers employee errors. Attends court when subpoenaed.

- **C** Exceeds Expectations
- Meets Expectations
- C Needs Improvement

Comments:

Sgt. Styles takes ownership and accepts responsibility for mistakes that he makes. He needs to focus on deadlines to ensure investigations are completed in timely manner.

# Interpersonal Relationships and Communication

The willingness and demonstrated ability to cooperate, work, and maintain effective courteous communication with co-workers, supervisors, subordinates and members of the public. Encourages the open expression of ideas and opinions. Provides clear, concise information and direction to others in verbal, written, electronic, and other communication formats.

- **○** Exceeds Expectations
- Meets Expectations
- C Needs Improvement

Sgt. Styles gets along with all members of the department and the residents. He needs to focus on being clear and concise when presenting his investigations or representing the department at hearing.

# Job Knowledge and Skills

The practical/technical skills and information used on the job. The demonstrated ability to execute the duties outlined on the job description. Demonstrates knowledge of laws, ordinances and written directives. Communicates effectively using proper diction and controls radio communications. Dispatches, responds to assignments in a timely manner announcing arrival and completion times. Maintains effective monitoring of emergency and security systems. Demonstrates ability to conduct effective investigations and interviews. Maintains quality investigative files; demonstrates ability to effectively solve cases.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

Sgt. Styles is well versed in his role as a supervisor. He knows the laws and demonstrates his ability to effectively lead others. He works multiple investigations and conducts multiple interviews in the course of those investigations.

monte.

# Dependability

The extent to which an employee follows standards, meets the time and attendance expectatio counted upon to complete work assignments. Follows orders, complies with attendance policie obeys written directives.

C Exceeds Expectations

Meets Expectations

C Needs Improvement

Sgt. Styles is a dedicated employee who does not call off ill. He is always punctual to work. He does need to focus on time management of his investigations. To ensure they are completed on time.

## **Work Ethic**

A set of positive values that the employee demonstrates in their work habits, including a positive attitude, punctuality, completing a task on time, and producing high quality work. Adapts to new situations in a positive manner. The extent to which an employee is a "self-starter;" seeks out new assignments, expands his/her skills and knowledge, and suggests better ways of accomplishing the job. Accepts constructive criticism.

C Exceeds Expectations

Meets Expectations

Needs Improvement

Sgt. Styles has an impeccable work ethic as to being positive and a self-starter. He is able to accept constructive criticism and learn from it. He needs to focus on completing his task on time.

### **Customer Service**

Treats all customers/coworkers/supervisors with respect. Responds to needs within agreed timeframes. Address conflicts and problem situations with patience and tact. Maintains positive relations with stakeholders and members of the community.

Exceeds Expectations

← Meets Expectations

• Needs Improvement

Comments:

Sgt. Styles treats all those he comes in contact with, with respect. He is able to address conflicts with patience. He has positive relationships with all of those he works with.

# Quality of Work and Productivity

Work output matches the expectations established. Employee completes all assignments and submits reports in an organized, legible manner using proper grammar. Employee consistently meets deadlines. Resilient when responding to situations that are not going well; takes initiative to make improvements. Productive on assigned tasks and goals. Exhibits proper grooming and maintains a clean personal appearance. Demonstrates proper care of assigned equipment.

C Exceeds Expectations

Meets Expectations

C Needs Improvement

Sgt. Styles handles multiple investigations and need to work on his time management of those investigations. His investigations once complete are well organized and legible.

# Responsiveness to Co-Workers

Facilitates team in discussions in collaborative situations. Demonstrates consideration for other supervisors/ co-workers by arriving on-time for appointments. Oversees work time assignments, making alternative arrangements to cover work duties and planned absences and performing extra duties when asked. Maintains positive and courteous relationships with co-workers.

Exceeds Expectations

C Needs Improvement

Comments:

Sgt. Styles is always there when you need him. He will assist anyone who needs help without hesitation. He will take on any assignment given and never complains about it.

# Teamwork

Creates strong morale/spirit in his/her team. Shares wins and successes; fosters open dialogue; lets people finish and responsible for their work; creates a feeling of belonging. Demonstrates the ability to work well with others. Monitors the performance of members and ensures safety in the work environment.

Exceeds Expectations

Meets Expectations

Needs Improvement

nt

Sgt. Styles is the example that everyone should be given as to how a team member should be. He is always positive and creates an atmosphere that causes others to want to be part of the team. He will sacrifice his own time lines to help others with theirs.



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal Overall Performance Assessment

Key Strengths:	
Dependable	
Approachable	
Dedicated	
Specific areas where improvement is ne	adad:
He needs to stay organized at all times.	deadlines are a key part of the investigations he conducts.
	he presentation of charges during disciplinary hearing, even
conducting a mock prior to the hearing.	the presentation of charges during disciplinary hearing, even
	İ
Goals for the upcoming year (at least 3):	
Work on your time management with investigations	
Keep your office organized with organization, comes	s better time management
Attend advanced training, PELC	
Additional cumomicar comments	
Additional supervisor comments:	
Sgt. Styles is a pleasexto work with. He is dedicated	to the department, agency and residents of CMHA.
Overall Rating for the Employee:	Exceeds Expectations
	Meets Expectations
1	Needs Improvement
// <-/	<del>-/</del>
Employee Signature:   Just / Je / 7/	Date: 27FEB/4
V All	
Supervisor Signature:	Date: 2/27/14
Donortment Directors	Date: 3/2-/2011
Department Director:	ace my 427/2014



# **Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal – Self Evaluation**

# Instructions:

Preparation for the performance review with your supervisor should begin with the employee completing a self-appraisal. The self-evaluation is designed to facilitate constructive discussion between the employee and manager in order to clarify performance objectives and provide feedback about the employee's performance with respect to skills and behaviors.

	<del></del>	·		
Key Strengths:				
	interact/communicate v I processing of timely inv			rovide accurate information, good layer
Considiration	-			
	ere improvement is			
Hearing presentation p	repareness. Decrease gra	ammatical errors,		
	<del></del>	<del></del>		
Goals for the upco	ming year (at least	3):		
Seek additional training			<del></del> -	
Completion of investing	atama a dalata na mangana na da se	·		
completion of investiga	tion within contractual ti	imetrame.		
To assist my immideate	supervisor with addition	nal assignments		
Additional employ	ee comments:		·	
Police Department. I copersonal goal to arrive t throught my career. I h	emply with all rules, regul to work on time daily and	lations, policy and proc I provide/ apply my kno towards supervision or	edures as e wledge an	mission statement of the CMHA established by the Agency. It is my d skills that I have obtained linates. I treat everyone I come in
Overall S	Self Rating:	Exceeds Exped	tations	
			ations	
		☐ Needs Improv		
Employee Name:	Paul A. Styles	[	ate:	Thursday, February 27, 2014
Department:	Police/ Security		ob Title:	Sergeant
Supervisor Name:	Thomas Burdyshaw			



# **Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal**

Employee Name:	Paul Styles	_ Last Four Digits of S	Social: 7073
Employee Title:	Police Sergeant	_Department:	Police
Supervisor Name:	Thomas M. Burdyshaw	Review Date:	21-Jan-2015
Evaluation Period: From	1-Jan-2014 To 31-Dec-14 Type	e: Supervisory	Non- Supervisory Union

#### Instructions:

The Employee Performance Appraisal is a set time the employee and supervisor plan together to build on strengths and develop those areas needing improvement. Objectives for this process include:

- 1. Restate expectations about job responsibilities and performance standards
- 2. Evaluate job performance
- 3. Discuss future development opportunities and relate them to CMHA's needs.
- 4. Assess performance with 12 performance factors.

The general definition of each Performance Level is provided below. The Performance Levels are associated with the employee's current job responsibilities and have been established with 12 overall Agency Performance Factors that relate to the employee's daily job responsibilities. When appraising an employee determine the Performance Level for each Performance Factor. Comment are required. If necessary, additional pages may be attached to this Performance Appraisal.

### Performance Levels:

Performance consistently exceeded expectations in all essential areas of responsibility and the quality of work overall is excellent. Performance demonstrates a skill level that exceeds the basic requirements of the position. Employees are viewed as role models by the rest of the Agency. They are innovative in their approach to work and are able to positively influence functions outside of their span of control.

Meets Expectations

Performance results are meeting the stated objectives of the position.

Performance is consistently up to standard. Employees performing at this love.

Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames. Meets the expected levels of performance established by the supervisor.

Improvement Needed Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for significant periods of time. Employees performing at this level require significant

amounts of coaching and direction to achieve and maintain acceptable

performance levels.



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal – Union



Name and Badge#

Paul Styles 656

Date 21-Jan-2015

## PERFORMANCE FACTORS

Leaders	h	ai
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- Supports the development of CMHA's vision, mission and departmental goals; provides clear direction and priorities; steps up to address difficult issues; demonstrates high standards of integrity engages staff and supports staff development. Monitors the performance of members and delegates authority properly.
- Exceeds Expectations
- Meets Expectations
- O Needs Improvement

mments.

Sgt. Styles displays of high level of integrity and ethics. He is always willing to step up and do for others. Other supervisors often go to him for guidance and advice. In his current role as the OIC of the Complaint Investigation Unit he tracks members status as to their disciplinary status throughout the year and if early intervention is needed.

# Judgment/Decision Making

Shows good judgment and decisiveness; acts independently (and appropriately) when faced with a problem. Escalates critical issues; keeps supervisors informed of matters. Recommends appropriate discipline; monitors the use of overtime; effectively assigns and allocates members. Able to efficiently multi-task projects and assignments. Demonstrates proper judgment and control while operating agency vehicle or equipment.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

mments

Sgt. Styles is able to work independently and make sound judgments when an issue presents itself. He will escalate any incoming issues to the attention of his supervisor. He has come along in his organizational skills enabling him to multi-task more effectively.

# **Problem Solving**

Develops creative and logical approaches when solving problems and addressing issues. Provides options and alternatives. Identifies and reports hazards. Is creative in approach needed to handle an assignment.

- O<sub>Exceeds Expectations</sub>
- Meets Expectations
- ONeeds Improvement

Sgt. Styles looks outside the box when following up on complaints. This always him to identify any risks or hazards he sees while working an investigation.

# Accountability

Proactively meets all established deadlines, reporting requirements, and established goals and objectives. Takes ownership and accepts responsibility for any mistakes or errors done within the area they are responsible for. Discovers employee errors. Attends court when subpoenaed.

Exceeds Expectations
Meets Expectations

Sgt. Styles always excepts ownership of his mistakes. He will bring them to his supervisors attention and look for ways to correct them.

Needs Improvement

Comments:

# Interpersonal Relationships and Communication

Exceeds Expectations

Meets Expectations

Needs Improvement

The willingness and demonstrated ability to cooperate, work, and maintain effective courteous communication with co-workers, supervisors, subordinates and members of the public. Encourages the open expression of ideas and opinions. Provides clear, concise information and direction to others in verbal, written, electronic, and other communication formats.

Sgt. Styles works well with all of those he comes in contact with whether it be a member of the Police Department or our residents. He needs to work on his presentation skills when conducting disciplinary hearings.

# Job Knowledge and Skills

The practical/technical skills and information used on the job. The demonstrated ability to execute the duties outlined on the job description. Demonstrates knowledge of laws, ordinances and written directives. Communicates effectively using proper diction and controls radio communications. Dispatches, responds to assignments in a timely manner announcing arrival and completion times. Maintains effective monitoring of emergency and security systems. Demonstrates ability to conduct effective investigations and interviews. Maintains quality investigative files; demonstrates ability to effectively solve cases.

Exceeds Expectations

Meets Expectations

Needs improvement

Sgt. Styles is one of our senior sergeants, and has vast knowledge of his role in that position. He communicates with all members clearly and with authority along with compassion. He conducts multiple investigations at a time. He is effect in interviewing the residents without causing fear in them.

	Dependability		The extent to which an employee follows standards, meets the time and attendance expectations; can be counted upon to complete work assignments. Follows orders, complies with attendance policies and obeys written directives.
√ '	<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Comments:	Sgt. Styles is one of the most dependable members of our department. He did not call off sick nor was he tardy. He has stayed on track in completing his investigations.
/	Work Ethic		A set of positive values that the employee demonstrates in their work habits, including a positive attitude, punctuality, completing a task on time, and producing high quality work. Adapts to new situations in a positive manner. The extent to which an employed is a "self-starter;" seeks out new assignments, expands his/her skills and knowledge, and suggests better ways of accomplishing the job. Accepts constructive criticism.
J	<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Comments:	Sgt. Styles is above most in how he approaches work. He shows a strong work ethic and is a self starter. He is always open to constructive criticism.
	Customer Service		Treats all customers/coworkers/supervisors with respect. Responds to needs within agreed timeframes. Address conflicts and problem situations with patience and tact. Maintains positive relations with stakeholders and members of the community.
/	<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	ı	Sgt. Styles treats everyone with respect and courtesy. He is the type of person who would give you the shirt off of his own back if you needed it. He gives back to his community volunteering with youth.

Quality of Work and Productivity	Nork output matches the expectations established. Employee completes a assignments and submits reports in an organized, legible manner using programmar. Employee consistently meets deadlines. Resilient when respond ituations that are not going well; takes initiative to make improvements. For assigned tasks and goals. Exhibits proper grooming and maintains a clear ppearance. Demonstrates proper care of assigned equipment.	pper ing to Productive
Exceeds Expectations  Meets Expectations  Needs Improvement	Sgt. Styles handles numerous investigations at a time. He has able to monitor there due dates more effectively through the ye complete they are organized and legible.	been ar. Wher
Responsiveness to Co-Workers	Facilitates team in discussions in collaborative situations. Demonstrates consideration for other supervisors/ co-workers by arriving on-time for appointments. Oversees work time assignments, making alternative arrange cover work duties and planned absences and performing extra duties wasked. Maintains positive and courteous relationships with co-workers.	gements hen
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles is always there when you need him. He will never sand is willing to help others.	ay no
Teamwork	eates strong morale/spirit in his/her team. Shares wins and successes; fos alogue; lets people finish and responsible for their work; creates a feeling clonging. Demonstrates the ability to work well with others. Monitors the erformance of members and ensures safety in the work environment.	ters open of
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	gt. Styles is the example that everyone should be given as to heam member should be. He will sacrifice his own time lines to lithers with theirs. He does this without any type of recognition.	iow a help



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal Overall Performance Assessment

Key Strengths:
High level of integrity and ethics. Friendly and approachable. Dependable
Specific areas where improvement is needed:
Continue to focus on time management to ensure timeliness is met. Work on developing your presentation skills when conducting hearings.
Goals for the upcoming year (at least 3):
Continue being aware of time management. Stay organized and focused on task with a checklist for each investigation. Look for training on conducting presentation effectiveness to hone your skills while presenting in hearing.
Additional supervisor comments:
Sgt. Styles is the type of supervisor that everyone should have on their team. He is dedicated to his profession and most importantly the people he serves.
Overall Rating for the Employee: Exceeds Expectations
Meets Expectations
Needs Improvement
Employee Signature: J. J. J. J. J. Date: 21-Jan-2015
Supervisor Signature: Date: 1/21/15 Date: 1/21/15
Department Director: Lucius frigiles (hef Date: 3/29/2015)



# **Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal - Self Evaluation**

Instructions:

Preparation for the performance review with your supervisor should begin with the employee completing a self-appraisal. The self-evaluation is designed to facilitate constructive discussion between the employee and manager in order to clarify performance objectives and provide feedback about the employee's performance with respect to skills and behaviors.

<b>Key Strengths:</b> Attentativeness, P frame. Assisting i	unctural, and being able to complete assigned task in a specifict tim n other areas where my knowledge is vital

Specific areas where improvement is needed:

My written communication skills has improved, however it still lack body. Preparing myself better for pre-disciplinary conferences.

# Goals for the upcoming year (at least 3):

- 1. Better time frame submitting investigation.
- 2. Prepare and submit a policy

0 1 1001 1

3. Keep my work space area in a more tidy manner

Additional employee comments: With my recent graduation from PELC, my understand of matters of importance has been elevated.	

Overall Self Rating:		Exceeds Expectations  Meets Expectations  Needs Improvement	
Employee Name: (Please print)	JET fault- I	Date:	21JAN15
Department:	Police	Job Title:	Sergeant
Supervisor Name:	Thomas pr.	Birchysler	_



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal

Employee Name:	Paul Styles	Last Four Digits of	Social: 7073
Employee Title:	Sergeant	Department:	Police
Supervisor Name:	Thomas M. Burdyshaw	Review Date:	17 MAR 2040
Evaluation Period: From	1-Jan-2015 To 31-Dec-15 T	ype: Supervisory	Non- Supervisory Union

#### Instructions:

The Employee Performance Appraisal is a set time the employee and supervisor plan together to build on strengths and develop those areas needing improvement. Objectives for this process include:

- 1. Restate expectations about job responsibilities and performance standards
- 2. Evaluate job performance
- 3. Discuss future development opportunities and relate them to CMHA's needs.

performance levels.

4. Assess performance with 12 performance factors.

The general definition of each Performance Level is provided below. The Performance Levels are associated with the employee's current job responsibilities and have been established with 12 overall Agency Performance Factors that relate to the employee's daily job responsibilities. When appraising an employee determine the Performance Level for each Performance Factor. Comment are required. If necessary, additional pages may be attached to this Performance Appraisal.

### **Performance Levels:**

Exceeds Expectations	Performance consistently exceeded expectations in all essential areas of responsibility and the quality of work overall is excellent. Performance demonstrates a skill level that exceeds the basic requirements of the position. Employees are viewed as role models by the rest of the Agency. They are innovative in their approach to work and are able to positively influence functions outside of their span of control.
Meets Expectations	Performance results are meeting the stated objectives of the position.  Performance is consistently up to standard. Employees performing at this level achieve their planned objectives within predetermined benchmarks and designated time frames. Meets the expected levels of performance established by the supervisor.
Improvement Needed	Performance is unsatisfactory from time to time. Although demonstrated performance may reach satisfactory level, it is generally not sustained for

significant periods of time. Employees performing at this level require significant

amounts of coaching and direction to achieve and maintain acceptable



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal – Supervisory

CHILD
100 100 MI 101 P3 (1) 4
POLICE
20

Name and Badge#

Paul Styles 656

Date 17-Mar-2016

#### PERFORMANCE FACTORS

## Leadership

Supports the development of CMHA's vision, mission and departmental goals; provides clear direction and priorities; steps up to address difficult issues; demonstrates high standards of integrity engages staff and supports staff development. Monitors the performance of members and delegates authority properly.

- Exceeds Expectations
- Meets Expectations
- O Needs Improvement

Sgt. Styles displays a high level of ethics. He leads by example always willing to help others and show guidance when needed. His level of integrity is above most and can be trusted with the most sensitive of information.

# Judgment/Decision Making

Shows good judgment and decisiveness; acts independently (and appropriately) when faced with a problem. Escalates critical issues; keeps supervisors informed of matters. Recommends appropriate discipline; monitors the use of overtime; effectively assigns and allocates members. Able to efficiently multi-task projects and assignments. Demonstrates proper judgment and control while operating agency vehicle or equipment.

- Exceeds Expectations
- Meets Expectations
- Needs Improvement

mment

Sgt. Styles current assignment in the Complaint investigation Unit enables him to make decisions independently. Most cases he works he has to make sound decision on his own during the investigation. He escalates any information he receives to his supervisor. He has the ability to handle multiple assignments at one time.

# **Problem Solving**

Develops creative and logical approaches when solving problems and addressing issues. Provides options and alternatives. Identifies and reports hazards. Is creative in approach needed to handle an assignment.

- Exceeds Expectations
- Meets Expectations
- ONeeds Improvement

Sgt. Styles has to look at multiple factors when investigating complaints which he demonstrates the ability to do so. He is always thinking of different ways to handle an issue as they come at him.

Accountability	Proactively meets all established deadlines, reporting requirements, and established goals and objectives. Takes ownership and accepts responsibility for any mistakes or errors done within the area they are responsible for. Discovers employee errors. Attends court when subpoenaed.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles always takes ownership for the mistakes he makes, and learns from those mistakes.
Interpersonal Relationships and Communication	The willingness and demonstrated ability to cooperate, work, and maintain effective courteous communication with co-workers, supervisors, subordinates and members of the public. Encourages the open expression of ideas and opinions. Provides clear, concise information and direction to others in verbal, written, electronic, and other communication formats.
Exceeds Expectations  Meets Expectations  Needs Improvement	Sgt. Styles works well with all he comes in contact with including fellow members of the department, CMHA employees and the resident. He continues to work on his presentation skills when presenting information during hearings.
Job Knowledge and Skills	The practical/technical skills and information used on the job. The demonstrated ability to execute the duties outlined on the job description. Demonstrates knowledge of laws, ordinances and written directives. Communicates effectively using proper diction and controls radio communications. Dispatches, responds to assignments in a timely manner announcing arrival and completion times. Maintains effective monitoring of emergency and security systems. Demonstrates ability to conduct effective investigations and interviews. Maintains quality investigative files; demonstrates ability to effectively solve cases.
Exceeds Expectations  Meets Expectations	Sgt. Styles is a senior sergeant who has a vast knowledge of not only his position but the needs of those around him. He is effective in his communication with all he comes in contact with. He maintains his

investigative files and is very effective in his interviewing abilities.

Needs Improvement

Dependability	The extent to which an employee follows standards, meets the time and attendance expectations; can be counted upon to complete work assignments. Follows orders, complies with attendance policies and obeys written directives.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles is the most dependable person. You can always count on him being at work and on time. He never call off sick and follows all rules and regulations.
Work Ethic	A set of positive values that the employee demonstrates in their work habits, including a positive attitude, punctuality, completing a task on time, and producing high quality work. Adapts to new situations in a positive manner. The extent to which an employee is a "self-starter;" seeks out new assignments, expands his/her skills and knowledge, and suggests better ways of accomplishing the job. Accepts constructive criticism.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles takes great pride in his work ethic and it shows in the quality of the investigations he conducts. He is a self starter and is always open to constructive criticism.
Customer Service	Treats all customers/coworkers/supervisors with respect. Responds to needs within agreed timeframes. Address conflicts and problem situations with patience and tact. Maintains positive relations with stakeholders and members of the community.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles treat everyone he comes into contact with how he would like to be treated. In his current assignment investigating complaints he shows compassion and understanding when people are angry or frustrated with the officer they came in contact with. He listens and empathizes with them.

Productivity	assignments and submits reports in an organized, legible manner using proper grammar. Employee consistently meets deadlines. Resilient when responding to situations that are not going well; takes initiative to make improvements. Productive on assigned tasks and goals. Exhibits proper grooming and maintains a clean personal appearance. Demonstrates proper care of assigned equipment.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles handles multiple investigations at a time. He continues to improve on his time management and organizational skills.
Responsiveness to Co-Workers	Facilitates team in discussions in collaborative situations. Demonstrates consideration for other supervisors/ co-workers by arriving on-time for appointments. Oversees work time assignments, making alternative arrangements to cover work duties and planned absences and performing extra duties when asked. Maintains positive and courteous relationships with co-workers.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles is always there when you need him. He will help other even if it causes him to set his own assignments aside.
Teamwork	Creates strong morale/spirit in his/her team. Shares wins and successes; fosters open dialogue; lets people finish and responsible for their work; creates a feeling of belonging. Demonstrates the ability to work well with others. Monitors the performance of members and ensures safety in the work environment.
<ul><li>Exceeds Expectations</li><li>Meets Expectations</li><li>Needs Improvement</li></ul>	Sgt. Styles is the agency example of teamwork. Always willing to help others.

Work output matches the expectations established. Employee completes all

**Quality of Work and** 



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal Overall Performance Assessment

Key Strengths:				
Highly motivated High level of integrity and ethics dependable approachable				
Specific areas where improvement is needed:				
Continue to track timeliness of investigations. Stay organized Continue to work on your presentation skills				
Goals for the upcoming year (at least 3):				
Stay Organization Stay on time with investigations Look for training on effective presentations.				
Additional supervisor comments:				
SgtStyles is a pleasure to supervisor. He is a dedicated member of our department whop you can always count on. I have faith that he will reach his goal of becoming a Lieutenant with our agency in the future.				
Overall Rating for the Employee: Exceeds Expectations  Meets Expectations  Needs Improvement				
Employee Signature: 5GT. Baul A. Sty L+156 Date: 17-Mar-2016				
Supervisor Signature: Date: 17-Mar-2016				
Department Director. Leulingszeles Chif Date: 4/26/2016				



# Cuyahoga Metropolitan Housing Authority Employee Performance Appraisal - Self Evaluation

**Instructions:** 

Preparation for the performance review with your supervisor should begin with the employee completing a self-appraisal. The self-evaluation is designed to facilitate constructive discussion between the employee and manager in order to clarify performance objectives and provide feedback about the employee's performance with respect to skills and behaviors.

Key Strengths: Accountability, Depend	ability, Punctuality, Communic	ation	
Specific areas where i Oran Presentation	mprovement is needed:		
Goals for the upcoming 1. To be promoted 2. Prepare and submit and a submit investigations	policies		
Additional employee of In the fall of 2014, I atterning as I go. Since shoulders, and I acn be	nded PELC, prior to that I was I graduated from PELC, I see t	getting by still being the vision more clea	g professional and rly. Alot is off my
Overall Self Rating:  Exceeds Expectations  Meets Expectations  Needs Improvement			•
Employee Name: (Please print)	Paul A. Styles	Date:	12/23/2015
Department: Supervisor Name:	Police/ Security Sergeant	Job Title	e:



# Performance Evaluation Signature Page

Employee being evaluated: Tavi STYLES	
Immediate Supervisor : Comments:	Date of Review:
Lieutenant :Comments:	Date of Review:
Comments:	Date of Review: 8/13/17
Deputy Chief:	Date of Review: 3/13/7
Chief: McCaic forzilez (Rif).  Comments:	Date of Review: 3/13/2017



Employee Id 1784

Job Title Police Sergeant - Nopba

Job Grade 1

Name Styles, Paul

Job Id 17033

Supervisor Burdyshaw, Thomas

#### Competencies

Competencies.

### 1.C. Honesty/Integrity (Value: Commitment)

Description

Behaves in an honest, fair and ethical manner; Shows consistency in words and actions; Holds oneself to the

highest level of ethical standard within the industry, Shares information accurately, completely and appropriately.

**Self Rating** 

**Self Comment** 

Rating

3 - Exceed Expectations

Comment

Sgt. Styles is honest and ethical. He handles all citizens complaints into the department ad holds himself to a high

ethical standard.

### 2.A. Dependability, Adaptability/Flexibility (Value: Accountability)

Description

Dependability: Takes personal responsibility for the quality and timeliness of work and achieves results with little oversight; Follows through on commitments; Implements decisions that have been agreed upon; Maintains confidentiality with sensitive information; Acknowledges and learns from mistakes without blaming others; Recognizes the impact of one's behavior on others. Adaptability/Flexibility:Adapts to changing business needs, conditions and situations in a positive manner; Displays openness to training and application of new skill; Displays and ongoing commitment to learning and self-improvement.

Self Rating

Self Comment

Rating

2 - Meets Expectations

ensure he is prepared.

Comment

Sgt. Styles is dependable but does need to focus on the quality of his work when handling hearings. He needs to

# 2.A. Written/Verbal Communication, Comprehension/Listening (Value: Accountability)

Description

Written Communication/Comprehension: Demonstrates the ability to express ideas, thoughts, and concepts clearly and effectively in writing using correct and appropriate grammar, organization and structure; Demonstrates the ability to understand and execute written instructions. Verbal Communication/Listening: Demonstrates the ability to convey thoughts and express ideas effectively using speech in individual or group settings; Attends to and fully comprehends what others are saying. Demonstrates the ability to understand and execute verbal instructions.

Self Rating

**Self Comment** 

Rating

2 - Meets Expectations

Comment

Sgt. Styles is accountable for his work. He is able to provide a clear written report, but need to focus on his verbal presentations.

# 3.R. Interpersonal Skills, Relationship Building (Value: Respect)

Description

Interpersonal Skills: Ability to interact positively and to relate with others; Treats others with courtesy, sensitivity, and respect; Considers and responds to the needs and feelings of different people in different situations;

Demonstrates politeness and empathy in interactions with others. Relationship Building: Builds constructive working relationships characterized by a high level of acceptance, cooperation, and mutual respect; Exhibits a high level of willingness and ability to cooperate and effectively communicate with residents, colleagues, supervisors,

and outside vendors; Works to achieve common goals.

Self Rating

Self Comment

Rating

3 - Exceed Expectations

Comment

Sgt. Styles works well with all members of the department and the agency.

## 3.R. Service Orientation (Value: Respect)

Description

Acts professionally and calmly at all times when interacting with others; Consistently demonstrates concern and courtesy towards others; Treats all people fairly and respectfully at all times; Responds to customer needs within agree time frames; Addresses conflicts and problem situations with patience and tact.

### Self Rating

#### **Self Comment**

Rating

3 - Exceed Expectations

with how he would like to be treated.

Comment

Sgt. Styles is professional and able to communicate with other respectfully. He threats those he comes in contact

## 4.E. Job Knowledge (Value: Excellence)

Description

Ensures job knowledge and skills are current and valuable; Demonstrates ability to apply practical and/or technical knowledge to specific tasks/assignments; Demonstrates job knowledge through ability to successfully execute duties outline the the job description.

## Self Rating

#### **Self Comment**

Rating

2 - Meets Expectations

Comment

Sgt. Styles is able to effectively conduct his investigation sand perform his duties.

### 4.E. Productivity, Quality of Work (Value: Excellence)

#### Description

Productivity: Strives to consistently produce high quality results in an efficient and timely manner; Maintains focus and perseveres in the face of obstacles; Uses time efficiently and responds quickly and constructively when confronted with challenges; Prioritizes tasks based on importance/urgency. Quality of Work: Extent to which work outputs match quality standards/set expectations; Completes all tasks/assignments successfully and with a high level of proficiency; Corrects any and all errors and learns from them to reduce future errors; Strives to consistently deliver high level of quality/product/service to all clients/residents/colleagues/supervisors.

#### **Self Rating**

#### **Self Comment**

Rating

2 - Meets Expectations

Comment

Sgt. Styles is easy to talk to and excepts constructive criticism. He needs to focus on task at hand and not be interrupted by outside issues.

## 4.S. Consistency/Compliance, Detail Orientation (Value: Safety)

#### Description

Consistency/Compliance: Follows departmental and Agency-wide workplace safety standards and CMHA regulations; Understand and adheres to all workplace policies as states in the AO11; Adheres to all workplace and trade safety laws, regulations, standards and practices. Detail Orientation: Follows departmental and Agency-wide workplace safety standards and CMHA regulations; Understand and adheres to all workplace policies as stated in the AO11; Adheres to all workplace and trade safety laws, regulations, standards and practices.

**Self Rating** 

**Self Comment** 

Rating

3 - Exceed Expectations

Comment

Sgt. Styles follows all agency workplace safety standards.

# 5.C. Coaching/Mentoring (Value: Commitment)

Description

Provides timely guidance and feedback to help others strengthen specific knowledge/skill areas needed on the job;

Reinforces efforts and progress; Provides instruction, positive models, and opportunities for learning in order to help others develop skills; Clarifies expected behaviors, knowledge and levels of proficiency by seeking/giving information and checking for understanding.

Self Rating

**Self Comment** 

Rating

3 - Exceed Expectations

Comment

Sgt. Styles is always willing to assist and guide others when they need help.

### 6.A. Leadership (Value: Accountability)

Description

Creates a vision or goal for one's department and communicates it in a way that motivates others to implement it;

Accepts responsibilities and acts on them; Develops trust and credibility; Expects honest and ethical behavior of self and others; Creates opportunities for success.

Self Rating

**Self Comment** 

Rating

3 - Exceed Expectations √

Comment

Sgt. Styles demonstrates leadership in what he does daily. He communicates well with others and expects others

to be ethical and hold themselves to the highest standards.

## 7.R. Inclusiveness (Value: Respect)

Description

Shows respect for people and their differences, Promotes fairness and equality; Engages the talents, experiences,

and capabilities of others; Fosters a sense of belonging; Works to understand the perspectives of others.

Self Rating

**Self Comment** 

Rating

3 - Exceed Expectations V

Comment

Sgt. Styles is always respectful and fair to those he comes in contact with.

## 8.E. Managing Resources (Value: Excellence)

Description

Allocates time and resources efficiently and effectively; Prioritizes work and delegates as appropriate; Implements processes and works to significantly reduce risk on CMHA.

**Self Rating** 

**Self Comment** 

Rating

2 - Meets Expectations

Comment

Sgt. Styles needs to ensure he focus on effective organization of his assignments to not get overwhelmed or

behind.

### 9.S. Judgement/Decision Making (Value: Safety)

Description

Keeps the Agency's mission at the forefront of decision making and action; Demonstrates the ability to make decisions authoritatively and wisely, after adequately considering various available courses of action; Understands CMHA's overall mission and aligns priorities to Agency goals; Considers the impact of an action or decision on residents and the Authority; Refrains from jumping to conclusions and takes time to collect facts before decision making.

Self Rating

Self Comment

Rating

2 - Meets Expectations

Comment

Sgt. Styles follows the departments core values.

### Competencies

**Self Rating** 

**Self Comment** 

Rating

3 - Exceed Expectations

Comment

Sgt. Styles is trusted with investigating complaints against our department members. He is fair and treats everyone with respect. He needs to focus on preparation for hears in which he has to verbal present facts.

# Manager Evaluation Instructions: Styles, Paul

Overall Rating &	Comments
Self Rating	
Self Comment	
Rating	3 - Exceed Expectations $\sqrt{}$
Comment	Sgt. Styles is trusted with investigating complaints against our department members. He is fair and treats everyone
	with respect. He needs to focus on preparation for hears in which he has to verbal present facts.
Employee Signot	
appraisal for the past y signing this I acknowle	ave read and reviewed this evaluation. Further, I understand that this document represents my performance rear. I also acknowledge that I have had time to consider this evaluation and make any appropriate responses. By dge only receipt of the evaluation and do not imply agreement or certification of its contents. I understand I am g any disputes about its contents with the Human Resources Department.
Comment	
	No. 1 1 5 1 4 (56
Signature	Was I // Flore Flore

**Manager Signoff** 

Comment

Date

vianager	Evaluation	instructions:	Styles,	Pau!

Signature

Date

3/14/17

# 2016 Annual Performance Appraisal Form

CMHA CARES: Commitment, Accountability, Respect, Excellence, Safety

Part 2: Team Member Competencies for PD Managers

Name and Rater Paul Styles Badge# and Badge# 656 Date 3/9/17 Willingly cooperates and works collaboratively toward solutions 5.C. Teamwork that generally benefit all involved parties and accomplish group objectives; actively participates as a member of the team. Sgt. Styles works well with all he comes in contact with. He is an active participant in Exceeds Expectations conversations. Meets Expectations Comments: □ Needs Improvement Consistently meets all CMHA policies and standards for attendance and 6.A. Attendance/ punctuality; has a thorough understanding of CMHA timekeeping policies **Punctuality** and procedures; Reports to scheduled training classes and/or meetings on time and prepared. Exceeds Expectations Sgt. Styles complies with timekeeping and attendace policy. ← Meets Expectations Needs Improvement Has a positive disposition towards others and their jobs/work; Spreads 7.R. Positive Attitude optimistic outlook to others; Continues to be upbeat even when a situation is not ideal Sgt. Styles is positive and willing to assist with anything asked of him. Exceeds Expectations Meets Expectations

○ Needs Improvement

# 8.E. Customer Focus

Listens to customers/residents (internal or external) and addresses needs and concerns; Keeps customers informed by providing status reports and progress updates; Delivers on service commitments; Meets established or agreed upon deadlines; Maintains supportive relationships with customers; Uses initiative to improve outcomes, processes or measurements.

- **√** Exceeds Expectations
  - ← Meets Expectations
  - Needs Improvement

Sgt. Styles works well with all he comes in contact with.

# 9.S. Safety Culture/ Awareness

Identifies and seeks to correct conditions that affect employee and resident safety; Upholds CMHA safety standards; Attends and actively participates in mandatory safety-related training courses; Promotes a culture of safety in his/her workplace and on the job.

Exceeds Expectations

- Meets Expectations
- Needs Improvement

Sgt. Styles upholds all safety standards.



Employee ld 1784

Job Title Police Sergeant - Nopba

Job Grade 1

Name Styles, Paul

Job Id 17033

Supervisor Burdyshaw, Thomas

### **Competencies**

Competencies.

# 1.C. Honesty/Integrity (Value: Commitment)

Description

Behaves in an honest, fair and ethical manner; Shows consistency in words and actions; Holds oneself to the highest level of ethical standard within the industry; Shares information accurately, completely and appropriately.

Rating

3 - Exceed Expectations

Comment

I believe I have demonstrated competence in the performance of my job duties. The standard operating procedures that governs complaint investigation along with techniques learned from advanced training enables me to perform my duties at peek level. My finished work are seldom returned to me for corrections.

# 2.A. Dependability, Adaptability/Flexibility (Value: Accountability)

Description

Dependability: Takes personal responsibility for the quality and timeliness of work and achieves results with little oversight; Follows through on commitments; Implements decisions that have been agreed upon; Maintains confidentiality with sensitive information; Acknowledges and learns from mistakes without blaming others; Recognizes the impact of one's behavior on others. Adaptability/Flexibility:Adapts to changing business needs, conditions and situations in a positive manner; Displays openness to training and application of new skill; Displays and ongoing commitment to learning and self-improvement.

Rating

3 - Exceed Expectations

Page 2

Self Evaluation Instructions: Styles, Paul

Comment

My dependability to CMHA is above reproach. My attendance speaks for itself. I strive to make it to work on time and to start my duties in a timely manner. I sometimes sacrifice arriving to work earlier that my scheduled starting time and staying later to complete my assignments in a timely manner.

2.A. Written/Verbal Communication, Comprehension/Listening (Value: Accountability)

Description

Written Communication/Comprehension: Demonstrates the ability to express ideas, thoughts, and concepts clearly and effectively in writing using correct and appropriate grammar, organization and structure; Demonstrates the ability to understand and execute written instructions. Verbal Communication/Listening: Demonstrates the ability to convey thoughts and express ideas effectively using speech in individual or group settings. Attends to and fully comprehends what others are saying; Demonstrates the ability to understand and execute verbal instructions.

Rating

Comment

3.R. Interpersonal Skills, Relationship Building (Value: Respect)

Description

Interpersonal Skills: Ability to interact positively and to relate with others; Treats others with courtesy, sensitivity, and respect; Considers and responds to the needs and feelings of different people in different situations; Demonstrates politeness and empathy in interactions with others. Relationship Building: Builds constructive working relationships characterized by a high level of acceptance, cooperation, and mutual respect; Exhibits a high level of willingness and ability to cooperate and effectively communicate with residents, colleagues, supervisors, and outside vendors; Works to achieve common goals.

Rating

3.R. Service Orientation (Value: Respect)

Description

Acts professionally and calmly at all times when interacting with others; Consistently demonstrates concern and courtesy towards others; Treats all people fairly and respectfully at all times; Responds to customer needs within agree time frames; Addresses conflicts and problem situations with patience and tact.

Rating

Comment

# 4.E. Job Knowledge (Value: Excellence)

Description

Ensures job knowledge and skills are current and valuable; Demonstrates ability to apply practical and/or technical knowledge to specific tasks/assignments; Demonstrates job knowledge through ability to successfully execute duties outline the the job description.

Rating

Comment

# 4.E. Productivity, Quality of Work (Value: Excellence)

Description

Productivity: Strives to consistently produce high quality results in an efficient and timely manner; Maintains focus and perseveres in the face of obstacles; Uses time efficiently and responds quickly and constructively when confronted with challenges; Prioritizes tasks based on importance/urgency. Quality of Work: Extent to which work outputs match quality standards/set expectations; Completes all tasks/assignments successfully and with a high level of proficiency; Corrects any and all errors and learns from them to reduce future errors; Strives to consistently deliver high level of quality/product/service to all clients/residents/colleagues/supervisors.

Rating

4.S. Consistency/Compliance, Detail Orientation (Value: Safety)

Description

Consistency/Compliance: Follows departmental and Agency-wide workplace safety standards and CMHA regulations; Understand and adheres to all workplace policies as states in the AO11; Adheres to all workplace and trade safety laws, regulations, standards and practices. Detail Orientation: Follows departmental and Agency-wide workplace safety standards and CMHA regulations; Understand and adheres to all workplace policies as stated in the AO11; Adheres to all workplace and trade safety laws, regulations, standards and practices.

Rating

Comment

# 5.C. Coaching/Mentoring (Value: Commitment)

Description

Provides timely guidance and feedback to help others strengthen specific knowledge/skill areas needed on the job; Reinforces efforts and progress; Provides instruction, positive models, and opportunities for learning in order to help others develop skills; Clarifies expected behaviors, knowledge and levels of proficiency by seeking/giving information and checking for understanding.

Rating

Comment

### 6.A. Leadership (Value: Accountability)

Description

Creates a vision or goal for one's department and communicates it in a way that motivates others to implement it;

Accepts responsibilities and acts on them; Develops trust and credibility; Expects honest and ethical behavior of self and others; Creates opportunities for success.

Rating

# 7.R. Inclusiveness (Value: Respect)

Description

Shows respect for people and their differences; Promotes fairness and equality; Engages the talents, experiences, and capabilities of others; Fosters a sense of belonging; Works to understand the perspectives of others.

Rating

Comment

# 8.E. Managing Resources (Value: Excellence)

Description

Allocates time and resources efficiently and effectively; Prioritizes work and delegates as appropriate; Implements processes and works to significantly reduce risk on CMHA.

Rating

Comment

# 9.S. Judgement/Decision Making (Value: Safety)

Description

Keeps the Agency's mission at the forefront of decision making and action; Demonstrates the ability to make decisions authoritatively and wisely, after adequately considering various available courses of action; Understands CMHA's overall mission and aligns priorities to Agency goals; Considers the impact of an action or decision on residents and the Authority; Refrains from jumping to conclusions and takes time to collect facts before decision making.

Rating

# Competencies

Rating

3 - Exceed Expectations

Comment

# **Overall Rating & Comments**

Rating

3 - Exceed Expectations

Comment

I am well competent to perform the job duties as required for my position. I believe I have demonstrated the

qualities as well as going above and beyond what is required to achieve the goals and mission.

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT ANNUAL PERFORMANCE APPRAISAL

MEMBER NAME:Sergeant Paul Styles	EVALUAT	ron: Lieutenant Dale Homerick	DATE: 25JUN19
	APPRAISA	AL PERIOD	
FROM: 01-01-2018		то: 12-31-2018	
HONESTY / INTEGRITY  Core Values:  Accountability & Tenacity  Exceeds Expectations  Meets Expectations  Needs Improvement	holds oneself to the completely and appropriate Comments:  Sgt Styles hold hims	est, fair and ethical manner; shows consister highest level of ethical standards; shares in propriately.  self to a high level of ethical standards. Sguinformation accurately and appropriately.	information accurately,
COMMUNICATIONS  Core Values:  Respect & Understanding	and structure; ability express ideas effecti	deas and concepts clearly; effective in writ y to understand and execute instructions; a ively; attends to and fully comprehends wi xecute verbal instructions.	bility to convey thoughts and
Exceeds Expectations  Meets Expectations  Needs Improvement	comprehends what o	express his ideas verbally, he understands thers are saying. However Sgt Styles need an using correct grammar and structures v	ds to improve on being a
INTERPERSONAL SKILLS  Core Values:  Respect & Understanding	considers the feeling empathy; builds con	with others; treats others with courtesy, set gs of people in different situations; demon- astructive relationships; ability to cooperate esidents, colleagues, supervisors, and outs pals.	strates politeness and e and effectively
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles positively i others opinions and v	interacts with others. Sgt Styles is always o views. He has built positive relationships wi	courteous and respects ith his peers and managers.

MEMBER NAME:Paul Styles	EVALUATOR: Dale Homerick	PAGE 2
SERVICE  Core Values:  Excellence / Respect / Service	Acts professionally and calmly at all times when interacting with concern and courtesy towards others; treats all people fairly and responds to customer needs within agreed upon time frames; addr problem situations with patience and tact; listens to customers / reneeds and concerns; keeps customers informed by providing statu updates; meets established or agreed upon deadlines; uses initiative	espectfully at all times; esses conflicts and esidents and addresses as reports and progress
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles treats everyone fair and equally. Sgt Styles does not sho special treatments.	w favoritism or give
JOB KNOWLEDGE  Core Values:  Excellence & Training	Ensures job knowledge and skills are current and valuable; demon- practical and technical knowledge to specific tasks / assignments; knowledge through the ability to successfully execute duties outling	demonstrates job
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles is familiar with the Rules and Regulations and Policy and agency. Sgt Styles does take it upon himself to stay current with new ordinances.	Procedures of the vand changed laws and
PRODUCTIVITY  Core Values:  Commitment / Tenacity / Service	Strives to produce high quality results; focuses and perseveres in the time efficiently when confronted with challenges; prioritizes tasks burgency; work outputs match quality standards / set expectations; coassignments with a high level of proficiency; corrects errors and lear future errors; consistently delivers high level of service to all clients and supervisors; takes personal responsibility for the quality and tim achieves results with little oversight; follows through on commitmer learns from mistakes without blaming others; adapts to changing bus and situations in a positive manner; displays openness to training an skills and self-improvement.	ased on importance / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes tasks / completes
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles does complete his daily assignments in a timely manner aday operations and task without any problems. Sgt Styles needs to management when given assignments that have expected complete assignment is complete and turned in.	work on time

	EVALUATOR: Dale Homerick	PAGE 3
TEAMWORK  Core Values:  Commitment & Tenacity	Willingly cooperates and works collaboratively towar involved parties and accomplish group objectives; actiteam.	d solutions that generally beneively participates as a member
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments:  Sgt Styles is always willing to help his peers and fellow occasion has shown where he has stepped up and assi was over burden.	officers. Sgt Styles on several isted others when there work l
ATTENDANCE	Meets all CMHA policies and standards for attendance	e and punctuality; has a thorou
Core Values: Accountability & Understanding	understanding of CMHA timekeeping policies and pro training classes and / or meetings on time and prepared	cedures; reports to scheduled.
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles has used less than 40 hrs of Sick Time. Sgt S is always prepared to start work.	Styles has always been on time
OR SUPERVISORS:  COACHING & MENTORING	Provides timely guidance and feedback to help others s	strengthen specific knowledge
Core Values: Accountability & Training	reinforces efforts and progress; provides instruction, po opportunities for learning; clarifies expected behaviors and giving information and checking for understanding	ositive role modeling, and and levels of proficiency by s
	Comments:	
Exceeds Expectations  Meets Expectations  Needs Improvement	Sgt Styles is very proactive when it comes to monitoring Styles is always there to make sure that our members higive them guidance when needed.	and mentoring our members. ave the tools to do their job an
Exceeds Expectations  Meets Expectations	Styles is always there to make sure that our members have give them guidance when needed.	ave the tools to do their job an
Exceeds Expectations  Meets Expectations  Needs Improvement	Styles is always there to make sure that our members have	ave the tools to do their job an

EMBER NAME:Paul Styles	EVA	ALUATOR: Dale Homerick	PAGE 4
INCLUSIVENESS  Core Values:  Commitment / Understanding / Respect	the talents,	ect for people and their differences; promo experiences, and capabilities of others; fos the perspectives of others.	otes fairness and equality; engages ters a sense of belonging; works to
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments Sgt Styles lea favoritisms a	: ads by example and treats everyone fair ar nd is always there to listen to others have t	nd equally. Sgt Styles does not play to say.
MANAGING RESOURCES			
Core Values:	Allocates tir appropriate;	ne and resources efficiently and effectively implements processes and works to signif	y; prioritizes work and delegates as icantly reduce risk to CMHA.
Excellence & Safety			
Exceeds Expectations  Meets Expectations  Needs Improvement	district got	completed in a timely manner.	
JUDGMENT & DECISION MAKING  Core Values:  Commitment / Understanding / Safety	authoritative the impact of	ission at the forefront of decision making a ly and wisely; understands CMHA's missi f actions or decisions on residents and the and takes time to collect facts before mak	on and prioritizes goals; considers Authority; refrains from jumping to
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles wh Styles listens	en it comes to making decisions keeps the to facts before making any decision.	agency best intrest in mind. Sgt
OVERALL APPI	RAISAL	Exceeds Expectations  Meets Expectations  Needs Improvement	=

MEMBER NAME:Paul Styles	EVALUATOR: Dale Homerick	PAGE 5
MMEDIATE SUPERVISOR:	1 436 Date of Review: 4/26/1	19
Comments:		
IEUTENANT: THE MET STEEL	Date of Review: 1/27	19
Comments:	/2	
OMMANDER: Commepts;	Date of Review: is/57/1	7
Comments:	Date of Review: 6/2	7/17
Comments:	Ref Date of Review:	19



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT ANNUAL PERFORMANCE APPRAISAL



			CO THAT
MEMBER NAME:Sergeant Paul Styles	EVALUA?	TOR: Lieutenant Dale Homerick	DATE:26SEP20
	APPRAIS/	AL PERIOD	
FROM: 01-01-2019		TO: 12-31-2019	
HONESTY / INTEGRITY  Core Values:  Accountability & Tenacity  Exceeds Expectations  Meets Expectations  Needs Improvement	completely and app  Comments: Sgt Styles acts in a agency first. Sgt Sty	est, fair and ethical manner; shows consisten e highest level of ethical standards; shares in propriately.  fair and ethical manner. Sgt Styles always p yles displays on and off duty the desire and off the members he supervises.	formation accurately,
COMMUNICATIONS  Core Values:  Respect & Understanding	and structure; ability express ideas effect	ideas and concepts clearly; effective in writing ty to understand and execute instructions; ab tively; attends to and fully comprehends what execute verbal instructions.	ility to convey thoughts and
Exceeds Expectations  Meets Expectations  Needs Improvement	comprehends what o	express his ideas verbally, he understands a others are saying. However, Sgt Styles needs oper grammar when it comes to investigations	s to improve on his report
INTERPERSONAL SKILLS  Core Values:  Respect & Understanding	considers the feeling empathy; builds con	with others; treats others with courtesy, sensings of people in different situations; demonstrative relationships; ability to cooperate a residents, colleagues, supervisors, and outsidoals.	rates politeness and and effectively
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles positively i others opinions and v	interacts with others. Sgt Styles is always co views. He has built positive relationships with	urteous and respects this peers and managers.

SERVICE  Core Values:  Excellence / Respect / Service	Acts professionally and calmly at all times when interacting with others; demonstrates concern and courtesy towards others; treats all people fairly and respectfully at all times; responds to customer needs within agreed upon time frames; addresses conflicts and problem situations with patience and tact; listens to customers / residents and addresses needs and concerns; keeps customers informed by providing status reports and progress updates; meets established or agreed upon deadlines; uses initiative to improve outcomes.
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles treats everyone equally, and does not show favoritisms. Sgt Styles addresses the needs of his peers, the residents and stakeholders. Sgt Styles keeps everyone updated and informed, he needs to improve on meeting agreed upon deadlines.
JOB KNOWLEDGE  Core Values:  Excellence & Training	Ensures job knowledge and skills are current and valuable; demonstrates ability to apply practical and technical knowledge to specific tasks / assignments; demonstrates job knowledge through the ability to successfully execute duties outlined in the job description.
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments:  Sgt Styles understands his job responsibility as a supervisor. Sgt Styles needs to takes it upon himself to stay current and up to date on the laws and ordinances that he enforces. Sgt Styles needs to apply and take advance course in leadership.
PRODUCTIVITY  Core Values:  Commitment / Tenacity / Service	Strives to produce high quality results; focuses and perseveres in the face of obstacles; uses time efficiently when confronted with challenges; prioritizes tasks based on importance/urgency; work outputs match quality standards / set expectations; completes tasks / assignments with a high level of proficiency; corrects errors and learns from them to reduce future errors; consistently delivers high level of service to all clients / residents / colleagues and supervisors; takes personal responsibility for the quality and timeliness of work and achieves results with little oversight; follows through on commitments; acknowledges and learns from mistakes without blaming others; adapts to changing business needs; conditions and situations in a positive manner; displays openness to training and application of new skills and self-improvement.
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles does complete his daily assignments in a timely manner and completes the day to day operations and task without any problems. Sgt Styles needs to work on time management when given assignments that have expected completion dates and assure the assignment is complete and turned in on a timely manner.

EVALUATOR: Dale Homerick

PAGE 2

MEMBER NAME:Sgt Paul Styles

MEMBER NAME: Sgt Paul Styles	EVA	LUATOR: Dale Homerick	2054
	EVA	LUATUR: Date Homerick	PAGE 4
	···		
INCLUSIVENESS	01		
Core Values:	the talents, e	ct for people and their differences; promo xperiences, and capabilities of others; fos he perspectives of others.	ites fairness and equality; engages iters a sense of belonging; works to
Commitment / Understanding / Respect			
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles is a builds credibil	always willing to assist any member of the ity as he helps and mentors others to be s	agency, his knowledge of the job successful.
MANAGING RESOURCES	<u> </u>		
Core Values:	Allocates tim	ne and resources efficiently and effectively implements processes and works to signif	y; prioritizes work and delegates as
Excellence & Safety			
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles doe that they get o	es meet expectations, but he needs to foci completed in a timely manner.	us on his assignment and assure
JUDGMENT & DECISION MAKING	Keeps the mis	ssion at the forefront of decision making a	and action: ability to make decisions
Core Values:	authoritatively	y and wisely; understands CMHA's missi	on and prioritizes goals: considers
	conclusions, a	actions or decisions on residents and the and takes time to collect facts before making	Authority; refrains from jumping to
Commitment / Understanding / Safety	<u> </u>	to contest table before make	ing decisions.
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles whe Styles listens to	n it comes to making decisions keeps the facts before making any decision.	agency best intrest in mind. Sgt
OVERALL APP	RAISAL	Exceeds Expectations  Meets Expectations  Needs Improvement	
Member's signature and date:	Astr	#65h 270 cg 2	<b>Q</b>

MEMBER NAME: Sgt Paul Styles	EVALUATOR: Dale Homerick	
- Ogt Fadi Otyles	EVALUATOR: Date Homerick	PAGE 3
TEAMWORK  Core Values:  Commitment & Tenacity	Willingly cooperates and works collaboratively tow involved parties and accomplish group objectives; a team.  Comments:	ctively participates as a member of the
Exceeds Expectations  Meets Expectations  Needs Improvement	Sgt Styles is always willing to help his peers and fello up and assist others and makes sure the daily operat	w officers. Sgt Styles continually steps ions are completed.
ATTENDANCE		
Core Values:	Meets all CMHA policies and standards for attendan understanding of CMHA timekeeping policies and p training classes and / or meetings on time and prepar	rocedures; reports to scheduled
Accountability & Understanding		cu.
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles is always on time and is always prepared to the Attendance Control Policy, and does not use exce	start work. Sgt Styles understands ssive amounts of sick time.
FOR SUPERVISORS:		
COACHING & MENTORING  Core Values:  Accountability & Training	Provides timely guidance and feedback to help others reinforces efforts and progress; provides instruction, opportunities for learning; clarifies expected behavio and giving information and checking for understanding	positive role modeling, and rs and levels of proficiency by seeking
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles monitors and mentors our members. Sgt St that our members have the equipment to do their job a needed.	yles is always willing to make sure and to give them guidance when
LEADERSHIP  Core Values:  Accountability & Tenacity	Creates a vision or goal and communicates in a way to accepts responsibilities and acts on them; develops truethical behavior of self and others; creates opportunities	ust and credibility; expects honest and
Exceeds Expectations  Meets Expectations  Needs Improvement	Comments: Sgt Styles takes pride in his position, encourages and r being successful. Sgt Styles leads by example by show	nentors the younger members in ring others through his action.

MEMBER NAME:Sgt Paul Styles	EVALUATOR: Dale Homerick	PAGE 5
IMMEDIATE SUPERVISOR:  Comments:	Date of Review:	
Comments:	Date of Review: 10/27/	2020
COMMANDER: Comments:	Date of Review: 11/10/50	020)
DEPUTY CHIEF: VITAR MOUSELL  Comments:	Date of Review;	120

Date of Review:

Comments:

# MISC



5715 Woodland Avenue Cleveland, Ohio 44104-2740

T - 216-426-7760 F - 216-361-3728





# LETTER OF COMMENDATION

June 1, 2015

Paul Styles, Sergeant

Dear Sergeant Styles:

I received a phone call from Mr. Well who indicated that he is a resident at Addison Square. Mr. Well wanted to express his appreciation for an excellent job that you provided during a recent power outage. You engaged in critical patrols and made sure that residents were okay. Additionally, you volunteered to charge individual cellular phones by plugging them into your personal vehicle's power source.

On behalf of the entire Command Staff of the CMHA Police Department, I want to thank you for a job well done. Your actions and performance are indicative of the high caliber of members that serve on our department.

Thank you for representing our department in a positive manner.

Sincerely,

Andrés González, Chief

**CMHA Police Department** 

Cc: Jeffery K. Patterson, CEO

Angel Morales, Deputy Chief Thomas Burdyshaw, Commander

Member file

Jeffery K. Patterson, Chief Executive Officer/Safety Director

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY INTEROFFICE COMMENDATION

.TO:

All Members of the Police Department

FROM:

Stanley C. Murrey

Chief of Police

DATE:

February 1, 2007

RE:

Letter of Commendation: Operation Shutdown - Cedar Estate

This letter of commendation is written to recognize you for effectively meeting the challenge of addressing an increase in sudden and frequent occurrences of robberies at Cedar Estate by participating in a special initiated operation known as "Shutdown". This operation was implemented for two (2) weeks during the dates of January 5, 2007 - January 20, 2007. Based on recent statistics and as a result of your aggressive law enforcement efforts, operation "Shutdown" was a huge success and robberies have ceased and overall crime decreased on the property.

In addition to the special police enforcement efforts of K-9, Narcotics, and SWAT Units, specific patrol and protection officers assigned to both Police and Security divisions implemented special attentions and safety checks of the estate and high-rise to ensure the positive outcome of the operation.

Again, congratulations for a job "well done". Your ongoing dedication to the residents and professionalism in policing is greatly appreciated.

A copy of this letter of commendation shall be placed in the personnel file of all officers participating.

Sincerely,

Stanley C/Murrey, Chief



# CEDAR DETAIL ACTIVITY by OFFICER



OFFICER
Alcantara #09
Ali #31
Assaf #62
Azzano #61
Barto #603
Beese #06
Blakemore #12
Burdyshaw #640
Cattren #18
Chapman #14
Clayton #38
Copeland #41
Crawford #29
DeJesus #20
Drayton-Reynolds #109
Drew #04
Griffiths #89
Grimes #56
Guinn #624
Hamilton #36
Harris #17
Hinkle #42
Hizak #24
Holdeman #10
Homerick #636
Hopkins #88
Jones #26
Justus #46
Justus #638
Kleinhenz #08
Kolb #70
Lastuka #52
Leon #58
Mollohan #634
Neal #35
Ortiz #95
Ovalle #30
Ramsey #07
Reynolds
Rives #86
Rucker #632
Salomone #23
Schilling #33
Smiddy #11
Solomon #602
Spigner #67
Styles #656
Svec #662
Tallman #01
Toles #648
Troyer 664
Vales #44
Whitney #48
Williams #65
Wiltshire #19
Woodland #101
7000idi iQ # 101

Fresented To

# Sergeant Paul Styles

OF The Carrellange Metropolities Floring Anthropy Parish Passed Forgus

ON The Pupatheya Maropolitan Mousing Authority and An Comune Subsection Co Che Residente "Che Progressive Action Council

This 19th diagraf August in the year 2006

Sugarin



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All Personnel

FROM:

Anthony H. Jackson,

Chief of Police

DATE:

July 9, 2004

Page 1 of 1	Ohio Police and Fire Games	DN #04-053

The CMHA Police Department would like to extend its congratulations to the following officers who participated in the 2004 Ohio Police and Fire Games:

Lt. Thomas Imes:

Golf (54 Holes) / Second Place - Silver Medal

Lt. Ronald Morenz:

Bowling (Team) / Fourth Place

Sgt. Tyrone Cooper:

Karate (Kumite) / Second Place - Silver Medal

Karate (Kata) / Second Place - Silver Medal

Sgt. Paul Styles:

Karate (Kumite) / First Place - Gold Medal

PO Maurice Kennedy: Track & Field (110 Yard Dash) / Fourth Place

Det. Thomas Williams: Bowling (Mixed Doubles) / Second Place - Silver Medal

Bowling (Team) / Fourth Place

(hu

COMDOC Anthony H. Jackson, Chief of Police

By order of,



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE:

Departmental Notice #98-052

TO:

All Personnel

FROM:

Anthony H. Jackson, Chief of Police

DATE:

December 11, 1998

SUBJECT:

**Excellent in Action Tokens** 

The following personnel have been selected to receive tokens for their exemplary acts or actions during the 4th Quarter of 1998:

- J SPO Felicia Ivory #248 and SPO Herman Hobbs #210 for diligence in performing their duties, and obtaining information at their assigned building which after being passed on to the proper divisional personnel led to the arrest of two (2) individuals for Aggravated Trafficking in Drugs.
- ✓ Lt. Sharon Barto, Sgt. Thomas Imes, Sgt. Anastacio Vazquez, Det. Michael Shank, Ptl. Paul Shaughnessy, Ptl. Paul Styles, and Ptl. Melvin Guinn for their successful completion of the Promotional Selection Process and their continued support of the mission of the department.
- 1 Lt. Donna Correy for the exceptional job she did while serving as Acting Chief and for her continued dedication while wearing the numerous hats required to perform the multiple tasks assigned to her.

Keep up the Good Work.....

Chief of Police





# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE:

DEPARTMENTAL NOTICE NO. 98-038 REVISED

TO:

ALL PERSONNEL

FROM:

Anthony H. Jackson, Chief of Police

DATE:

July 16, 1998

SUBJECT:

1998 AWARDS BANQUET RECIPIENTS

Departmental Notice 98-038, issued July 15, 1998 is hereby corrected to reflect the members of the Tactical Response Unit of 1997 that will be honored at the Banquet.

All other information contained in Notice No. 98-038 remains as printed.

Below, please find the corrected members of the 1997 Tactical Response Unit:

Sgt. Jack Justus, OIC

Ptl. David Thompson #87

Ptl. William Likes #85

Ptl. Michelle Morenz #104

Ptl. Eric Nar #47

Ptl. Thomas Azzano #61

Ptl. Paul Styles #25

Ptl. Eric Rives #86

Anthony H. Jaokson, Chier



# **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

TYPE:

DEPARTMENTAL NOTICE NO. 98-038

TO:

ALL PERSONNEL

FROM:

Anthony H. Jackson, Chief of Police

DATE:

July 15, 1998

SUBJECT:

1998 AWARDS BANQUET RECIPIENTS

The following have been selected to be the recipients of the Departmental Awards at this years Awards Banquet:

# Outstanding Service Award

State Representative Troy Lee James

# Special Recognition Award

- 1. SPO Willie Hammond Badge No. 277
- 2. SPO Larry Jones Badge No. 271
- 3. The Administrative Support Unit

Denita Johnson, Office Manager Jacqueline Harris, Administrative Assistant Terrissi Suber-Bey, Administrative Assistant Denise Knight, Administrative Assistant Nandy Budhar, Administrative Assistant Laydia Wright, Receptionist

# Meritorious Service Award

Ptl. Frank Swidersky - Badge No. 94

# Exceptional Service Award

# 1. Tactical Response Unit

Sgt. Jack Justus, OIC

Ptl. John Kleinhenz - Badge No. 08

Ptl. William Likes - Badge No. 85

Ptl. Michelle Morenz - Badge No. 104

Ptl. Eric Nar - Badge No. 47

Ptl. Leah Sopko - Badge No. 97

Ptl. Paul Styles - Badge No. 25

# 2. Internal Affairs Unit

Sgt. Thomas Imes, OIC

Det. John Hayhurst

Sgt. Stephen Brennan

In addition to the above aforementioned awards, all individuals that were recipients of the Excellence in Action Tokens for 1997 will be acknowledged at the Banquet and the names will appear in the Banquet Program.

It is a very difficult task to single out certain individuals or units to receive these honors, as there were so many nominations to select from.

We hope that all department members will attend the Banquet on July 25, 1998 to offer support to the Awards Recipients.

Anthony H. Jackson, Chief of Police

U.S. Department of Justice



Federal Bureau of Investigation

In Reply, Please Refer to
File No. 245I-CV-58076

3005 Federal Office Bldg Cleveland,OH 44199 August 12, 1998

ALG 7 1990

ANIHONY H. JACASON,
CHIEF OF POLICE

Anthony Jackson Chief of Police Cuyahoga Metropolitan Housing Authority 2685 East 79th Street Cleveland, Ohio 44104

Dear Tony,

I wish to thank you and your department for providing valuable assistance in the takedown of "Operation Roadkill" on July 16, 1998. I would also ask that you extend my gratitude to members of your SWAT Team, Sgt. Justus and Officers Sopko, Kleinhenz, Likes, Nar, Styes, Morenz, Rives, Brennan, Stringfellow, Homerick, Ramsey, Hopkins who made entry at 3603 Buechner, Cleveland, Ohio; Detectives Olksew, Williams, Wilson, Rucker and Kuska, who searched 3447 East 121st Street, Cleveland, Ohio, and Detectives Hayhurst and Morgan who were a part of the search team at 15714 Parkgrove, Cleveland, Ohio. Also thank Detective Michael Shank, whose work was crucial over the entire investigation.

Sincerely,

Van A. Harp

Special Agent in Charge







PC E DEPARTMENT
5715 Woodland Avenue, Cleveland, OH 44104
P: (216) 426-7760 | F: (216) 361-3728
cmha.net

# **VIA HAND DELIVERY**

September 29, 2020

Paul Styles, Sergeant 2205 East 83<sup>rd</sup> Street Cleveland, Ohio 44104

Dear Sergeant Styles:

You are ordered to report to Lieutenant Maurice Brown (216-623-5464) at the Cleveland Division of Police, Homicide Unit, located on the 6<sup>th</sup> Floor, at 1300 Ontario Street, Cleveland, Ohio 44113 on <u>THURSDAY</u>, OCTOBER 1, 2020 at 0900 <u>HOURS</u> to be interviewed.

The interview will focus on your observations and involvement during a use of force incident that occurred on Tuesday, September 22, 2020 at the Stokes Social Service Mall, 6001 Woodland Avenue, Cleveland, Ohio 44104.

You are compelled to answer questions as a witness to the incident. Failure to do so may result in disciplinary action against you. An OPBA representative may be present during the interview pursuant to Article 6 – Employee Rights, Section 3, of the current Collective Bargaining Agreement between CMHA and the Ohio Patrolmen's Benevolent Association (OPBA).

BY ORDER OF

Andrés Gonzáléz *(*Chief *(* CMHA Police Department

Cc: Victor McDowell, Deputy Chief

Gregory Drew, Lieutenant

Member File







# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TENACITY \* RESPECT \* UNDERSTANDING \* SERVICE \* TRAINING

TO:

All Members

FROM:

Andrés González, Chief

DATE:

December 13, 2018

Page 1 of 1	ASSIGNMENTS	DN # 18-066
<u> </u>		

The following assignments will become effective Saturday, December 15, 2018:

Lieutenant Dale Homerick Lieutenant James Harris	to to	Commander's Office – Field Operations Commander's Office – Administrative Operations
Sergeant Kyle White Sergeant Theodore Troyer Sergeant Paul Styles Sergeant Jerry Lastuka	to to to	Detective Bureau & Property/Logistics Unit Planning Unit Basic Patrol, 1 <sup>st</sup> Platoon Basic Patrol, 2 <sup>nd</sup> Platoon
Officer Steven Kuska	to	Property/Logistics Unit

Members shall report to the respective Commander to receive further information regarding their assignments.

By order of,

Andres Gonzalez Chief



**DOLLAR THRIFTY GROUP** PO BOX 121295 DALLAS, TX 75312-1295

November 26, 2018

DOLLAR/THRIFTY CASE NUMBER: 000008990128

PAUL STYLES

This letter is to advise you that your bank wire transfer to Dollar Thrifty for the damages to the rental vehicle on May 17,2018 has posted the agreed settlement of \$10,066.93 to your claim for this loss.

Your claim will now be closed with no further financial responsibility owed for this loss.

If you have any questions regarding this matter, please contact me at the number below. We appreciate your business in choosing Hertz/Dollar/Thrifty and hope you will continue to do so for your future rental needs.

Sincerely,

Yoshiva Wilson Damage Recovery Specialist 405-775-6385 ywilson@hertz.com

COPY TO

MENSEZE FILE 
ASCHIEF

12/3/2018



# EMPLOYEE CHANGE OF NAME OR ADDRESS FORM

Name:Paul Styles	
Social Security Number (Last	4 digits):
Department: _Police	
New Name:N/A	Aattach appropriate documentation)
New Address:	Street City/State/Zip Code
Telephone Number:	
Effective Date: _19JUL18	Date Completed
Employee Signature	Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

**CMHA** 

Attention: Human Resources Department

8120 Kinsman Road Cleveland, Ohio 44104 Fax: (216) 348-8236

430 g REGIDAL KAS COURT 13 Sica P/S HOL. WKO. 7308 EXPLAIN PRIOR PAY ADJ. HERE 2000 2 R R HOULDAY Sick Z 2 - Oc Dals Z Sup 1250 19 WOP HOURS ANNUAL LEAVE SICK LEAVE COMP. HRS. USED HRS. WORKED REG. HOL. HRS. 120 ate q'o Z HRS TUO CODE I

210 POLICE & SECURITY
210 POLICE & SECURITY
Pay Ending: 01/13/06

#### INDUDUDATIONS WITH FOUND FOR POLICION COM

PAUL STYLES SSN: Case: 2005-00000137 Claim Number:

Period From 12/08/2005 To 01/10/2006 -- 4 Weeks 6 Days TJ's Payment Rate: 678.00 Gross Amount: 3293.14

Dedugtions :

CUYAHOGA METROPOLITAN HOU TTS&A

1426.71 S & A REIMBURSEMENT

Total Deductions:

1426.71

Net Payment:

1866.43

M:mo: TTA Rate = 678.00 Per Week

Total = 3293.14

EIN: 296647073

PAUL STYLES

EMPLOYER: Cuyahoga Metro Housing Authority CMHA-SECURITY FORCE #403

PAUL STYLES

CASE: 200500000137

VOUCHER: 32506

CHECK: 34604

DOI: 12/07/2005 ISSUED: 01/13/20



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TENACITY \* RESPECT \* UNDERSTANDING \* SERVICE \* TRAINING

TO:

All Members

FROM:

Andrés González, Chief

DATE:

January 2, 2018

Page 1 of 1	ASSIGNMENTS	DN # 18-003

The following supervisory assignments shall become effective Tuesday, January 2, 2018:

Sergeant Jackelyn Burgos

from

Planning

to

Special Investigations

Sergeant Paul Styles

from

CIU

to

Planning

By order of,

Andres Gonzalez, Chief



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TENACITY \* RESPECT \* UNDERSTANDING \* SERVICE \* TRAINING

#### Glock Model 17 Firearm Responsibility Form

I (Print Full Name) acknowledge issuance to me of a Glock Model 17 firearm which is the property of the Cuyahoga Metropolitan Housing Authority Police Department (CMHAPD). I acknowledge and understand that the firearm remains the property of CMHAPD and must be surrendered upon suspension, termination, or extended illness as provided by CMHAPD's rules and regulations.

I acknowledge and understand that I will be held accountable and responsible if my CMHAPD issued firearm becomes unserviceable due to loss, damage, or circumstances determined to have been caused by my intentional act, misuse, or neglect. Should my intentional act, misuse, or neglect render the firearm unserviceable, I will reimburse CMHA the cost of repair and/or replacement.

I acknowledge and understand that I will safely transport and store the CMHAPD issued firearm in accordance with all applicable laws and ordinances.

I acknowledge and understand that I am <u>not</u> authorized to carry my CMHAPD issued Glock Model 17 firearm while engaged in any secondary employment.

I acknowledge and understand that misuse or neglect of a CMHAPD issued weapon shall be the subject of an investigation and may be the basis for disciplinary action, up to and including termination from employment, consistent with CMHAPD regulations and the Personnel Policies and Procedures Manual of the Cuyahoga Metropolitan Housing Authority.

Issued Glock Model 17 Serial #: \$ATU \$50	
Member Signature: // July 1997	Date Issued: 02mm/16
Issued by:	Date Issued: OZMAY ZOIL

	CUYAHOGA METROPOLITAN HOUSING AUTHORITY INTEROFFICE MEMORANDUM
TO:	Lena Hayes, Payroll Manager
FROM:	Police Department
DATE:	Lt. Ronald J. Morenz #626 (Print Shift Supervisor's Name)  January 25, 2006
SUBJECT:	Payroll Discrepancy
	RE: Paul Styles (Print Employee's Name)
Soc. Sec.	·
The above did not red fe returned to w he 24 hours he v	e employee, during the pay period ending: January 13, 2006 Ceive the following: 24 hours of pay due to him being off on a Workers Comp claim. Ork on Wednesday 11JAN06, but timecards were already submitted. I request that he be paid for worked.
_	Supervisor's Signature

A copy of the time card and pay stub must be attached.

Payroll Files cc:

> \*\*\* ZEND 2NCCE22ENF \*\*\* 978 : Joh number

> > : 0K Status

: 003 Pages sent

: Jan-26 16:52 emit bn3

[6:3] 32-nst : Start time

> : 003 Number of pages

94353886 01

: 19u-26 16:51 Date & Time

> 978 : Job number

Telline 10 : CMHA POLICE

Date & Time: 2006-Jan-26 16:52

Ilt Report

07/19/2018 10:53 Serial No. A79K011003554

149378

	Addressee	Start
HR		07-19
Note	PPS:Page Separ	POL:Pol ation T: C:PC-FA; ATX:Re-1 ss Fax.

Prints Result Note 01/001

Result

nication, PW-OFF: Power Switch OFF, 5: Continue, No Ans: No Answer, Full: Memory Fill, LOVA: Receiving length Over, or, DC:Decode Error, MDN:MDN Response Error, Ty Memory Document Print, SEND:Compulsory Memory Document Send.



#### **EMPLOYEE CHANGE OF NAME OR ADDRESS FORM**

Name:	16
Social Security l	4 digits):
Department: _P.	
New Name:	/A
New Address:	Street
2	City/State/Zip Code
Telephone Number:	
Effective Date: _19JL _1	8
Employee Signature	19 Jul 18 Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

**CMHA** 

Attention: Human Resources Department

8120 Kinsman Road Cleveland, Ohio 44104 Fax: (216) 348-8236



#### **CMHA** CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas Burdyshaw #640, Lieutenant

FROM: Paul A. Styles #656, Sergeant

PAGE		
PAGE	SUBJECT	DATE
1 of 1	Time Off in Lieu of Shift	15MAY12

I respectfully request time off in Lieu of shift with-pay on Wednesday June 13, 2012, to attend the Ohio Police and Fire games to be held in Canton, Ohio. I will be participating in the Martial Arts portion, this is an annual one day event that I have participated in the past and have won medals.

Respectfully,

I recommend for

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SPROWD-School 16 May 2012 CC. Mouse Fire.



## CUTAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



## BODY ARMOR EQUIPMENT RESPONSIBILITY FORM

Date: 16FEB12	
ı, Paul Styles	(print name), have received
one Safariland Second Chance - BA-3A00S-SM01	ballistic vest.
I understand that it shall be worn at all times while on-d	uty or when working approved
secondary employment. This body armor is intended to	_ · · ·
duties and my failure to wear it as prescribed will result in	•
	·
Should this body armor become lost or stolen, I understan	d that I will be liable for the cost of
its replacement.	
Front Panel Serial Number: 12057110	
Rear Panel Serial Number: 12057111	
Date of Inspection: 16FEB12	
1	
Employee // // Eller	
Signature:	Date: /// / / / / / / / / / / / / / / / / /
Inspected by:	1/5-20
	Date: 16/8/3/2



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas Burdyshaw #640, Lieutenant

FROM: Robert Dunham #238, First Platoon Protection Officer

1 of 1 Rein STOTEMENT of ormed STOTUS	DATE 4-17-2011
Due to that I, Robert Donham #238 have sen of three days and I am in Angen Management of time. I am asking that I can go to the Range	rued my suspension counseling at this
	1/y Dunhom #238
Le able to attend the Range and return to avent of status.	

APROVED -PROPORE NECESSARY DIF & DOCUMENTS -

APR 19 2011

DEPUTY CALER DAVID T. SOLOMOR

20 April 2011 CC: Nourse Five

CMHAPD94-001Eff: 01JAN03Rev.26FEB03.

Cely



#### **CMHA**

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



**TO:** Payroll Department

FROM: Paul A. Styles #656 Sergeant

PAGE 1 of 1	Compensatory Time Payout Request	DATE 05AUG09
	ting disbursement of my accumulated compensatory time beginning on 01J. gh the pay period ending <u>07AUG09</u> , pursuant to my collective bargaining aA.	
	My Social Security Number is:	
accordance	I that I may make this request only one (1) time per year. I also understand with policy, C.M.H.A. will automatically disburse any remaining compensa in December 2009.	
	Respectfully,	
	Paul A. Styles, Sergeant	· 6
FOR	PAYROLL USE ONLY:	
	Hours paid (Code 323-Comptime Payoff P/S) :  Pay Ending date :	



#### **CMHA** CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Dale Homerick #636, Lieutenant

FROM: Paul A. Styles #656, Sergeant

F	AGE	SUBJECT	DATE
1	1 of 1	Response to a Question on my Duty Report for week Ending	09MAR10
		26FEB10	

On 07MAR10, I was assigned to the Complaint Investigation Unit. DC Solomon returned my duty report dated 26FEB10 with a question form Chief Gonzalez. The following is my response.

On 25FEB10, I indicated on my duty report that I attended a court case in room 16-A for an off-duty incident. This was an incident that occurred in the summer of 2009, where I was leaving my Martial Arts school located at 8311 Superior Avenue. While walking to my personal vehicle, I observed three males walking west bound on Superior Avenue. One of them brandished a weapon showing it to the other two. I notified the Cleveland Police Department who arrived and arrested the male off of E. 79th and Superior Avenue. The only interaction I had was to identify the male with the gun. According to CPD Sgt. Bickerstaff who was on scene, they would handle everything.

When I received the subpoena, I was not aware that the defendant was this same person. When the prosecutor notified me of this information, I advised him it was an off duty incident and nothing to do with CMHA. The entire time conferring with the prosecutor was approximately five minutes.

The day of the incident, I was extremely exhausted from working out; my first thought was to apprehend the suspect but decided not to for fear of retaliation against the school. Also it was an oversight on my part not making notification of the incident when it occurred.

Respectfully,

FET-Paul Styles Styles #656
Paul A. Styles, Styles Pauce WORK! GLAD
YOU WHEE NOT IN JURED -



# C.M.H.A. CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO:	Sof	Stre	5"656
FROM:	Po	Roll	70
DATE:	300	CTOL	

"Sworn Officers who fail to meet proficiency requirements will be granted a fourteen (14) day grace period in which to become proficient. Within this fourteen (14) day period the officer must, on his own time, report to the range for remedial training and certification. Officers who fail to achieve certification during this grace period shall be placed on leave without pay. If the Officer has failed to achieve certification after one (1) week of leave without pay, he shall be separated from the Police Department for failure to maintain certification."

You are therefore notified that no later than Solow you must successfully demonstrate proficiency with your duty weapon as required by the CMHA Police Department. Failure to do so will result in a request for your immediate suspension being forwarded to the office of the Chief of Police. If you have any questions about this matter, please do not hesitate to contact either Det. Beichler or Lt. Morenz.

I received this notification on 36000	I personally hand delivered this notification on	5000E
A M L DATE	at 1700 Hrs	DATE
x SGT- Joy A. Stylo 656	Range Officer: Albert 100 70	

500-20

COMDOC

NOV 0 2 2008



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY Application for Outside Employment Authorization

I REQUEST PERMISSION TO ENGAGE IN OUTS	IDE EMPLOYMENT			
First Name Paul	Last Nan	Chdoo		
Street Address	INdi	ile	Apartment/	
City	Zip		Unit #	
CMHA			ritone	
Position Police Sergeant - Nopba				
PROPOSED OUTSIDE EMPLOYER			- Pro- Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Cont	
Company Name American Communications Network	(			
Address				
City	71.			
Contact	Zip		Telephone	
Person		Title		
Title of the Position	The	estimated length of	employment is:	
Duties You Will Perform				
Hours You Will Work				
NOTE: CMHA ISSUED UNIFORMS, TOOLS, AND EQUIPMEN	IT ARE NOT PERMITTED TO BE U	SED WHILE ENGAGE	D IN OUTSIDE EMPLOYMEN	NT
IMPORTANT NOTICE				
I have read and understand the CMHA policy on Outside E	mployment as stated in Section	A-XII of the Personn	el Policies and Procedures N	fanual and agree to shide by its
<ul> <li>adversely affect the working hours of the employer tire, or reduce the efficiency or performance of conflict with the Conflict of Interest Policy as stall further understand that:</li> <li>CMHA has no responsibility or liability for my and a result of my conduct during my outside employed it must inform Human Resources of any changes.</li> <li>CMHA has the right to revoke its permission allowed in My outside employment must be consistent with a violation of any of the above provisions by me.</li> <li>A letter must accompany this request for outside to me. If I have contracted my services, the accompany this request for outside to me. If I have contracted my services, the accompany this request for outside to me. If I have contracted my services, the accompany this request for outside to me. If I have contracted my services, the accompany this request for outside to me. If I have contracted to supply additional informations.</li> </ul>	the employee in his/her CMHA p sted in Article B-XIII of this Admin ctions resulting from my outside byment. It to my outside employment state bying me to work outside emplo th CMHA's Conflict of Interest poi e may result in revocation of CMI de employment from the propose companying letter shall specify wi ember 31st of each calendar year.	employment nor w  us. yment at any time. licy. IA's permission, em ed employer indicat to is providing the c	ployee discipline, or both. ing that workers' compensa overage, the outside emplorenewed each calendar yea	r any lawsuit filed against me as tion coverage is being provided ver or me.
Print Name See attached documentation				
CHAIN OF REVIEW				
Andres Gonzalez	A = 141 A - 1 - 10 - 10 - 10 - 10 - 10 - 10 -			
Department Director Name and Signature		2 Approve	CDeny	Date 1/9/2020 3:05:21 PM
Mark Hunt				
Director of Compliance Name and Signature		2 Approve	□Deny	Date 1/9/2020 3:34:29 PM
Elizabeth McCafferty				
Director of Human Resources Name and Signature		8 Approve	□Deny	Date 1/10/2020 1:03:59 PM
FINAL DECISION & Approve Deny	Date: 1/10/2020 1:03:59 F	м		



### CUYAHOG METROPOLITAN HOUSING AUT RITY POLICE DEPARTMENT



### **COMPENSATORY TIME PAYOUT REQUEST**

TO:	CMHA FINANCI	AL SERVICES / PAYROLL DEPARTMENT	• _
FROM:	Paul A. Styl	es	
		ge Number of requesting member)	-
'AGE	SUBJECT		DATE
1 of 1	Compen	satory Time Payout Request	200CT19
collective I underst hat in acc	bargaining agreer and that I may ma cordance with poli	ent of my accumulated compensatory time per ment with CMHA for the time period shown be ke this request only one (1) time per year. I a cy, CMHA will automatically disburse any re- me in December of this year.	pelow. also understand
	Pav Period	January 01, 2019 25OCT19	
	Current Balance		
dministrati	ve Commander Revie	Respectfully,  SGT A COURT A - S Signature of requesting member  ow: Run +604 Date:	10/21/19
	FOR PAYROLL DI	EPARTMENT USE ONLY:  Hours paid (code 323 - Comptime Payoff P/S):	
		Pay Ending Date:	

voices

P 1

10/21/2019 13:32

Serial No. A79KD11003554

TC: 272230

Addressee	Start Time	Time	Prints	Result	Note
Payrol1	10-21 13:32	00:00:17	001/001	OK	

Note

[MR:Timer TX, POL:Polling, ORG:Original Size Setting, FME:Frame Erase TX, DBG:Page Separation TX, CTX, Mixed Original TX; CALL; Manual TX, CSRC:CSRC; UD:Forward, PC:PC-FAX, BND:Double-Sided Binding Direction, Sp:Special Original FORE:F-COde, RTX:Re-TX, RLY:Relay, MBX:Confidential, BUL:Bulletin, SIP:SIP Fax:PABR:IP Address Fax: I-FAX:Internet Fax

Result

K: Communication OK. S-OK: Stop Communication. PW-OFF: Power Switch OFF.
EL: RX from TEL. NG: Other Error. Cont: Continue. No Ans: No Answer.
El: RX from TEL. NG: Other Error. Cont: Continue. No Ans: No Answer.
El: RX from TEL. NG: Other Error. DI Lour. Receiving length Over.
OVR:Receiving page Over. FIL: File Error. DC:Decode Error. MDN:MDN Response Error.
SN:DSN Response Error. PRINT:Compulsory Homory Document Print.
EL:Compulsory Memory Document Delte. SEND:Compulsory Memory Document Send.



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



#### **COMPENSATORY TIME PAYOUT REQUEST**

TO: CMHA FINANCIAL SERVICES / PAYROLL DEPARTMENT

FROM: Paul A. Styles

(Full Name and Badge Number of requesting member)

PAGE	SUBJECT	DATE	l
1 of 1	Compensatory Time Payout Request	20OCT19	ĺ

I am requesting disbursement of my accumulated compensatory time pursuant to my collective bargaining agreement with CMHA for the time period shown below.

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, CMHA will automatically disburse any remaining compensatory time owed to me in December of this year.

Beginning:	January 01, 2019
Pay Period Ending:	25OCT19
Current Balance	54 hours
	Respectfully, 5GT- Noul A- THE
Administrative Commander Revie	Signature of requesting member  W: Rull +1604 Date: 10/21/19
FOR PAYROLL DE	PARTMENT USE ONLY: Hours paid (code 323 - Comptime Payoff P/S):
	Pay Ending Date:



### CUYAHOGA METROPOLITAN HOUSING AUT. ORITY POLICE DEPARTMENT



### **COMPENSATORY TIME PAYOUT REQUEST**

	Paul A. Styl	es	
		e Number of requesting member)	_
'AGE	SUBJECT		DATE
1 of 1	Compen	satory Time Payout Request	05NOV19
collective	bargaining agreer	ent of my accumulated compensatory time perent with CMHA for the time period shown like this request only one (1) time per year. I	below.
hat in ac	cordance with poli	cy, CMHA will automatically disburse any reme in December of this year.	
	Beginning:	January 01, 2019	
	Pay Period Ending:	08NOV19	
	Current Balance	54.0 Hours	
		Respectfully,	
		Signature of requesting member	3 (SI
Administrat	ive Commander Revie	ow: Cal Ri (+604 Date:	11/5/19
	FOR PAYROLL DI	EPARTMENT USE ONLY:  Hours paid (code 323 - Comptime Payoff P/S): _	
		Pay Ending Date:	

P 1 11/05/2019 11:02

Serial No. A79K011003554

TC: 276347

Addressee	Start Time	Time	Prints	Result	Note
Payrol1	11-05 11:02	00:00:17	001/001	OK	

Note

MR:Timer TX, POL:Polling, ORG:Original Size Setting, FME:Frame Erase TX, PG:Page Separation TX, MIX:Mixed Original TX, CALL Hanual TX, CSRC:CSRC, WD:Forward, PC:PC-FAX, BND:Double-Sided Binding Direction, Sp:Special Original CODE:F-Code, RTX:Re-TX, RLY:Relay, MBX:Confidential, BUL:Bulletin, Sip:SiP Fax. PADR:ID Address Fax: I-FAX:Internet Fax

Result OK: Communication OK: S-OK: Stop Communication, PW-OFF: Power Switch OFF.

TEL: AX from TEL: NG: Other Error, Cont: Continue, No Ans: No Answer:
Refuse: Receipt Refused, Busy: Busy: M-Full: Memory Full: LOVA: Receipting length Over
POWA: Receipting page Over, FIL: File Error, DC: Decode Error, MDN: MDN Response Error,
DSN: DSN Response Error, PRINT: Compulsory Memory Document Print;
DEL: Compulsory Memory Document Delete, SEND: Compulsory Memory Document Send.



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



#### **COMPENSATORY TIME PAYOUT REQUEST**

TO: CMHA FINANCIAL SERVICES / PAYROLL DEPARTMENT

FROM: Paul A. Styles

(Full Name and Badge Number of requesting member)

PAGÉ	SUBJECT	DATE
1 of 1	Compensatory Time Payout Request	05NOV19

I am requesting disbursement of my accumulated compensatory time pursuant to my collective bargaining agreement with CMHA for the time period shown below.

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, CMHA will automatically disburse any remaining compensatory time owed to me in December of this year.

Beginning :	January 01, 2019
Pay Period Ending:	08NOV19
Current Balance	54.0 Hours
	Respectfully,  Signature of requesting member
Administrative Commander Revie	a. P. I Heave wholes
FOR PAYROLL DE	PARTMENT USE ONLY: Hours paid (code 323 - Comptime Payoff P/S);

#### Paul A. Styles

Cuyahoga Metropolitan Housing Authority Division of Police 5715 Woodland Ave. Cleveland, Ohio 44104

#### Dear Chief Gonzales:

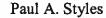
In the past fourteen years, my law enforcement experience has prepared me for the position as a Commander. My professional experience demonstrates my dedication to protecting life and property to the residents of CMHA, their guests, and the community. Continuing my professional career at the Cuyahoga Metropolitan Housing Authority Division of Police is my goal.

Enclosed is my resume for review. I look forward to meeting with you to discuss how I can continue to contribute my skills and knowledge with the residents, the organization, and the community.

Sincerely,

Paul A. Styles
Narcotics Sergeant

CMHA Police Department



**OBJECTIVE:** Obtain a position in the Law Enforcement Field where I can take full advantage of my supervisory training and instructor skills to teach and provide leadership in and out of the field.

#### **EMPLOYMENT HISTORY**

**Patrol Sergeant** 

Cuyahoga Metropolitan Housing Authority Police Division, Cleveland, Ohio 1993- Present Providing protection of life and property, Issuance of citations, arresting violators, report writing. Oral testimony in court, supervising patrol and protection officers with daily needs on a day-to-day basis. Also served as a member of the Community Policing Bike Unit and Tactical Response Unit.

**Assistant Physical Director** 

Central Y.M.C.A, Cleveland, Ohio 1980-1992

Directed and supervised the department of physical activities. Responsibilities included swimming instructions, lifeguard, basketball programs, weight lifting, nautilus equipment usage and development of children programs.

#### **FURTHER EXPERIENCE**

**Assistant Instructor** 

Member of the Northern Wind Kung Fu Club

Hold the rank of Orange Sash that is equivalent to a Black Belt.

#### **EDUCATION**

Diploma

John Hay High School, Cleveland, Ohio 1979-1982

**Basic Electronics** 

C.E.I., Cleveland, Ohio 1982-1983

Digital Electronics Technology

P.S.I. Institute, Cleveland, Ohio 1984-1985

Private Security/O.P.O.T.A. Certificate

Safeguard Institute, Cleveland, Ohio September-December 1992

O.P.O.T.A. Certificate

Shaker Heights Police Academy, Shaker Heights, Ohio 1994

#### **OBJECTIVE**

To obtain a position in the Law Enforcement Field where I can take full advantage of my supervisory training and instructor skills to teach and provide leadership in and out of the field.

#### EMPLOYMENT HISTORY

#### **Narcotics Sergeant**

Cuyahoga Metropolitan Housing Authority Division of Police Cleveland, Ohio 1993-Present. Provide protection for life and property, issuance of citations, arresting violators, report writing and oral testimony in court. Also supervise narcotics unit detectives with assignments on a day-to-day basis. I also served as a member of the Community Policing Bike Unit and Tactical Response Unit.

#### **Assistance Physical Director**

Central Y.M.C.A, Cleveland, Ohio 1980-1992

Directed and supervised the department's physical activity programs. Responsibilities included swimming instructions, life guarding, basketball programs, weight lifting, nautilus equipment usage, and development of children programs.

#### **FURTHER EXPERIENCE**

#### Diploma

John Hay High School Cleveland, Ohio 1979-1982.

#### **Basic Electronics**

C.E.I., Cleveland, Ohio 1982-1983 Course Worked Basic Electronics.

#### **Digital Electronics Technology**

P.S.I. Institute, Cleveland, Ohio 1984-1985 Certificate- Digital Electronics Technology.

#### Private Security/ O.P.O.T.A

Safeguard Institute, Cleveland, Ohio September - December 1992 O.P.O.T.A Certificate

#### **Police Academy**

Shaker Heights Police Academy, Shaker Hts, Ohio 1994 O.P.O. T.A Certificate.

C.M.H.A. Police Department in House Program received Certification in the areas of Asp Baton Instructor and Pepper Mace Instructor.

#### **Out Side Department Training:**

Mountain Bike Training Cuyahoga Community College, F.B.I. Basic SWAT School Camp Perry Port Clinton Ohio, Forty Hours First Line Supervision Cuyahoga Community College, SWAT School for High Risk Search Warrants and Raids, Police Executive Administrative Leadership School, Monadnock Expandable Baton Instructor, Defensives Tactics Instructor, 1st Responder HazMat/ WMD/PPE Awareness, Controlled/ Direct Buys in Drug Investigations.

### **Additional Experience**

Member of the Northern Wind Kung-Fu Club
Position Head Instructor I hold the rank of 2<sup>nd</sup> Degree Orange Sash.



#### **CMHA**

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Ronald J. Morenz #626, lieutenant- Special Operations

FROM: Paul A. Styles #656, Sergeant- Narcotics Unit OIC

PAGE	SUBJECT	DATE
1 of 1	Vision for the Police Department	19JUL07
, ·	·	

Sir,

I accordance to DN #07-065, my vision of the Police Department should be a model Department with strong leadership and having professional Police Officers serve with pride and dignity. They should also have the necessary equipment to perform their duties to minimize injuries. I also visualize this Department as a training facility for future law enforcement cadets.

Respectfully,

SGT. Powl 5tyles #656
Paul A. Styles, sergeant

NAME STYLES										PAUL										ANTHOMY MIDDLE/15/93										\RTI	Police											
DATE OF BIRTH 7-5-63										FIF	DATE OF HIRE								MIDDLE / 15/93									BADGE NUMBER 656														
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FMLA Approved 12/7/05 - 1/10/06

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APPENDIX / P&P 1.10

I REQUEST PERMISSION TO ENG	GAGE IN SECONDARY	<b>EMPLOYM</b>	ENT	
First Paul Name	Last Name	Styles		
Street Address			Apartment/ Unit #	
City	Zip		Phone	
SWORN POLICE OFFICER	RESERVE OFFICER		PRO	TECTION OFFICER
NAME OF PROPOSED SECONDA	ARY EMPLOYER			
Company American Communications	Network			
Address				
Contact Cols	Zip		Telephone	
Person	· · · · · · · · · · · · · · · · · · ·	No. Land.		Business Owner
The estimated length of employment is:		My hourly rate of pay will be:	N/A	
1 3 1 1	ot to exceed twenty-eight (2	•	-	, , , , , , , , , , , , , , , , , , ,
or twelve (12) no	urs while on a vacation day		rs on a wo	rkday.
Police Commission		or utmitles	1075 01	
Required? YES NO	Generic Police Uniform Required?  YES	NO 🛛	1	iHA PD UNIFORM AND DEPARTMEN' 'EAPONS ARE NOT AUTHORIZED.
IMPORTANT NOTICE				
<ul> <li>I understand the CMHA Chief of Police shall be a large of the period.</li> <li>I have not used more than fifteen (15) do month period.</li> <li>I understand that I MAY NOT engage in se distribution or dispensing of alcoholic bevelow of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period of the period</li></ul>	cater than a written reprimand ys or more than one-hundred condary employment with proverages nor on police duty in findary employer's Workers' Come MPLOYMENT IS OF A POLICE 1000 PER OCCURRENCE AND \$2, UNDERSTAND THAT MY REQUICATE OF LIABILITY AND POLICE does not authorize the use of the condary of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of the condense of th	within the last twenty (120) ho posed employe ont of such prespensation Certinature, THAT COOO,000 AGGREVEST FOR SECONT ENDORSEMENT the CMHA unif	two (2) year ours of sick to or whose pri mises. Ificate must CMHA REQU GATE. CM NDARY EMP IT. (See App form or any	rs.  ime during the previous 12- mary business involves the be provided.  JIRES A CERTIFICATE OF LIABILITY HA MUST BE ADDED AS AN LOYMENT WILL BE DENIED IF I pendix B, P&P Ch. 1.13) department issued weapon
Print Name Paul A. Styles				JIDEC19
SUPERVISOR'S ENDORSEMENT				
The above member has used 6.30 sick hou	rs in the past twelve (12) mon			
Supervisor's Signature	Behal.		Date	01-01-2020
Commander's Signature	On last-		Date	1/2/20
Deputy Chief's Signature	well #602		Date	1/1/2020

APPENDIX B P&P 1.13



## Request for Certification for Outside Employment

Request for Cel		- utsia	c Lilipi	
MEMBER INFORMATION			Treat-	
First Paul Name	Last Name	Styles		
Street Address			Apartmen Unit #	V A
City	Zip		Phone	15
SWORN POLICE OFFICER	RESERVE OFFICER		PR	OTECTION OFFICER
MEMBER AUTHORIZATION				SEE EST II III - SEE SEE
I HEREBY AUTHORIZE THE CMHAPD TO ACCESS AND OBTA	AIN RECORDS FROM THE BELOW-LIS	TED PROPOSED	EMPLOYER.	
MEMBER SIGNATURE Jan A. Sty	<u> </u>		DA	ATE 31DEC19
NAME OF PROPOSED SECONDARY EMPLOYER	3		2 100	
Company American Communications	Network			
Address	Te	elephone		7. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.
Supervisor Self	· ·	Title In	dependen	t Business Owner
Duties You Will Consultant Perform		-		1 100000 00.18
Police Commission YES NO NO	Generic Police Uniform Required?	YES 📋	NO 🔀	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPON ARE NOT AUTHORIZED.
<ul> <li>CMHA does not authorize its members to engathe employer's current Workers' Compensation</li> <li>CMHA requires non-commissioned members to CMHA accepts no responsibility for members to responsibility for the acts of the employee whith the CMHA requires a Certificate of Liability Insurar permitting the Member to engage in secondar certificate language must read: "Cuyahoga Macoverage is primary and non-contributory with recognizing its position as an additional insured day notice for non-payment.</li> <li>CMHA does not authorize the use of the CMHA employer agrees to at all times indemnify and aries, Affiliates, directors, officers, agents, services, Affiliates, directors, officers, agents, services, and property of any party arising directly or indirect CMHA may request records associated with the CMHA Office of Legal Affairs may be contacted require additional assistance. BY SIGNING BELOW,</li> </ul>	on must be provided. To be listed on the employer's lickworking outside of CMHA. The ended in secondary employers in the amount of \$1,000,000 by employment, the Employer metropolitan Housing Authority in the any insurance carried by the ended in the certificate of insurance and the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carried by the end of the certificate of insurance carr	tense (commissemployee is an ayment.) If per occurrence ust include CN is an additional Institute shall contain the against any and g from bodily coto, the memberny questions compositions	sion). agent of the same and \$2,000,000,000,000,000,000,000,000,000,0	econdary employer who will accept further agreement and requires a policy endorsement day cancellation notice and a ten (10) in secondary employment. The y, its Board of Commissioners, Subsiditions, causes of actions, liabilities, losse ary, sickness, disease, death, or injury to ce of work on behalf of the employer.
REQUIREMENTS.				
Employer Signature			Dat	te 31DEC19

#### FOR CMHA USE ONLY

Title

Independent Business wner

TO THE CMHA - CHIEF EXECUTIVE OFFICER:		2 02//11 91-3	
I DO DO NOT D Endorse the above member's r	equest for secondary	employment.	
Chief of Police Chelica Sprilez Chef	1/8/2020	Date	



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Dale Homerick #636, Lieutenant

FROM: Paul A. Styles #656, Sergeant

PAGE SUBJECT	
	DATE
1 of 1 Secondary Employment Request Addendum	31DEC19
Secondary Employment Reducet Addendum	SIDECIS

In regards to this request, there is no Workers Compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving American Communication Network.

Respectfully,

Paul A. Styles, Sergeant



Date: July 14, 2008

# JYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



### **TASER X26 RESPONSIBILITY FORM**

Sgt. Styles #656	(PRINT FULL NAME) have received (8) hours of Crisis
	er Instruction. I have also received and understand the
Department's Use of Force Policy and Tase	r Policy. I further understand that the acceptance of a
	an lethal weapon, is not mandatory and that if I accept the Taser
	and Procedures governing Use of Force and Taser. I
	f Force are the same on and off duty including the guidelines for
reporting use of force incidents.	
Additionally, Lunderstand that if Lam in com	pliance with secondary employment requirements and
	aser X26 as an intermediate weapon. I further understand that
	of cartridges that may be deployed while engaged in authorized
secondary employment.	
- ·	erty of the Cuyahoga Metropolitan Housing Authority Police
	responsible and accountable for its use, activity, location, and
possession. Tam aware that the issuance of this equip	of the Taser X26 is intended to assist me in the performance of ment will result in disciplinary action. In no way may I transfer or
	equipment responsibilities to another agency employee or
individual outside of CMHA.	squipment recipe neighbor to another agency employee of
Should this Taser X26 become lost or stoler	n, I understand that I will be liable for the cost of its replacement.
I have read the above statement and vol	untarily accept a Taser X26.
Taser X26 Serial Number: x00-373271	
Holster X	
(2) 21 foot cartridges	1-1151
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Employee Signature:	Date 14JUL08
Issued by: Det. Beichler #54	Date 14JUL08
I have read the above statement and vol	untarily choose not to accept Taser X26 at this time.
Employee Signature:	Date
Witnessed by:	Date



#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



**TO:** Payroll Department

FROM: Paul A. Styles #656, Sergeant- Crime Suppression Unit OIC

PAGE 1 of 1	Compensatory Time Payout Request	DATE 17SEP07
	ing disbursement of my accumulated compensatory time beginning on 01JAN h the pay period ending 21SEP0707, pursuant to my collective bargaining agr	
	My Social Security Number is:	
accordance v	that I may make this request only one (1) time per year. I also understand tha vith policy, C.M.H.A. will automatically disburse any remaining compensator n December 2007.	t in y time
	Respectfully,	
	SGT- Sergeant # 651 Paul A. Styles, Sergeant	
	COMDOC	
FOR I	PAYROLL USE ONLY:  Hours paid (Code 323-Comptime Payoff P/S) :	
	Pay Ending date	

#### Transmission Report

Date/Time Local ID 1 Local ID 2

09-17-2007 216 361 3759 14:40:37

Transmit Header Text

Local Name 1

Line 1

Local Name 2

This document: Confirmed (reduced sample and details below)

Document size: 8.5"x11"



#### **CMHA CUYAHOGA METROPOLITAN** HOUSING AUTHORITY POLICE DEPARTMENT



TO: Payroll Department

FROM: Paul A. Styles #656, Sergeant- Crime Suppression Unit OIC

	PAGE	SWIFT	DATE
	1 of 1	Commence Wine Descrit Descrit	17SEP07
ł		Compensatory Time Payout Request	

I am requesting disbursement of my accumulated compensatory time beginning on 01JAN07 and going through the pay period ending 21SEP0707, pursuant to my collective bargaining agreement with C.M.H.A.

My Social Security Number is:

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, C.M.H.A. will automatically disburse any remaining compensatory time owed to me in December 2007.

Respectfully.

The # 656

	TT-VPP-TE EV E-7-7-000-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	*******************************
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Abbreviations:

HS: Host send

PL: Polled local

PR: Polled remote

MS: Mailbox save

MP: Mailbox print

CP: Completed

FA: Fail

TU: Terminated by user

TS: Terminated by system RP: Report

G3 Group 3

EC: Error Correct

HR. Host receive WS. Waiting send



#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



**TO:** Payroll Department

FROM: Paul A. Styles

PAGE 1 of 1	Compensatory Time Payout Request	DATE 23JUN06
	ng disbursement of my accumulated compensatory time beginning on 01JAI h the pay period ending <u>30JUN</u> 06, pursuant to my collective bargaining agre A.	
	My Social Security Number is:	
accordance vowed to me i	that I may make this request only one (1) time per year. I also understand the vith policy, C.M.H.A. will automatically disburse any remaining compensated in December 2006.	
FILLARD	Respectfully,	*
FATRICE SULLED	Strong A Styles, Sergeant	
	JUN 2.	2000
FOR I	PAYROLL USE ONLY:  Hours paid (Code 323-Comptime Payoff P/S) :	
	Pay Ending date:	

EDLM. 40 books/2)



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Payroll Department

FROM: Paul A. Styles

PA08	SUBJECT	
1 of 1	Compensatory Time Payout Request	23JUN06

I am requesting disbursement of my accumulated compensatory time beginning on 01 JAN06 and going through the pay period ending 30 JUN 06, pursuant to my collective bargaining agreement with C.M.H.A.

My Social Security Number is:

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, C.M.H.A. will automatically disburse any <u>remaining</u> compensatory time owed to me in December 2006.

FILLSON FOR PATRICE STATES 2 400000

Respectfully,

SCT ford A. Styles & GS 6

FOR PAYROLL USE ONLY:		·
	Hours paid (Code 323-Comptime Payoff P/S)	
	Pay Ending da	

CMHAPD94-062 27MAR03rev10AUG05

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Status : OK

Pages sent : 004

End time : Jun-26 08:23

Start time : Jun-26 08:21

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Number of pages : 004

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Oste & Time : Jun-26 08:21

Job number : 324

Machine ID : CMHA POLICE

Tel line : 2163613759

Date & Time: 2006-Jun-26 08:23

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EMPLOYEE'S SUPERVISO	OR MUST BRIEF	THE	EMPLOYEE	ON THE C	.M.H.A VOP,	THEN SIGN,
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	APPLICANT'S		TITICA	TION		
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By signing and submitting t			-	•		
License, that I do not have more than 6 violation points on my driving record and that I have not						
had more than two motor vehicle accidents where it has been determined that I was "At Fault"						
within the past 24 months. I have been briefed by my Supervisor on the C.M.H.A. Vehicle						
Operations Procedure, and agree to abide by all of its provisions. I understand that I may be						
personally responsible to reimburse CMHA fifty percent (50%) of the cost of repair, or						
50% of the current insurance deductible, which is currently one thousand dollars (\$1,000)						
for damages incurred in a motor vehicle accident determined to be "Preventable". I realize						
that any misstatements on this application, intentional or not, may result in the revocation of my						
C.M.H.A. Operator's Permit				-		•
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Paul A. Styles, Sergeant				wy H	10/10	10150
	Supervisor	r's C	ertification	n: "		
I certify that I have briefed the						
they are thoroughly familiar wit	h the type of motor	vehic	cles and/or eq	uipment tha	t they will be o	perating.
Printed Name and Title:	ust Prairie	S	Signature:	12	- 0.1	$\circ$
Rusalo J. Morenz, C	ピグ・ピンチング		is. (1.	w / /	- ULW	(2005
	24		- (		Revised January	//2005

### **CUYAHOGA METROPOLITAN HOUSING AUTHORITY** INTEROFFICE MEMORANDUM TO: Lena Hayes, Payroll Manager Police Department FROM: Lt. Ronald J. Morenz #626 (Print Shift Supervisor's Name) DATE: January 25, 2006 Payroll Discrepancy SUBJECT: RE: Paul Styles (Print Employee's Name) Soc. Sec. # (Employee's Soc. Sec. #)

returned to work on Wednesday 1	1JAN06, but timecards we	re already submitted. I rec	quest that he be paid for
24 hours he worked.			
			P 40
· · · · · · · · · · · · · · · · · · ·			JAN 3 1 20
			COMPOC A
			100111000

A copy of the time card and pay stub must be attached.

cc: Payroll Files

tology //3/



## CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All members of the Division of Police

FROM:

Anthony H. Jackson, Chief of Police

DATE:

September 2, 2005

Page 1 of 1 Assignment Changes	i i
1355gament Changes	DN #05-082

Sgt. Paul Styles #656 is transferred from 2<sup>nd</sup> Platoon Field Sergeant to Narcotics Unit OIC effective on Tuesday, September 6, 2005.

Sgt. Carol Rucker #632 is assigned to assist Sgt. Styles with a smooth transition, working day shift from September 6-9, 2005.

Sgt. Rucker is transferred from Narcotics Unit OIC to 2<sup>nd</sup> Platoon Field Sergeant effective on Saturday, September 10, 2005.

Sgt. Styles and Sgt. Rucker shall report to Lt. Ronald Morenz and Lt. Anastacio Vazquez respectively, for their assignments once the transition period is complete.

By order of,

Anthony H. Jackson,

Chief of Police

COMDOC

SEP E VES

	METROPOLITAN OFFICE OF SAFETY M OPERATIONS PE	ANAGEME	NT		TY 200	tyles
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/ off Road	A DDI TO LAW	TIC CER			_	JAN 20 75
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sy signing and sub	mitting this application	. I attest tha	t I pres	ently hav	ve a valid O	hio's Driver's
icense, that I do n	ot have more than 6 vio	lation poin	ts on m	y driving	record and	that I have not
ad more than two	motor vehicle accidents	s where it h	as beer	ı determi	ned that I w	as "At Fault"
vithin the past 24 r	nonths. I have been brie	∍fed by my	Superv	visor on t	he C.M.H.A	A. Vehicle
perations Procedu	ire, and agree to abide b	by all of its	provis	ions. I ui	iderstand t	hat I may be
ersonally respons	sible to reimburse CM	HA fifty p	ercent	(50%) o	f the cost o	f repair, or
0% of the curren	t insurance deductible	, which is	curren	tly one t	housand do	ollars (\$1,000)
or damages incur	red in a motor vehicle	accident o	letermi	ined to b	e <u>''Prevent</u>	able". I realize
nat any misstateme	nts on this application,	intentional	or not,	may rest	alt in the rev	vocation of my
.M.H.A. Operator	's Permit and disciplina	ry actions	up to a	nd includ	ing dismiss	al. I am
esponsible to advis	e my supervisor and Sa	fety Manag	ement	of any cl	nanges in m	y driving status
uring the course of	f the year. I authorize th	ne Office of	Safety	/ Manage	ment to obt	tain a copy of
ly driving record fi	rom the Bureau of Moto	or Vehicles				_
rint Name and Title ul A. Styles, Sergear	nt #656	Sign	ature \	SGT.	Sty	No # 456
		or's Certi	ficatio	n.	<del></del>	
certify that I have he	iefed the above employee				rations Dec	
ey are thoroughly fa	miliar with the type of mo	tor véhicles	and/or e	ancie Ope aninment	that they wa!	The operation
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#### **CMHA** CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All members of the Division of Police

FROM:

Anthony H. Jackson, Chief of Police

DATE:

September 9, 2004

	Page 1 of 1	Supervisor Transfers	DN #04-075
--	-------------	----------------------	------------

Effective on Monday, September 13, 2004 the following supervisors are transferred:

Sgt. Melvin Guinn #624 from Acting SWAT OIC to 3<sup>rd</sup> Platoon

Sgt. Dale Homerick #636 from 1<sup>st</sup> Platoon to Acting SWAT OIC Sgt. Patrick Donaldson #642 from 3<sup>rd</sup> Platoon to 1<sup>st</sup> Platoon Sgt. Paul Styles #656 from 3<sup>rd</sup> "A" Platoon to 2<sup>nd</sup> Platoon Sgt. Christopher Jakub #646 from 2<sup>nd</sup> Platoon to 3<sup>rd</sup> "A" Platoon

By order of,

Anthony H. Jackson,

Chief of Police



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Payroll Department

FROM: Paul A. Styles 3656

1 of 1	Compensatory Time Payout Request	DATE 15JUL04
	ting disbursement of my accumulated compensatory time beginning 0 JL04, pursuant to my collective bargaining agreement with C.M.H.A.	
	My Social Security Number is:	

I understand that I may make this request only one (1) time per year. I also understand that in accordance with policy, C.M.H.A. will automatically disburse any <u>remaining</u> compensatory time owed to me in December 2004.

FORDING TO

Respectfully,

SGI SG JU 2 0

Paul A. Styles, Sergeant

SIANGER CHIEF

COMDOC JUI 20 74

FORWARD
JUL 2 0 2004

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(0 kg 40 kg

#656

### RECEIPT OF CMHA EMPLOYEE MANUAL

I have received a copy of the CMHA Employee Manual. I understand that the Manual is intended to be informative and explain policies, procedures, and benefits that effect my employment.

I further understand that CMHA's policies, procedures, and benefits may be changed, disregarded, or terminated by CMHA in its discretion, at any time and with or without notice, except in areas specifically addressed in the collective bargaining agreement.

I agree that I have the responsibility to read and understand the Manual, including CMHA's policies regarding General Harassment and Sexual Harassment. I understand that this Manual supersedes all other employee manuals.

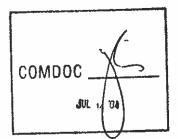
Date

Employee Name (Print)

Police Department

Signature

RECEILL HICTACICA





### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Sharon E. Barto, Administrative Commander

FROM: Tyrone M. Cooper, Sergeant - Complaint Investigation Unit OIC

PAGÉ	SUBJECT	DATE
1 of 1	Police Olympics Results	23JUN04

I polled the members of the department that participated in the 2004 Ohio Police and Fire Games and was advised of the following results:

- Lt. Tom Imes: Golf (54 Holes) Second Place Silver Medal
- Lt. Ronald Morenz: Bowling (Team) Fourth Place
- Sgt. Paul Styles: Karate (Kumite) First Place Gold Medal
- Sgt. Tyrone Cooper: Karate (Kumite) Second Place Silver Medal Karate (Kata) - Second Place - Silver Medal
- Det. Thomas Williams: Bowling (Mixed Doubles) Second Place Silver Medal Bowling (Team) - Fourth Place
- PO Maurice Kennedy: Track & Field (100-Yard Dash) Fourth Place

Respectfully,

Tyrone M. Cooper, Serge

COMDOC

WO. 25 HIL

10

2 4 2004



RECEIVED IN THE OFFICE OF MAY 2 4 2004

## CUYAHOGA METROPOLITAN DEPUTY CHIEF POLICE DEPARTMENT



TO: Thomas Imes #628, Lieutenant

FROM: Paul A. Styles #656, Sergeant

PAGE	SUBJECT	DATE
1 of 1	Police Olympic Participation	19MAY04

Sir,

I am requesting Sponsorship (re-imbursement of my entry fee) to participate in the Ohio Police Olympics (Karate Event) on 16JUN04. The entry fee for participating is thirty (30) dollars for my event. I as also requesting Administrative leave for 16JUN04, which is the actual day of the Karate Event. I have participated in several past Olympics in the Karate events (1997 and 1998) and won numerous medals. I would like the opportunity to represent the Department again.

Respectfully,

tyles # 656 Paul A. Styles, Sergeant

20

COMDOC

and Barto;

logo. Flyler request is approved.

Sween as meh & have the military.

Copy to the Havin for convoc processing.

Copy to the Havin for Mally



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All Personnel

FROM:

Anthony H. Jackson,

Chief of Police

DATE:

February 24, 2004

Page 1 of 1	Assignment Changes	DN #04-014

Effective on Friday, January 23, 2004, P.O. Kevin Ishler #34 has been assigned as the Departments' representative on the U. S. Marshals Fugitive Task Force.

The following changes are effective immediately:

Sergeant Raymond Morgan #658 is assigned as the O.I.C. of the Internal Affairs Unit.

P.O. John Kleinhenz #08 is assigned as a Detective in the Internal Affairs Unit.

P.O. James Harris #03 is assigned as a Detective in the Narcotics Unit.

Sergeant Paul Styles #656 has been assigned as supervisor of CMHA Protection Officers working from 2200 – 0600 hours.

By order of,

Anthony H. Jackson, Chief of Police

COMDOG.

FFR 2 6 **2004** 



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Miles T. Cobbs, Deputy Chief of Operation

FROM: Wayne C. Yates, Patrol Commander

PAGE	SUBJECT	DATE
1 of 1	Protection Officer Supervisor	21 Aug 03
<del></del>		<u> </u>

Sir,

After a brief conversation with Lt. Imes it was recommended that Sgt. Paul Styles would be the best candidate for the position of Protection Officer Supervisor. I have selected Sgt. Styles to assume the duties of Protection Officer Supervisor.

Respectfully,

Wayne C. Yates, Patrol Commander

D. C. Murrey, This is when

THE RECOMMEDITION WAS

SENT, I CAN NOT LOCATE

BRY PAPER WORK OR E-MAIL

WHEN SET, STYLIS WAS

ASSIGNED

RESPECTABLY

WY GOT



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Wayne Yates, Patrol Commander

FROM: Thomas Imes, Lieutenant

PAGE	SUBJECT	
1 of 1	<b>7</b>	DATE
1 7 01 1	Protection Officer Supervisor	20AUG03
	<u> </u>	1

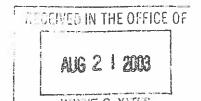
Sir,

Sgt. Paul Styles has been selected to assume the duties of Protection Officer Supervisor, and has been so advised.

Respectfully,

Thomas Imes, Lieutenant







### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Wayne Yates, Patrol Commander

FROM: Thomas Imes, Lieutenant

	SUBJECT	DATE
1 of 1	Protection Officer Supervisor	20AUG03

Sir,

Sgt. Paul Styles has been selected to assume the duties of Protection Officer Supervisor, and has been so advised.

Respectfully,

Thomas Imes, Lieutenant

COMDOC VALUE 21 03



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All Personnel.

FROM:

Anthony H. Jackson

Chief of Police

DATE:

August 14, 2003

Page 1 of	Transfer of Supervisory Responsibility	DN #03-103
		DIN 1/03-103

Effective Saturday, August 23, 2003, the supervisory responsibility for protection officers working 2200 to 0600 hrs. will be transferred from the second platoon to the third platoon.

The third platoon Watch Commander shall designate a third platoon sergeant who will be the primary immediate supervisor for the protection officers working during these hours.

The designated sergeant shall be scheduled to work 2100 to 0500 hrs. in order to handle scheduling, call offs and other logistical matters concerning the protection officers on the shift. Although, the sergeant will be the primary field supervisor for the protection officers on the shift, the Watch Commander is responsible for the overall supervision of all personnel on the platoon.

There shall be a coordinated effort between the second and third platoon Watch Commanders to insure a smooth transition of responsibility. They shall also coordinate their efforts to insure the protection officers are properly evaluated for year 2003.

By order of,

Anthony H. Jackson, Chief of Police



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



### **Ohio Ethics Law and Related Statutes**

I Paul A. STYLES, confirm that	I received a copy of the 20 pages of the
Ohio Ethics Law and Related Statutes as require	red under Revised Code 102.09(E).
Paul A. Style	6/27/02
Name	Date
	7-5-63
Social Security Number	Date of Birth

### Statement of Understanding Computer Access and Usage Procedures

I, the undersigned, have received and reviewed the Management Bulletin regarding Computer Access and Usage Procedures. I am fully aware that the CMHA computer and its related uses are intended to assist me in the performance of CMHA business and that any misuse as outlined in the Management Bulletin may be grounds for disciplinary action up to and including criminal prosecution.

BOX 13 COL



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All Personnel

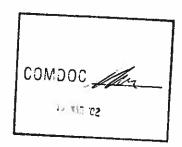
FROM:

Anthony H. Jackson,

Chief of Police

DATE:

March 12, 2002



Page 1 of 1	CALEA Conference Selections	DN #02-012

After reviewing all written requests received pursuant to DN #02-005, the following Department members have been selected to participate in the CALEA conference March 20-23, 2002 in Jacksonville, Florida.

Sergeant Paul Styles #656 Police Officer Theodore Troyer #96

A meeting of all personnel selected will be held on Friday, March 15, 2002 at 3:00pm at Police Headquarters. Attendance at this meeting is mandatory in order to participate in this conference.

By order of,

Anthony H. Jackson, Chief of Police



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



To: Ronald J. Morenz #626 Lieutenant-Third Platoon

From: Paul A. Styles #656

Sergeant- Third Platoon

**Date:** January 28, 2002

Subject: Guest Speaker at St. Boniface Head start



Sir,

I am respectfully requesting permission to speak in the capacity of a Police Officer at the St. Boniface Head start Daycare located at 3555 W. 52<sup>nd</sup> street Cleveland, 44102. My daughter attends their and her teacher Mrs. Wagner asked if I could speak to the kids about staying out of trouble, how to trust the police, and how to stay away from drugs amongst other various safety issues. Mrs. Wagner would like to have two sessions one in the morning and one in the after noon since they have half-day programs. She also asked about our K-9 if we could bring them along, I spoke with Sgt. Shaughnessy about this issue and he would be happy to assist. They request any Tuesday thru Friday in February except the 21<sup>st</sup> and 28<sup>th</sup>.

SIRI PERMISSION TO ATTEMS.

THAT CET. STYLES TO

1-35-02

Respectfully,

Paul A. Styles, Sergeant 656

ApproveD, M. Colle, D. Cher



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



### **EQUIPMENT RESPONSIBILITY FORM**

Date: 3/29/0/
I STYLES, PAUL #656 (PRINT FULL NAME) accept this Motorola
handheld radio, with the understanding that the radio is the property of the Cuyahoga
Metropolitan Housing Authority Police Department (CMHAPD) and that I am fully
responsible and accountable for its use, activity, location, and possession. I am aware
that the issuance of this radio is intended to assist me in the performance of my duties and
that any misuse of this equipment will result in disciplinary action. Should this radio
become lost or stolen, I understand that I will be liable for the cost of its replacement.
Model Number: HT1000  Serial Number: 749 A u 0 496  Microphone: YES  Case: YES  Charger: YES
Employee Signature: Pint A. Styles Date: 3/29/0/ Issued by: Date: 3-29-201
Issued by: Date: 3-29-201

David L. Bly Notary Public, State of Ohio Recorded in Cuyahoga Cty. My Collim. Expires 04-25-2004



### Interoffice Memorandum

MAR 0 2 2001

STANLEY C. MURREY DEPUTY CHIEF

DATE: March 2, 2001
TO: LENA HAYES PAYROLL MANAGER
FROM: POLICE DIVISION
Lt. Ronald J. Morenz (PRINT: SHIFT SUPERVISOR NAME)
SUBJECT: PAYROLL DISCREPANCIES
RE: Paul A. Styles (PRINT: EMPLOYEE'S NAME)
SOC. SEC.#
THE ABOVE EMPLOYEE, DURING THE PAY PERIOD ENDING: 3-2-01  DID NOT RECEIVE THE FOLLOWING: He was paid through the end of the pay
period due to early timecard submission. He called off the remaining 3 days in the pay period.
(SUPERVISOR'S SIGNATURE)
A COPY OF THE TIME CARD AND PAY STUB MUST BE ATTACHED.

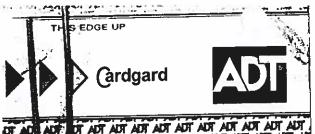
Board of Commissioners

CC: PAYROLL

CC: FILES

Bracy Lewis, Chairman \* Dwayne Browder, Vice-Chairman Louise Harris \* Mae Stewart \* Robert C. Townsend II Terri Hamilton Brown, Executive Director











To: Ronald J. Morenz Lieutenant

**Third Platoon Watch Commander** 

From: Paul A. Styles #656

Third Platoon Field Sergeant

Date: November 11, 2000

Subject: Access Control Card



Sir,

I respectfully request a replacement access control card, mine is not working due to wear and tear the stripping is wearing off.

Respectfully,

Paul A. Styles, Sergeant 656

DEPUTY CHIEF,

PLEMSE FORWARD

FOR PROCESSIVE

FOR PROCESSIVE

Thought to 801 16/10000









To: Ronald J. Morenz Lieutenant Third Platoon Watch Commander

From: Paul A. Styles #656

Third Platoon Field Sergeant

Date: November 11, 2000

Subject: Access Control Card



Sir,

I respectfully request a replacement access control card, mine is not working due to wear and tear the stripping is wearing off.

Respectfully,

DEPUTY CHIEF,

PLEASE FORWARD

FOR PROCESSIVE

FOR PROCESSIVE

TO 3626

Trought to 801 1610000 pelly

Roard & 2010000 Q 1414 From 80 (444)

**PUTERS, INC. NORTHERN COMPUTERS, INC. NORTHERN COMPUTERS, INC.** 

PUTERS, INC. NORTHERN COMPUTERS, INC., NORTHERN TOMPUTERS ENCOMPUTERS, INC., NORTHERN COMPUTERS, INC., NORTHERN COMP ERN COMPUTERS, INC. NORTHERN COMPUTERS INC. NORTHERN COMPUTE VCOMPUTERS, INC. NORTHERN COMPUTERS, PUTERS, INC. NORTHERN COMPUTERS INC. NORTHERN

i, INC. NORTHERN COMPUTERS INC. NORTHERN COMP

PUTERS, INC. NORTHERN COMPUTERS, NTRAL FACILITIES ACCESS CONTROL FORM

Last Name Styles		First NamePaul		Middle Anthony
Address		Cit	y	
State	Zip Code	Home Phone Number		
Department Police		Job Title Sergeant	Work Number 216-62	1-8085
Employee Signatu		Stylos 656	Date 11-11-200	
Supervisor Name	Ronald Morenz	Phone Number 216-	361-3712	_Ext
SECTION 2 (SUP	ERVISOR)			
Access Times:	5:00 a.m 5:: 7:45 a.m 5:	30 p.m 7:30 a.m. 00 p.m 7:30 a.m.	5:00 p.m. - 12:00 p.m. <u>X</u>	. 24 hrs.
Day(s): Sun.	⊠Mon. ⊠Tues. ⊠	Wed. ⊠Thurs. ⊠Fri.	Sat. Holiday(s) <u>A</u>	LL
D	North Entrance Door (r Police Doors - Front & (any employee needing Department) Police East 791 St. Park Roofing Door	Rear g access to the Police Departme	nt must be authorized by	the Police
	nbove indicated individua d door(s) indicated.	ls supervisor, I authorize them	to have access for the tin	ıe,
Jole 2-	<u>n</u>		INANT	11-11-00
Supervisor Agnatu	ir <b>e</b> )	Title		Date
*Please notify you resign from	our supervisor immedia 11 CMHA the access car	tely if card is lost. There is a rd must be returned otherwise	\$ 1 0 charge for replace there will be a \$ 1 0 f	cement cards. I ee.
SECTION 3				
oberion 5		_	Cord No	
	V <sub>2</sub>	Date	Calu No	

#### RECEIPT

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

SS			
RECEIVED THIS 25	_ DAY OF <u>0 070</u>	20 00 FROM	ISSUE:
1) Bodyguard OC s	pray & basketweave ca	se.	
2)			
3)			
4) <u>.</u>			
5) <u>.</u>			
6) <u>.</u> .			
7) <u>.</u> .			
8)			
9)			
10) <u>.</u>			
11)			
12) <u> </u>			
PAUL A. 17/0 PRINTED NAME	F) (S) (BADGE	Parts tyles SIGNATURE OF RECE	KSC. PIENT
ISSUED BY:		/ /	HOURS

ADMINISTRATIVE SIGNATURE

### RECEIPT

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

SS:							
	RECEIVED THIS	19	_ DAY OF	April	20 <u>00</u> F	ROM ISSUE	:
	1) Monadnoo	k expanda	ble baton & l	basketweav	e scabbard.		
	2)						
	3)	fis.					
	4) <u>.</u>						
	5)						
	6) <u>.</u>						
	7) <u>.</u> .						
	8)						
	9) <u>.</u>						
	10) <u>.</u>						
	11)						
	12)						
		ul Styles D NAME / BA	# 656 ADGE	<u>\$67</u>	- Sty	F RECIPIENT	_•
	ISSUED BY:	1181 e	, \$6cer	- 041	19,00	ISP HO	MIRS

ADMINISTRATIVE SIGNATURE

TIME

DATE

### SPEED LETTER

TO 4	FROM
LT. MORENZ	CHOR MURREY
SUBJECT NOTIFICATIONS	
LU NO 9 or 10 MESSAGE	
Late in the AM yesterday, his	A. Styles come with my office and asked if I
was more of the midul who	er the wale sumped over the bridge as a rembr
	in, He stated that he possibly thought you
right have notified me. This m	for the reports should have been available as
soon as possible or at the very.	least by 0800 krs yesterlay. In the future made in a timely fashion of Muly DATE 04 APR 00 SIGNED Stale ( Muly
sur that milication and seports are	DATE 04 BPR 00 SIGNED Stork ( Mully
REPLY	
0.0000	
(C FAC 410 4)	
	DATE SIGNED
WilsonJones SENDER: DETACH AND RETAIN YELLOW COPY, SEN	NO WHITE AND PINK COPIES. RECIPIENT: RETAIN WHITE COPY, RETURN PINK COPY 44-904 • Quadrophica

SGT. STYLES

From: To: Ronald Morenz Stanley Murrey 4/5/00 1:11AM

Date: Subject:

Notifications

Sir.

I received your Speed Letter ref: the Use of Force by PO Drew #04. I am fully aware that the reports should have been generated and in your mailbox prior to Sgt. Styles going home. He did not leave until 1430 on the day of the incident. When I came in at 2300, that night, it took me another 5 hours to straighten out what he did, and get his reports correctly filled out. It is my understanding that he was told by Sgt. Donaldson to give a copy to the Chief since he wanted to be informed of the situation, and he could forward the reports after I reviewed them. After reviewing the reports, I am embarrassed that the Chief ever received a copy of the report generated by Sgt. Styles. The Use of Force report was only halfway completed, and his written report lacked sentance structure and basic vocabulary rules.

I usually am on top of reports that you need, but in this case for me to stay an extra 7.5 hours waiting for Sgt. Styles report, would have been inappropriate. I would appreciate if you would give me a little guidance on how you want this handled in the future. This was Sgt. Styles first Use of Force incident, and for whatever reason, he took a long time to accomplish very little. I believe that he has gained valuable insight and experience due to handling this incident, but unfortunately, he was unable to complete it in the

timely manner that is required.

In addition, after reviewing the report again tonight, I found that I did not make sure that Sgt. Styles included his interview with the suspect at Metro General Hospital. This is vitally important since the suspect stated that he did not jump onto Route 2, but rather PO Drew hit him in his hands with his ASP while he was holding onto the fence, causing him to fall. There were no injuries to the suspects hands, nor was there any swelling. This was documented using photographs. Had he been struck with an ASP, there should have been some swelling at the least. In any event, Internal Affairs may want to look into this to insure that there was no wrong doing in PO Drew's actions. I will leave a paragraph for Sgt. Styles to add into his report, and he will forward it to to you to replace the one you have.

Respectfully.

Ronald J. Morenz, Lieutenant

11 100 100

Capt. Bouts
FYI

flow



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION

Inter-Office Correspondence TYPE:

TO: Anastacio T. Vazquez, Lieutenant, #650

Second Platoon, Watch Commander

Paul A. Styles, #656 FROM:

Second Platoon, Field Supervisor

DATE: 28 January 2000

SUBJECT: Replacement Body Armor.

RECEIVED IN THE OFFICE OF FEB - 2 2000

Sir,

I am requesting to be reimbursed for body armor. It has been over five(5) years. I have ordered body armor from Atwell's Police and Fire Equipment Company 207 Chestnut Street Painesville, Ohio 44070. Attached is order form.

Respectfully, #656
Paul A. Styles, Sergeant, #656

Sir. Jrespectfully request the above request be approved. Respectfully submitted fit. Deadswellingung 500

4 FEB '00

Recommend opproval.

Respersfully,

Starty ! Musell



207 Chestnut Street
PAINESVILLE, OHIO 44077
(440) 354-5593 • Cleve. (440) 951-0347
1 800-362-1361 FAX (440) 354-0812

	\$ 000er NO.	PHONE	1	DATE 2 -	2 - 2	000
ADDRESS	Paul	Sty	les			te to make a con-
,		M, H,	A	11 · 1	1.00 to 46 a.	
O2	CASH C.O.D.	CHARGE ON A	CCT. MOSE, RET'D	PAID OUT		
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	BIL	E GEM	neutr		*********	1
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	C + 1 2 2 C					-
CERVED BY	77. 27. 24.	7 2	0.000	TAX		
				TOTAL		

To Reorder Call 1-000-225-0380 Thank You



### Interoffice Memorandum

April 7, 1998

TO:

Ruth Penner

Payroll Department

FROM:

Anthony H. Jackson, Chief

Police Department

Miles T. Cobbs, Deputy Chief

Police Department

SUBJECT: Overtime Payout

SSN:

Pursuant to your conversation with Ms. Suber-Bey today, please issue the overtime amounts paid for the years of 1995, 1996 and 1997 to Officer Paul Styles as requested for the purpose of Child Support Court.

If there are any further questions, please feel free to contact this office.

Miles T. Cobbs, Deputy Chief





### CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

TYPE: Inter-office memorandum

TO: PO Paul Styles #25

FROM: Sgt. Patrick J. Donaldson, Range OIC

DATE: 22 October 1997

SUBJECT: Failure to Achieve Range Proficiency Requirements

PO Styles,

On 20 October 1997 you failed to demonstrate proficiency with your duty weapon during mandatory range qualification. I would therefore direct your attention to the Divisional Manual of Rules and Regulations, Chapter 10.1.10 "Use of Force", which states in part:

"Officers who fail to meet proficiency requirements will be granted a fourteen (14) day grace period in which to become proficient. Within this fourteen (14) day period the officer must, on his own time, report to the range for remedial training and certification. Officers who fail to achieve certification during this grace period shall be placed on suspension. If the officer has failed to achieve certification after one (1) week on suspension, he shall be separated from the Police Department for failure to maintain certification."

You are therefore notified that no later than 03 November 1997, you must successfully demonstrate proficiency with your duty weapon as required by the CMHA Police Department. Failure to do so will result in a request for your immediate suspension being forwarded to the office of the Chief of Police. If you have any questions about this matter, please do not hesitate to contact either myself or Lt. Morenz.

CC: Files
Murrey

Patrick

atrick Donaldson, Sgt.

P-O. Styles #25



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

TYPE: Inter-office memorandum

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CC: Files
Murrey

Patrick Donaldson, Sgt.

P-O. Styles #25

CUSTOMER COPY EXTENSION 43952 DATE SHIPPED **EMPLOYEE DESIGNATION** UNIT PRICE SUB TOTAL BALANCE SHIPPING DEPOSIT TOTAL TAX a Cleripord 1/a lientered 4 . 6 SHIPPED BY STONEWALL UNIFORMS CLEVELAND SUBURBAN UNIFORM 15/2/34 3 45 Shids SIZE DATE aprillad AND DOL PACKED BY SOCIAL SECURITY NO. HOME PHONE 45.5h.lds \*\* 41CYEE TOTAL ITEMS Scenal Your DESCRIPTION ω<u>π</u>−<u>σ</u> ⊢0 2550 | L LOCATION SHIPPED VIA STONEWALL CORPORATION 100 KEN MAR DRIVE BROADVIEW HEIGHTS, OHIO 44147 (216) 526-0001 DATE SPECIAL INSTRUCTIONS SIGNATURE/RECEIVED / SIGNATURE/ORDERED **BUSINESS PHONĘ** Lr Fuscher STOCK NO. UNINVERSARY DATE MFGR. CUST, P.O. NO. 4 P.O. NO. #20656 ORDER DATE E. 10 0010

### Cuyahoga Metropolitan Housing Authority

### BUY MONEY FUND TRANSFER FORM

This form must be completed whenever a fund custodian takes vacation, retires, resigns, transfers or in any manner leaves their respective position.

Cost Center Name:	Police & Security Cost	Center Number:	210
Quantity	Denomination	<u>Total</u>	
	x \$100.00 =		
6	x \$50.00 =	300.00	
6	x \$20.00 =	120.00	
	x \$10.00 =	<del></del>	
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	x \$.50 =		
e	x \$.25 =		
	x \$.10 =	<del></del>	
	x \$.05=		
<del></del>	x \$.01=		
Total Cash On Hand:		420.00	
Total Original Receipts (	Attached):	0	
Total Cash On Hand and	Receipts:	420.00	
Buy Money Fund Amount (As Authorized by the Chief l		420.00	
Variance, if any:	2	0	
	for all petty cash shortages. I		Petty Cash
Custodian must reimburse the	Fund within twenty-four (24)	hours or a payroll deduction	will be initiated.)
	oney Custodian:		
Auditor:		Date: 57	25/200
Cost Center Director/Ma	nager All feck	en chif Date: 2-	29-05

5/pettycash transfer form



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul Styles #656, Sergeant- OIC Narcotics Unit

FROM: Ronald J. Morenz #626, Lieutenant-Special Operations

PAGE	SUBJECT	DATE
1 of 1	Failure to Comply with DN #05-089 titled Using the Multipurpose	19SEP05
	Misdemeanor Complaint Form	

On 16SEP05, you and Det. Paul Hermensky #05 arrested Clifford Johnson for Criminal Trespass at 2720 Cedar Ave. Johnson was transported to the Cleveland Police Department 4<sup>th</sup> District and booked. On 17SEP05, Det. Hermensky filed charges with the City of Cleveland Prosecutor's Office against Johnson.

Departmental Notice #05-089 dated 06SEP05, outlines the procedures to be followed when making certain M-4 arrests, including Criminal Trespass. A MM Citation should have been issued as a Misdemeanor Complaint & Summons, and left at the District as the charging instrument.

As a supervisor it is your responsibility to know Departmental Policies and Procedures, and insure that the officers under your command are in compliance with them. In this case you failed to provide the proper leadership required of a Unit OIC. I am confident that you will not allow this type of scenario to occur in the future. If you do not understand a particular General Police order of Departmental Notice, contact me for clarification.

1 1 10 5 6 Jr 10 5 6

Ronald Morenz Lieutenant



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All members of the Division of Police

FROM:

Anthony H. Jackson, Chief of Police

DATE:

September 6, 2005

Page 1 of 2	USING THE MULTIPURPOSE	DN #05-089
	MISDEMEANOR COMPLAINT FORM	211,100 00)

The Multi-Purpose Misdemeanor Complaint Form (MMCF) shall serve as the affidavit and charging instrument when misdemeanor four (M4s) and/or minor misdemeanors violations of the crimes below are committed in the officer's presence. Officers shall not consult a prosecutor *for arrests* or citations of these offenses.

Officers shall check the Misdemeanor Complaint & Summons or the Minor Misdemeanor Citation block in the upper left corner of the MMCF. Checking the incorrect box invalidates the affidavit. The title or name, letter/number designation of the offense and the penalty classification must be noted in the "Description of Offense" section. This provides the offender with sufficient notice of the charges. When completing the MMCF in connection with an arrest the officer shall enter the words, "booked at District # (enter district number)" in the space provided for the defendant's signature and date. A Case Report must be generated for all cases M4 or higher.

CCO 611.06	Public Gaming: (MM), second and subsequent offenses are (M4s)
CCO 619.07	Public Indecency (M4) first offense only
CCO 623.04	Criminal Trespass (a) (1), (2), (3), (4) are all (M4s). (a)(5) is an (Ml)
CCO 623.05	Trespass on RTA (M4)
CCO 623.06	Destruction of Shrubs, Trees or Crops (M4)
CCO 623.11	Defacing or Removing Signs (M4)
CCO 629.02	Abandoned Refrigerators and Airtight Containers (M4)

Page 2 of 2	USING THE MULTIPURPOSE MISDEMEANOR COMPLAINT FORM	DN #05-089
CCO 675.01-10	Peddlers and Produce Dealers (MM). "Unless per peddling after reasonable warning or request to desi	
CCO 698.01	Ticket Brokers (M4), second conviction within two	years (M2)

Attachment

By order of, Anthony H. Jackson, Chief of Police



### **CMHA - Police Division Case Report** Detail



Print Date/Time: 09/19/2005 09:54

Login ID: Morenz626

Case Number: 2005-00012236

CUYAHOGA METROPOLITAN HOUSING **AUTHORITY** 

Attempt/Commit Code: Commit

Offense Date: 09/16/2005

Bias/Motivation: No Bias

Occupancy Code:

IBR Seq. NO: 1

**Household Status:** 

Sub-Code:

Lane:

ORI Number: OH0186800

**Case Details** 

Case Number: 2005-00012236

Location: 2702 CEDAR AVE

Cleveland, OH, 44115

05 - Hermensky

Reporting Officer ID: Scene Processed By: Assigned Bureau:

05 - Hermensky Narcotics

Status:

Disposition:

Exc Clear:

Incident Type: Criminal Trespass

Counts: 1

105 - Olde Cedar

09/16/2005

Occurred From: 09/16/2005 19:51

Occurred Thru: 09/16/2005 20:15

Status Date:

**Disposition Date:** Exc Clear Date:

9/16/2005

Offenses

Group/ORI Crime Code No. Statute Description Counts OHCLP0000 CPD 623.04A CRIMINAL TRESPASSING -KNOWINGLY ENTER/REMAIN

**Statute: 623.04A** 

Aiding/Abetting:

Carjacking: No

# of Juveniles:

Scene Code:

Status Date:

Open Pending Charges

Offense #1

Group/ORI: OHCLP0000 Crime Code: CPD

Description: CRIMINAL TRESPASSING -KNOWINGLY ENTER/REMAIN

Offense Status: Open

Gang Related: Unknown

# of Adults: 1

Property Damage Amt:

**Domestic Circumstance:** 

Accosting Situation:

Offender Suspected Of Using

Alcohol:

Unknown Yes

Drugs: Computer: N/A Victim Suspected Of Using

Abandoned Structure: No

Alcohol:

Drugs:

Gambling

Motivated:

Computer:

Subjects

No. Туре Name Address Phone Race Sex DOB Clifford Johnson Suspect 9809 CAYLORD AVE (216) 240-4471 Black 07/12/1980 Male

Cleveland, OH 44104

Eyes:

Suspect Type:

Race: Black

Height: 5ft. 7in.

Subject #1 - Suspect

Yes Primary:

Clifford Johnson Name:

Address: 9809 CAYLORD AVE

Cleveland, OH 44104

(216) 240-4471

SSN:

Resident Status: Non-resident

Brown

Suspect

Sex: Male Weight: 175.0 lbs.

Hate Bias Indicator:

Hair: **Black** 

DVL#:

DOB: 07/12/1980

Build: Medium

State:

Resident Type: \*N/A\* Disposition: Arrested

Date: 09/16/2005

Statement Type: Verbal

Related Offenses

Group/ORI

Crime Code OHCLP0000 CPD

Statute 623.04A

CRIMINAL TRESPASSING -KNOWINGLY ENTER/REMAIN

Domestic Violence:

Arrest No.: 670 A

No

**Domestic Violence Referrals:** 

Federal Agencies Involved:

Arrests

Arrest No. Address Name Date/Time Type 670 A Clifford Johnson 9809 CAYLORD AVE 09/16/2005 20:15

Cleveland, OH 44104

Date/Time: 09/16/2005 20:15 Type: Fresh

Status: H-CPD 4th

District

No

Name: Clifford Johnson Black Race: Sex: Male DOB: 07/12/1980 Address: 9809 CAYLORD AVE 5ft. 7in. Height: Weight: 175.0 Build: Medium

Page: 1 of 3



### **CMHA - Police Division Case Report** Detail



ORI Number: OH0186800

**AUTHORITY** 

Print Date/Time: 09/19/2005 09:54

Login ID: Morenz626

Case Number: 2005-00012236

Cleveland, OH 44104

Phone: (216) 240-4471

Location: 2702 CEDAR RD

Cleveland, OH 44115

ID Procedure: Photo Age At Arrest: 25

Basis For Caution: Armed

Alcohol Influence:

Statement Type: Verbal

656 - Styles

05 - Hermensky

**Narcotics** 

SSN:

Miranda ID: 05

Resident Type: \*N/A\*

Drug Influence: Yes

Statement ID: 05

Arrest Result Of: On-View

Eves:

Brown

Наіг: Black

DVL#:

Marital: Single

CUYAHOGA METROPOLITAN HOUSING

State:

Miranda Date/Time: 09/16/2005 00:00

Resident Status: Non-resident

Clears Case:

Resisted Arrest: No

**Arresting Officers** 

Bureau

Narcotics

**Weapon Codes** 

**Feature** 

**Arrest Charges** 

Group/ORI No.

Crime Code OHCLP0000 CPD

Counts: 1

Statute 623.04A Description

CRIMINAL TRESPASSING -KNOWINGLY ENTER/REMAIN

Charge Date/Time:

Attempt/Commit: Commit

Property

#### Suspect Vehicles

#### Narrative-Hermensky 05

Sir,

On 16SEP05, while assigned to the CMHA Police Narcotic Unit, with Sgt. Styles #656. With the assistance of Unit 202-B PO Ortiz #95, we arrested Clifford Johnson 25/b/m/s for Criminal Trespass. The following are the facts related to the arrest.

At 1951 hours, while at the Old Cedar Estate I observed a male identified as Clifford Johnson in the area of 2702 Cedar Rd. When I observed Johnson I immediately recalled that I arrested him in the past for Violation of State Drug Law, and a firearms charge. When Johnson noticed our presence he appeared to become nervous and started walking away. I also suspected that Johnson was listed on the CMHA Banned List.

I approached Johnson to conduct a further investigation. While conferring with him, I smelled the odor of burnt marijuana upon his person. A routine wants and warrants check was requested for Johnson and he cleared. Dispatch confirmed that he is currently listed on the Banned List. He was advised that he was being placed under arrest for Criminal Trespass and secured in handcuffs. He was placed in the rear of CMHA Police Zone Car #202-B and transported to the Cleveland Police Department's 4th District, where he was booked on the above listed charge.

Supplement-Hermensky 05

Sir,

On 17SEP05, while assigned to the CMHA Police Narcotic Unit, I filed charges against Clifford Johnson



# CMHA - Police Division Case Report Detail



Print Date/Time: 09/19/2005 09:54

Login ID: Morenz626

**Reporting Officer** 

Case Number: 2005-00012236

25/b/m/s for Criminal Trespass.

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

ORI Number: OH0186800

I responded to the City of Cleveland Prosecutors Office and conferred with Assistant Prosecutor Bonnaci. Aft	ter
briefing him on the nature of the arrest, he issued papers for the listed above charge.	

Date

From:

Ron Morenz

To:

Styles, Paul

Date:

10/5/2005 9:40:40 AM

Subject:

Monthly Plan

I need an Action Plan for October 2005, broken down by weeks, to submit to the Commander. Include any weeks in November that you are going to be on vacation.

You didn't put in your CMHAPD94-001 if the female is willing to buy or not, that's the biggest question. She is going to be used in a bigger investigation, DO NOT do anything with her without contacting me.

YOU DID NOT SUBMIT WHAT WAS
REQUESTED. SEE ATTACHED NOTES.
UPON COMPLETION, RETURN THIS PACKAGE
UPON COMPLETION, RETURN THIS PACKAGE
SIGNED INCLUDING DATE / TIME.

SGT. Styles #656 06 oct 05@ 2300 hrs



#### CMHA

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



Ronald J. Morenz #626 Lieutenant Special Operations

FROM: Paul A. Styles #656 Sergeant Narcotics Unit OIC

PAGE	SUBJECT	DATE
1 of 1	Narcotics Unit Action Plan for the Month of October	05OCT05

Sir,

#### The Narcotics Unit Action Plan for the month of October are as follows:

- Were going to continue aggressive patrol and surveillances at areas where most of the?
- For the week of 17OCT05 thru 21OCT05 I would like to do some buy bus at Garden Valley, 200 years King Kennedy, and Carver Park using the surveillance van.
- Were also going to continue making control buys. Francisco USino with ?

Respectfully,

Paul A. Styles, Sergeant

OSUCTOS THROUGH 14 OCT CS

PLUS THE WEEK YOUR OFF IN November.



#### C.M.H.A.

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE



TO:

Paul Styles, Sergeant #656

FROM:

Stanley C. Murrey, Deputy Chief of Administration #603

1 of 1 SUSPENSION of Vehicle Operators Permit(V.O.P.)  DATE  09JUL04			DATE 09JUL04
----------------------------------------------------------------------	--	--	--------------

Based on the information provided by the Ohio Bureau of Motor Vehicles (BMV) your Ohio Drivers License (ODL) has expired as of 05JUL04. As a result you are no longer in compliance with the CMHA Vehicle Operation Procedures. Therefore your V.O.P. has been <u>suspended</u> until the valid reinstatement of your ODL pursuant to Administrative Order:

11.13A. An employee shall not be assigned to drive a CMHA automobile unless he/she possesses a valid Ohio and CMHA operator's license

You are to immediately surrender your CMHA Vehicle Operator's Permit to your supervisor.

WARNING: During this period of suspension, you are forbidden to operate CMHA motor vehicles, or operate a personally owned vehicle while on duty or otherwise on CMHA time.

FAILURE TO OBEY THIS ORDER IS "INSUBORDINATION".

INSUBORDINATION IS A TERMINABLE OFFENSE.

Upon attaining a valid status for your ODL, you are to immediately complete a V.O.P. Application, forwarding it through Official Channels.

By order of,
Stanley C. Murrey, Deputy Chief

I acknowledge receipt of this "V.O.P. SUSPENSION" and understand its content.

Signature:

(Your signature is not an admission of agreement)

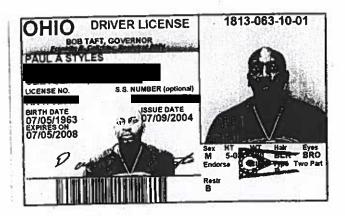
Date/Time: 09 Ju/04

Issuing/Witnessing Supervisor:\_

**SUPERVISOR:** Return the surrendered V.O.P., with this executed form, through official channels.

COMUUC <u>ML83</u> 7/9/cy JUL 1 2 2004

COMPLAINT INVESTIGATION UNIT







RECEIVED IN THE OFFICE OF

RECEIVED IN THE OFFICE OF

JOSEPH W. CAINE PATROL COMMANDER

To: Joseph W. Caine Patrol Commander

From: Ronald J. Morenz

Lieutenant- Third Platoon Watch Commander

Date: July 11, 2001

Subject: VOP- Sgt. Paul Styles #656

Sgt. Styles has received a new CMHA Vehicle Operators Permit. I respectfully request that his driving status be restored.

Respectfully Submitted,

Ronald Morenz, Lieutenant

EIR-RECOMMEND PROPOSAL LIVE - 604 TO: Paul Styles, Sergeant

FROM: Stanley C. Murrey, Patrol Commander

PAGE	SUBJECT	
1 - E 1		DATE
	Supervisor's responsibility	17 MAY 99

On 14 MAY 99, I attended the Greater Cleveland Peace Officer's Memorial Service with a number of C.M.H.A. Police Officers who were both in the parade and memorial service following the parade.

Just prior to the services, the CMHA police officers were standing together. I observed P.O. Michael Spigner #67 was without his hat. Bringing him to the side, I inquired as to the where his hat was, to which he stated that he didn't have it with him and apparently left it at home. I then ordered him to return and stay in the vehicle.

The memorial service is a very prestigious event that brings together police personnel from the U.S., Canada and other foreign departments as far away as England and Australia for example, not to mention the civilian dignitaries present.

Although the immediate supervisor may not be there, he is ultimately responsible for the appearance, decorum and actions of all officers under his command. In this case, the supervisor must ensure that personnel have the required equipment and instructions prior to attending the event.

P.O. Spigner represented not only the Department, but you at this event. In the future ensure that personnel under your command have the proper required equipment prior to going into the field. You are to review and ensure that each of your personnel comply with Chapter 8 of the Manual of Rules and Regulations, specifically Rules #8.1.2 and 8.1.10

This will be recorded as a training and counseling issue in your personnel file.

By order of,

Śtanley C. Murrey

Patrol Commander

Paul Styles Sergeant

Date

Witnessing Supervisor

TO: Paul Styles, Sergeant

FROM: Stanley C. Murrey, Patrol Commander

**DATE:** 14 MAY 99

11					
Page 1 of 1				TOG	#05.15
11 - 454 - 05 -	!			TOC	#UD.LD

Sgt. Styles,

Reports are to be submitted by both yourself and PO Spigner #67 regarding his improper uniform apparel at the Peace Officer Memorial Service on Friday, 14 MAY 99. Specifically, PO Spigner's failure to report with his uniform hat, and why he was permitted to do so. Submit the reports to my office by no later than 0900 hours on Monday, 17 MAY 99.

By order of,

Stanley C. Murrey,

Patrol Commander

RECEIVED IN THE OFFICE OF

MAY | 7 1999

STANLEY C. MUSREY
COMMANDER

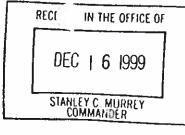
SPEED LETTER®

	FROM
17. 118251K2	C12402 17 000 12 1
SUBJECT SON'S SYNCHIS	
who was som which is	14000 Man Som OBSELLE
I donathe breaming	
DATE & OLE C 95	SIGNED STATE CONTRACTOR
REPLY	
FOLD FOR NO. 9	
FOLD FOR NO. 18	
DATE	SIGNED

WilsonJones Sender: Detach and Hetain Yellow Copy, Send white and Pink Copies. Recipient: Retain white Copy, Return Pink Copy.

44-902 ~ Tiplicate
44-904 • Quadruplicate





#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT

Type: Inter-Office Memorandum

To: Anastacio T. Vazquez Lt. Second Platoon Watch commander

ifrom: Paul A. Styles Sgt. # 656 Second Platoon field Sergeant

Date: 12-16-99

Subject: Absent From Staff Meeting

511.

On 12 December 1999. I advised you that I will be late for the staff meeting on 14 December 1999 due to the change from our normal meetings on Wednesday. I had to pick up my kids from school because it is my week to watch them. If I had not pick them up, no one would have. I could not find anyone to watch them so I had to stay home with them.

Respectfully,

Vaul A. Styles Sgt. # 676

21 000 170

it. VAZQUET to methy you if advise het. Hyles to methy you if advise het. Hyles to methy you if the state that prover the state that prover the state that form attending staff late.

for form attending staff late.



# Ohio Patrolmen's Benevolent Association

# Official Grievance Form

	2 7 2001
Name of Employee PAUL A. STYLES	STANLEY C. MURREY Department Police
Classification SEACEANT	
Work Location 2685 E 70 57 Immediat	e Supervisor AT. ROLAGO J. MCRENZ 62
STATEMENT OF GRIEVANCE:	
List applicable violation: SET STYLES WAS ISSUE	A WRITTEN REPS. MANO ON 8-16-61
REF. A MUA CCCUANO CN 5-30-C, PRE	CEEDING IS IN VIOLATION OF
ARTICLE 9 SECTION Q - ALL WRITTEN W.	TICES SHALL BE ISSUED WITHIN 15
DAYS FROM THE DATE OF THE INCIDENT.	* • • • • • • • • • • • • • • • • • • •
Adjustment/remedy required. REMOVE ALL WA.	TTEN DISCIPLINARY ACTIONS
ASSEC, ATEO WITH ABOVE VICLATI	ر قاره
I authorize MARK VOLCHECK ROW MORE as my rep	resentative to act for me in the disposition of this grievance.
Date 8-20-01 Signature of Employee × Juni	4 Stisles #151
	Title LIEUTENANTI
Signature of Union Representative   Date Presented to Management Representative   3/20	
Date Presented to Management Representative 3/20/	Title Deputy CHIET-
Disposition of Grievance: A Notification of	atomores was used ED and MA
Disposition of Grievance: 77 700 17 18 18 18 18 18 18 18 18 18 18 18 18 18	11657 and MAY 26 2001
(Only 3 Business Days) THE GO	CELLE IN DENIE
(ONLY 3 BUSINESS NAYS) 1110 01	M. Caffer, D.C.H.
THIS STATEMENT OF GRIEVANCE IS TO BE MADE IN TRIPLICATE. ALL TI THE O.P.B.A. REPRESENTATIVE HANDLING THE CASE.	HREE COPIES ARE TO BE SIGNED BY THE EMPLOYEE AND/OR
ORIGINAL TC	
ORIGINAL TC	

NOTE: ONE COPY OF THIS GRIEVANCE AND ITS DISPOSITION TO BE KEPT IN GRIEVANCE FILE OF O.P.B.A.

TO: Paul A. Styles, Sergeant- 3rd Platoon.

FROM: Stanley C. Murrey, Deputy Chief

**DATE:** 07JUN 01

FILE

PAGE

1 of 1

SUBJECT

Suspension of CMHA Vehicle Operators Permit

Control NUMBER 06.02

Sgt. Styles,

Your CMHA Vehicle Operators Permit has been suspended for a period of thirty days from 31MAY01 to 29JUN01. After that date, you will need to apply for a new VOP.

By order of,

Stanley C. Murrey

Deputy Chief



#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul Styles #656, Sergeant- OIC Narcotics Unit

FROM: Ronald J. Morenz #626, Lieutenant-Special Operations

PAGE	SUBJECT	DATE
1 of 2	Supervisory Approval of Reports that Do Not Comply with Departmental	19SEP05
<u></u>	Standards	

On 17SEP05, you and Det. Paul Hermensky #05 arrested Gregory Hardy and Raymelle Welch for Violation of the State Drug Law at 6206 Woodland Ave. You reviewed and approved the narrative, which does not conform to Departmental Standards. In addition, Det. Hermensky failed to describe the three tattoos that Welch has, they are listed only as medium tattoos.

All reports begin the same way, the format is as follows: On 17SEP05, I was assigned to ZC809, along with Sgt. Styles #656. We were assisted by ZC303-A, PO Spigner #67. We arrested Gregory Hardy 45/b/m/s and Raymelle Welch 27/b/m/s for Violation of the State Drug Law. The following are the facts related to the arrests:. This is not the format followed by Det. Hermensky. As I reviewed the report further I found that Det. Hermensky still writes his reports the way he did when he was previously in the Narcotics Unit. Instead of saying what happened, he likes to make it more "flowery". For instance he wrote, "I noticed Hardy partially submerged his right hand into his right fronts pants pocket." If Hardy placed his hand into a pocket, partially or all the way, that is what needs to be written. Another example, "Once they got behind the building, they were crouched down, they immediately stood erect once they observed our presence." These are two separate sentences, not one. If they stood up, write that. He does not need to add "flowery" words to make his report sound better. In fact, he does just the opposite. He also likes to write "they appeared nervous". In the future when he writes this he needs to articulate why they appeared to be nervous. What were the observations that led him to this conclusion? The sentence, "With camera #8 picture 21 was taken of Hardy and picture 22 was taken of Welch." If he is referring to Booking Photos's, he should write that. I have attached a copy of the CMHA Police Department Report Writing Guide for your, and Det. Hermensky's, review.

I also cannot understand why Welch was arrested for VSDL. There is nothing in the report that describes Welch discarding the drugs, or that he was observed with them. The area behind the store is a well-known crack area. While we both know that Welch probably discarded the drugs, who is going to testify that he was in possession of them? They were in a wide open area with access to anyone who walked through. If he takes it to trial, you won't win.

PAGE	SUBJECT	DATE
2 of 2	Supervisory Approval of Reports that Do Not Comply with Departmental	19SEP05
	Standards	

Reviewing reports as the OIC of the Narcotics Unit is the same as when you were reviewing reports on a shift, nothing has changed. As a supervisor you must hold your subordinates accountable for their actions, whether it is report writing or making an arrest. Review the Report Writing Guide so that you can properly review reports using Departmental guidelines. Then review it with Det. Hermensky so that he can raise his level of writing to comply with Departmental Regulations. If you need further assistance, feel free to contact me for guidance.

Leniemas dire

Ronald J. Morenz, Lieutenan



# **CMHA - Police Division**

ORIGINAL Case Report



NAMATIVE Print Date/Time: 09/19/2005 08:54

Login ID: Morenz626

Case Number: 2005-00012298

**CUYAHOGA METROPOLITAN HOUSING AUTHORITY** 

ORI Number: OH0186800

Case Details

Case Number: 2005-00012298 Location: 6206 WOODLAND AVE

Cleveland, OH, 44104

Reporting Officer ID: 05 - Hermensky

Scene Processed By: 05 - Hermensky Assigned Bureau:

Status:

Exc Clear:

Disposition:

Active / Ref. to Detective

Status Date:

Incident Type: Possession Controlled Substances

Occurred From: 09/17/2005 14:53 Occurred Thru: 09/17/2005 15:52

> **Disposition Date: Exc Clear Date:**

9/17/2005

Offenses

No. Group/ORI Crime Code Statute Description Counts 2925.03C1 Trafficking in Drugs - include in Schedule I or II State 35A

Offense #1

**NCIC Code:** 

# of Adults: 2

Group/ORI: State

Offense Status: Open

Gang Related: Unknown

Property Damage Amt:

Accosting Situation:

**Domestic Circumstance:** 

Crime Code: 35A

Statute: 2925.03C1 Description: Trafficking in Drugs - include in Schedule I or II

Off Property

Counts: 1

Attempt/Commit Code: Commit

Offense Date: 09/17/2005 Bias/Motivation:

Scene Code: Status Date: Aiding/Abetting:

# of Juveniles: Abandoned Structure: No

09/17/2005

IBR Seq. NO: 1 **Household Status:** 

Sub-Code:

Lane:

Occupancy Code:

Carjacking: No Gambling

No

Hate Bias Indicator:

Motivated:

Offender Suspected Of Using

Alcohoi: Drugs:

Unknown Unknown

Computer: N/A

**Evidence Collected** 

Material

**Criminal Activity** Buying/Receiving

Distribute/Sell

**Victim Suspected Of Using** 

Alcohol: Drugs: Computer:

**Tools Used** 

Security Systems

**Subjects** 

Type	No.	Name	Address	Phone	Race	Sex	DOB
Suspect	1	Gregory Hardy	2309 E 87TH ST	(216) 229-3039	Black	Male	06/25/1960
			Cleveland, OH 44106				
Suspect	2	Raymelle D Welch	2516 SCOVILL AVE	(216) 254-4584	Black	Male	06/16/1978
			Cleveland, OH 44104	, ,			

Subject #1 - Suspect

Primary: No

Gregory Hardy Name:

Address: 2309 E 87TH ST Cleveland, OH 44106

Phone: (216) 229-3039

Suspect Type:

Race: Black

Height: 5ft. 8in. Eves: Brown

Suspect

Sex: Male

Weight: 200.0 lbs. Black Hair:

DVL#:

DOB: 06/25/1960 Build: Medium

State:

Resident Type: \*N/A\* Disposition: Arrested

Resident Status: Non-resident

Date: 09/17/2005

Race: Black

Eyes: Brown

Height: 5ft. 8in.

Statement Type: Verbal

Related Offenses Group/ORI Crime Code State 35A

SSN:

Description

**Domestic Violence:** 

No

Statute 2925.03C1

Trafficking in Drugs - include in Schedule I or II

**Domestic Violence Referrals:** 

Federal Agencies Involved:

Subject #2 - Suspect

Primary: No

Raymelle D Welch Name: Address: 2516 SCOVILL AVE Cleveland, OH 44104 Suspect Type:

Suspect

Sex: Male Weight: 252.0 lbs.

Black

Hair:

DOB: 06/16/1978 Build: Heavy

Page: 1 of 4





ORI Number: OH0186800

Print Date/Time: 09/19/2005 08:54

Login ID: Morenz626

Case Number: 2005-00012298

Phone: (216) 254-4584

Resident Type: \*N/A\*

Disposition: Arrested

DVL#:

State:

CUYAHOGA METROPOLITAN HOUSING

Resident Status: Non-resident

Date: 09/17/2005

Statement Type: Verbal

Related Offenses

State

Group/ORI

Crime Code

Statute 2925.03C1 Description

Trafficking in Drugs - include in Schedule I or II

**Domestic Violence:** 

No

35A

**Domestic Violence Referrals:** 

Federal Agencies Involved:

No

**AUTHORITY** 

Arrests

673 A

Name:

Phone:

Address:

Arrest No. Name 674 A

Arrest No.: 674 A

Raymelle D Welch

Gregory Hardy

Raymelle D Welch

2516 SCOVILL AVE

(216) 254-4584

Cleveland, OH 44104

Address

2516 SCOVILL AVE Cleveland, OH 44104

2309 E 87TH ST

Cleveland, OH 44106

Date/Time: 09/17/2005 14:53 Black

Race: Height: Eyes:

SSN:

5ft. 8in. Brown

282-76-7574

Fresh Type: Sex: Male

Date/Time

09/17/2005 14:53

09/17/2005 14:53

Weight: 252.0 Hair: Black DVL#:

Status: H-CPD CPU DOB: 06/16/1978 Build: Heavy Marital: Single

Type

Fresh

Fresh

State:

Scars, Marks, Tattoos Type:

Tattoo Tattoo Tattoo

Type: Type:

Medium Tattoo Medium Tattoo Medium Tattoo

Location: Location: Location:

TAT UR ARM TAT RE ARM TAT LF ARM

Description: Description: Description:

Location: 6206 WOODLAND AVE

Cleveland, OH 44104

ID Procedure: Verbally Given

Age At Arrest: 27 **Basis For Caution:** 

Alcohol Influence: Unknown

Statement Type: Verbal

Miranda ID: 05

Resident Type: 999 - Off Property

Arrest Result Of: On-View Drug Influence: Unknown

Statement ID: 05

Miranda Date/Time: 09/17/2005 15:15

Resident Status: Non-resident

Clears Case: Unknown Resisted Arrest: No

Arresting Officers

656 - Styles

05 - Hermensky

<u>Bureau</u> Narcotics

Narcotics

Weapon Codes

**Feature** 

**Arrest Charges** 

Group/ORI No.

State

Crime Code

Statute

Description

Trafficking in Drugs - include in Schedule I or II

Counts: 1

35A

2925.03C1

Charge Date/Time:

Fresh

Attempt/Commit: Commit

Arrest No.: 673 A

Name:

Gregory Hardy Address: 2309 E 87TH ST Cleveland, OH 44106

Phone:

(216) 229-3039

Date/Time: 09/17/2005 14:53 Race: Height:

Eyes:

SSN:

Black 5ft. 8in. Brown

Sex: Male Weight: 200.0

Type:

Hair: Black DVL#:

Status: H-CPD CPU DOB: 06/25/1960 Build: Medium

Marital: Single State:

Location: 6206 WOODLAND AVE

Cleveland, OH 44104

ID Procedure: Verbally Given

Age At Arrest:

Basis For Caution: No Basis for Caution

Alcohol Influence: Unknown Statement Type: Verbal

Miranda ID: 05

Resident Type: \*N/A\* Arrest Result Of: On-View Drug Influence: Unknown Statement ID: 05

Miranda Date/Time: 09/17/2005 14:53

Resident Status: Non-resident Clears Case: Unknown

Resisted Arrest: No

**Arresting Officers** 

Bureau

**Weapon Codes** 

**Feature** 

Page: 2 of 4





ORI Number: OH0186800

AUTHORITY

CUYAHOGA METROPOLITAN HOUSING

Print Date/Time: 09/19/2005 08:54

Login ID: Morenz626

Case Number: 2005-00012298

656 - Styles

Narcotics

05 - Hermensky

Narcotics

Condition: Appears Normal

**Medical Treatment:** 

Hospital:

<u>injury Types</u>

N/A

Arrest Charges

Group/ORI State

Counts: 1

09/17/2005 Evidence/Seized

09/17/2005 Evidence/Seized Drugs

Crime Code 35A

Statute 2925.03C1 Description

Trafficking in Drugs - include in Schedule I or II

Charge Date/Time:

Attempt/Commit: Commit

Property

Code

Type Make Model Description

A torn plastic baggie containing 6 pieces of crack-cocaine plus crumbs

One piece of crack-cocaine with purple paper

Seq.#2

**Property Codes** 

Evidence/Seized

Property Type: Drugs

UCR Value:

Property Class: Drugs

Initial Value:

Date Received: 09/17/2005

Stolen Location:

**Notified How** 

Quantity: 6.000

Unit Of Measure: Pieces

Measurement Source:

Description: A torn plastic baggie containing 6 pieces of

Tag No. Item No.

crack-cocaine plus

Date

crumbs

Associated Subjects

Type Owner Name Raymelle D Welch

2516 SCOVILL AVE Cleveland, OH 44104 (216) 254-4584

<u>Seq #1</u>

Property Codes

Evidence/Seized

Property Type: Drugs **UCR Value:** 

Property Class: Drugs

Initial Value:

Date Received: 09/17/2005

Stolen Location:

Quantity: 1.000

Unit Of Measure: Each

Measurement Source:

Description: One piece of crack-

cocaine with purple paper

Associated Subjects

Type Owner

Name

Gregory Hardy

Address 2309 E 87TH ST

Cleveland, OH 44106

Phone

(216) 229-3039

Notified How

Date

Suspect Vehicles

Narrative-Hermensky 05

Sir,

On 17SEP05, while assigned to the CMHA Police Narcotics Unit, with Sgt. Styles #656, assisted by Unit 303-A PO Spigner #67 we arrested both Gregory Hardy 45/b/m/s and Raymelle Welch 27/b/m/s for Violation of State Drug Law. The following are the facts related to the arrests.

At approximately 1453 hours, while driving Zone Car 809 eastbound on Woodland Avenue, in the area of 6206 Woodland Ave. we observed two males identified as Gregory Hardy and Raymelle Welch engaged in a hand-

Page: 3 of 4





Print Date/Time: 09/19/2005 08:54

Login ID: Morenz626

Case Number: 2005-00012298

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

ORI Number: OH0186800

to-hand drug transaction. I immediately recognized Welch from suspected prior drug related activity. They both started walking around the building of this address. Once they got behind the building, they were crouched down, they immediately stood erect once they observed our presence. They appeared to be nervous, they then placed their hands at their sides. I noticed Hardy partially submerged his right hand into his right front pants pocket.

As we approached the males to further investigate the situation, I advised them to keep their hands visible, Welch appeared to be reluctant, and it appeared that he might be attempting to conceal or discard an unidentified object or objects. While conferring with the males they were unable to produce a reason for their actions and continued to appear nervous. When I inquired as to what Hardy placed in his right pants pocket, he stated a chain. He gave me permission to remove the contents of his right front pants pocket, which revealed a piece of purple paper containing one piece of suspected crack-cocaine, and a small silver chain. I advised him that he was under arrest for Violation of the State Drug Law.

While Sgt. Styles was conferring with Welch, he recovered a torn plastic baggie containing 6 pieces plus crumbs of suspected crack-cocaine from the ground next to Welch's right foot. Welch was advised that he was being placed under arrest for Violation of the State Drug Law. A search incident to arrest revealed that Hardy had a total of \$10.50 US currency and Welch had \$20.00 US Currency.

Both males were secured in handcuffs, advised of their Miranda Rights and put in the rear of Zone Car #303A. They were then transported to the Cleveland Police Central Processing Unit (CPU), where they were booked on the above charge. With camera #8 picture #21 was taken of Hardy and picture #22 was taken of Welch. We also completed CMHA Police Field Booking Cards for the males.

The piece of purple paper containing 1 piece of suspected crack-cocaine and the torn plastic baggie containing 6 pieces of suspected crack-cocaine plus crumbs were sealed in evidence bags, transported to CMHA Police Headquarters, where they were turned over to Sgt. Styles #656 for processing.

Reporting Officer	Date

\*\*\*\*\*CMHA Police Narcotic Unit to Conduct the Follow-UP\*\*\*\*\*



**CMHA - Police Division** 



CUYAHOGA METROPOLITAN HOUSING **AUTHORITY** 

OR! Number: OH0186800

Print Date/Time: 09/19/2005 09:13

Login ID: Morenz626

Case Number: 2005-00012298

**Case Details** 

Case Number: 2005-00012298 Location: 6206 WOODLAND AVE

Cleveland, OH, 44104

Reporting Officer ID:

Scene Processed By: Assigned Bureau:

05 - Hermensky 05 - Hermensky

Narcotics

Disposition:

Active / Ref. to Detective Status:

Exc Clear:

Incident Type: Possession Controlled Substances

Occurred From: 09/17/2005 14:53

Counts: 1

Off Property

Occurred Thru: 09/17/2005 15:52

Status Date:

**Disposition Date: Exc Clear Date:** 

9/17/2005

Offenses

Group/ORI No. Crime Code Statute Description Counts State 2925.03C1 Trafficking in Drugs - include in Schedule I or II

Offense #1

Group/ORI: State

Crime Code: 35A

Description: Trafficking in Drugs - include in Schedule I or II

**NCIC Code:** 

Offense Status: Open Gang Related: Unknown

# of Adults: 2 **Property Damage Amt:** 

**Domestic Circumstance:** 

Offender Suspected Of Using

Unknown

Unknown

**Accosting Situation:** 

Scene Code:

Status Date:

Statute: 2925.03C1

09/17/2005 Aiding/Abetting:

# of Juveniles: Abandoned Structure: No

Carjacking: No Gambling

No

Motivated:

Alcohol:

**Criminal Activity** 

**Evidence Collected** Material

Computer: N/A

Buying/Receiving

Distribute/Sell

Victim Suspected Of Using

Drugs:

Computer:

**Tools Used** 

Security Systems

Attempt/Commit Code: Commit

Offense Date: 09/17/2005

Bias/Motivation:

Occupancy Code:

IBR Seq. NO: 1

**Household Status:** 

Sub-Code:

Lane:

Hate Bias Indicator:

Subjects

Alcohol:

Drugs:

Address Type No. Name Phone Race Sex DOB Suspect Gregory Hardy 2309 E 87TH ST (216) 229-3039 Black Male 06/25/1960 Cleveland, OH 44106 2 Raymelle D Welch Suspect 2516 SCOVILL AVE (216) 254-4584 Black Male 06/16/1978 Cleveland, OH 44104

Subject #1 - Suspect

Primary: No

**Gregory Hardy** Name:

Address: 2309 E 87TH ST Cleveland, OH 44106

Phone: (216) 229-3039

Resident Type: \*N/A\*

Suspect Type: Race: Black Height: 5ft. 8in.

Eyes:

SSN:

Suspect

Sex: Male

Weight: 200.0 lbs. Hair: Black

DOB: 06/25/1960 Build: Medium

DVL#: State:

Disposition: Arrested

Resident Status: Non-resident

Description

Brown

Date: 09/17/2005

Related Offenses

Crime Code Group/ORI Statute State 35A 2925.03C1

**Domestic Violence:** 

No

**Domestic Violence Referrals:** 

Federal Agencies Involved: No

Statement Type: Verbal

Subject #2 - Suspect

Primary: No

Name: Raymelle D Weich Address: 2516 SCOVILL AVE

Cleveland, OH 44104

Suspect Type: Race: Black Height: 5ft. 8in. Eyes: Brown

Suspect

Trafficking in Drugs - include in Schedule I or II

Sex: Male Weight: 252.0 lbs.

Black

Hair:

DOB: 06/16/1978 **Build: Heavy** 

Page: 1 of 4



Resident Status: Non-resident



ORI Number: OH0186800

**CUYAHOGA METROPOLITAN HOUSING** 

State:

Print Date/Time: 09/19/2005 09:13

Login ID: Morenz626

Case Number: 2005-00012298

Phone: (216) 254-4584

Resident Type: \*N/A\*

Disposition: Arrested

Related Offenses

Domestic Violence:

Group/ORI State

Crime Code

35A

Νo

Raymelle D Welch

Statute 2925,03C1

Description

Address

2516 SCOVILL AVE

2309 E 87TH ST

Cleveland, OH 44104

Cleveland, OH 44106

Date/Time: 09/17/2005 14:53

Black

5ft. 8in.

Brown

Date: 09/17/2005

SSN:

Trafficking in Drugs - include in Schedule I or II

DVL#:

**Domestic Violence Referrals:** 

Federal Agencies Involved:

Date/Time

Fresh

Male

Black

Weight: 252.0

09/17/2005 14:53

09/17/2005 14:53

Statement Type: Verbal

Νo

**AUTHORITY** 

Arrests

Arrest No. 674 A

673 A Gregory Hardy

Name

<u>Arrest No.:</u> 674 A Name:

Raymelle D Welch 2516 SCOVILL AVE Address: Cleveland, OH 44104

Phone: (216) 254-4584

Scars, Marks, Tattoos Tattoo

Tattoo Tattoo

Type: Type: Type:

Medium Tattoo Medium Tattoo Medium Tattoo Location:

Race:

Eyes:

SSN:

Height:

Location: Location:

TAT RF ARM TAT LF ARM

TAT UR ARM

Type:

Sex:

Hair:

DVL#:

Description: Description: Description:

Miranda Date/Time: 09/17/2005 15:15

Resident Status: Non-resident

State:

Type

Fresh

Fresh

Build: Heavy

Marital: Single

Status: H-CPD CPU

DOB: 06/16/1978

Location: 6206 WOODLAND AVE

Cleveland, OH 44104

iD Procedure: Verbally Given

Age At Arrest: 27 **Basis For Caution:** 

Alcohol Influence: Unknown Statement Type: Verbal

**Arresting Officers** 

656 - Styles 05 - Hermensky <u>Bureau</u>

Narcotics **Narcotics**  Miranda ID: 05

Resident Type: 999 - Off Property Arrest Result Of: On-View

Drug Influence: Unknown Statement ID: 05

Weapon Codes

**Feature** 

Clears Case: Unknown

Resisted Arrest: No

Arrest Charges

Arrest No.: 673 A

Name:

Phone:

Address:

Group/OR1

State

Counts: 1

**Gregory Hardy** 

2309 E 87TH ST

(216) 229-3039

Cleveland, OH 44106

Crime Code 35A

Statute 2925.03C1 Description

Height:

Eyes:

SSN:

Trafficking in Drugs - include in Schedule I or II

Charge Date/Time:

Date/Time: 09/17/2005 14:53 Race:

Black 5ft. 8in.

Brown

Hair:

Fresh Type: Sex: Male Weight: 200.0

Black DVL#:

Status: H-CPD CPU

DOB: 06/25/1960 Build: Medium Marital: Single

State:

Resident Status: Non-resident

Miranda Date/Time: 09/17/2005 14:53

Attempt/Commit: Commit

Location: 6206 WOODLAND AVE

Cleveland, OH 44104

ID Procedure: Verbally Given

Age At Arrest:

Basis For Caution: No Basis for Caution

Alcohol influence: Unknown Statement Type: Verbal

Miranda ID: 05 Resident Type: \*N/A\*

Arrest Result Of: On-View Drug Influence: Unknown Statement ID: 05

Weapon Codes

**Feature** 

Clears Case: Unknown

Resisted Arrest: No

**Arresting Officers** 

<u>Bureau</u>

Page: 2 of 4





ORI Number: OH0186800

**AUTHORITY** 

**CUYAHOGA METROPOLITAN HOUSING** 

Print Date/Time: 09/19/2005 09:13

Login ID: Morenz626

Case Number: 2005-00012298

656 - Styles 05 - Hermensky

Narcotics **Narcotics** 

Condition: Appears Normal

**Medical Treatment:** 

Hospital:

**Injury Types** 

N/A

**Arrest Charges** 

Group/ORI No. State

Crime Code

Statute 2925.03C1 Description

Trafficking in Drugs - include in Schedule I or II

Counts: 1 Charge Date/Time:

Attempt/Commit: Commit

Property

Code

Type Make Model Description

A torn plastic baggie containing 6 pieces of crack-cocaine plus crumbs

Tag No. Item No.

09/17/2005 Evidence/Seized Drugs 09/17/2005 Evidence/Seized Drugs

One piece of crack-cocaine with purple paper

Seq #2

**Property Codes** 

Evidence/Seized

Property Type: Drugs

**UCR Value:** 

Property Class: Drugs

Initial Value:

Date Received: 09/17/2005

Stolen Location:

**Notified How** 

Quantity: 6.000

Unit Of Measure: Pieces

Measurement Source:

Description: A torn plastic baggie containing 6 pieces of

crack-cocaine plus

crumbs

**Associated Subjects** 

Type Owner

Name Raymelle D Welch Address

2516 SCOVILL AVE

**Phone** (216) 254-4584 Date

Seq #1 **Property Codes** 

Evidence/Seized

Property Type: Drugs

Property Class: Drugs

Date Received: 09/17/2005

Stolen Location:

Quantity: 1.000

**UCR Value:** 

Initial Value:

Cleveland, OH 44106

Cleveland, OH 44104

Unit Of Measure: Each

Measurement Source:

Description: One piece of crack-

cocaine with purple

paper

Associated Subjects

Type Owner

Name Gregory Hardy Address 2309 E 87TH ST Phone

(216) 229-3039

Notified How

Date

Suspect Vehicles

Narrative-Hermensky 05

Sir,

On 17SEP05, I was assigned to ZC809 along with Sgt. Styles #656. We were assisted by ZC303-A, PO Spigner #67. We arrested Gregory Hardy 45/b/m/s and Raymelle Welch 27/b/m/s for Violation of the State Drug Law. The following are the facts related to the arrests.

At approximately 1453 hours, while driving Zone Car 809 eastbound on Woodland Avenue, in the area of 6206 Woodland Ave., we observed two males identified as Gregory Hardy and Raymelle Welch engaged in a hand-

Page: 3 of 4





Print Date/Time: 09/19/2005 09:13

Login ID: Morenz626

Case Number: 2005-00012298

**CUYAHOGA METROPOLITAN HOUSING** AUTHORITY

ORI Number: OH0186800

to-hand drug transaction. I immediately recognized Welch from prior suspected drug related activity. They both started walking around the building at the address. Once they got behind the building, they crouched down. Upon observing us, they immediately stood up. They appeared nervous and placed their hands at their sides. I also noticed that Hardy partially placed his right hand into his right front pants pocket.

As we approached the males to further investigate the situation, I advised them to keep their hands visible. Welch appeared to be reluctant and it appeared that he might be attempting to conceal or discard an unidentified object or objects. While conferring with the males they were unable to produce a reason for their actions and continued to appear nervous. When I inquired as to what Hardy placed in his right pants pocket, he stated a chain. He gave me permission to remove the contents of his right front pants pocket, which revealed a piece of purple paper containing one piece of suspected crack-cocaine, and a small silver chain. I advised him that he was under arrest for Violation of the State Drug Law.

While Sgt. Styles was conferring with Welch, he recovered a torn plastic baggie containing 6 pieces plus crumbs of suspected crack-cocaine from the ground next to Welch's right foot. Welch was advised that he was being placed under arrest for Violation of the State Drug Law. A search incident to arrest revealed that Hardy had a total of \$10.50 US Currency and Welch had \$20.00 US Currency.

Both males were secured in handcuffs, advised of their Miranda Rights, and put in the rear of Zone Car #303A. They were then transported to the Cleveland Police Central Processing Unit (CPU), where they were booked on the above charge. A booking photo was taken of Hardy; camera #8, picture #21. A booking photo was taken of Welch; camera #8, picture 22. We also completed CMHA Police Field Booking Cards for the males.

The piece of purple paper containing 1 piece of suspected crack-cocaine and the torn plastic baggie containing 6 pieces of suspected crack-cocaine plus crumbs were sealed in evidence bags, transported to CMHA Police Headquarters, and turned over to Sgt. Styles #656 for processing.

*****CMHA Police Narcotic Unit to Conduct t	he Follow-UP*****	
Reporting Officer	Date	

# CMHA Police Department Report Writing Guide

(REVISED 06/03)

While every report has its own unique features, it should follow a structured pattern. The following guide will help Supervisors to require a specific format from their Officers, and assist them in writing a more complete, professional report.

#### **GENERAL GUIDELINES:**

The report starts with **Sir**, this is the only information on the first line. Skip a line and start the narrative after indenting 5 spaces. The first letter of each sentence is capitalized. There is one space after a comma, and 2 spaces after a period. In each paragraph, the first letter is indented 5 spaces. Skip a line between paragraphs. All reports will be written in the first person. For example: use I: not I, P0 Brown #66; or P0 Brown #66.

Persons are identified in the following manner: First- Last Name Age/Race/Sex/Marital Status. Dates are always given in the following manner: day/month/year. Ex. 03JAN03. Do not skip lines between day/month and month/year. The month is identified in all CAPS, using the first three letters of the month.

#### THE INTRODUCTION PARAGRAPH

All reports need an introductory paragraph to give the reviewer a brief synopsis of the reports details. The following are examples of introductory paragraphs.

#### FOR A "FRESH" ARREST REPORT:

Sir,

On 05JUN03, I was assigned to the 3<sup>rd</sup> Platoon 101 Zone with PO Smith #00. We arrested William Jones 31/b/m/s for Violation of the State Drug Law and Criminal Trespassing. The following are the facts related to the arrest:

#### More than 1 person arrested:

Sir,

On 05JUN03, I was assigned to the 3<sup>rd</sup> Platoon 101 Zone with PO Smith #00. We arrested William Jones 31/b/m/s for Violation of the State Drug Law and Criminal Trespassing and Terrance Jackson 26/b/m/m for Criminal Trespassing. The following are the facts related to the arrests:

#### FOR A WARRANT ARREST:

Sir,

On 05JUN03, I was assigned to the 5<sup>th</sup> Platoon 180 Zone with PO Smith #00. We arrested William Jones 31/w/m/s for an Assault warrant with the Cuyahoga County Sheriffs Office. Warrant # CRB12345, dated 03JAN99, confirmed by Dispatcher Jones of the Sheriffs Office. The following are the facts related to the arrest:

#### Other Units assisted on the arrest:

Sir,

On 05JUN03, I was assigned to the 3<sup>rd</sup> Platoon 101 Zone with PO Smith #00. We arrested William Jones 31/b/m/s for Violation of the State Drug Law and Criminal Trespassing and Terrance Jackson 26/b/m/m for Criminal Trespassing. Sgt. Green #611, Tactical Response Unit #8888-PO's Adams #11 and Barney #22, and 202A-PO Charles #33, assisted in the arrest. The following are the facts related to the arrest:

#### FOR A CITATION REPORT:

Sir,

On 05JUN03, I was assigned to the 2<sup>nd</sup> Platoon 202 Zone with PO Smith #00. We issued Joseph Camel 22/w/m/s Minor Misdemeanor Citation C12345 for Possession of Marijuana. The following are the facts related to the incident:

#### FOR A GENERAL REPORT:

Sir.

On 05JUN03, I was assigned to the 3rd Platoon 101 Zone Car with PO Smith #00. We completed a Criminal Damaging report for Betty Davis 33/b/f/m. The following are the facts related to the incident:

#### FOR A NAMED SUSPECT REPORT:

Sir,

On 05JUN03, I was assigned to the 1st Platoon 101 Zone along with P0 Smith #00. We completed a Criminal Damaging/Named Suspect report for Betty Davis 33/b/f/m. The following are the facts related to the incident:

This is all of the information that should be in the first paragraph. The expanding of the first paragraph is done in the second paragraph.

#### THE SECOND PARAGRAPH

The second paragraph expands the information in the first paragraph. This is where you will explain how you received the assignment, your probable cause, any evidence recovered, where the parties were transported to, and any other pertinent information.

#### FOR A "FRESH" ARREST REPORT RECEIVED AS A BROADCAST:

At 0200 we received a radio broadcast to respond to 2300 Unwin for persons loitering in the hallway. Upon our arrival, we observed Mr. Jones and Mr. Jackson loitering in the hallway. Neither party lived in the building, or had any reason to be in the hallway. A routine wants and warrants check was requested, which both parties cleared. While speaking with Mr. Jones, he admitted to having crack cocaine in his shirt pocket. Mr. Jones produced 3 "rocks" of suspected crack cocaine, from his left shirt pocket, and gave them to P0 Smith #00. Mr. Jones was advised that he was being placed under arrest for Violation of the State Drug Law and Criminal Trespassing and was read his Miranda Rights, which he stated he understood. Mr. Jackson was advised that he was being placed under arrest for Criminal Trespassing and read his Miranda Rights, which he stated he understood. Both males were placed in handcuffs, put in the rear of ZC103, and transported to the Cleveland Police Department 5th District, where they were booked for the above charges.

#### FOR A "FRESH" ARREST REPORT AS AN ON-VIEW:

At 0200, while on foot patrol in the area of 2300 Unwin, we observed Mr. Jones and Mr. Jackson loitering in the hallway. Neither party lived in the building or had any reason to be in the hallway. A routine wants and warrants check was requested, which both parties cleared. While speaking with Mr. Jones, he admitted to having crack cocaine in his shirt pocket. Mr. Jones produced 3 "rocks" of suspected crack cocaine, from his left shirt pocket, and gave them to P0 Smith #00. Mr. Jones was advised that he was being placed under arrest for Violation of the State Drug Law and Criminal Trespassing and was read his Miranda Rights, which he stated he understood. Mr. Jackson was advised that he was being placed under arrest for Criminal Trespassing and was read his Miranda Rights, which he stated he understood. Both males were placed in handcuffs, put in the rear of ZC103, and transported to the Cleveland Police Department 5<sup>th</sup> District, where they were booked for the above charges.

#### FOR A WARRANT ARREST REPORT RECEIVED AS A BROADCAST:

At 0200 we received a radio broadcast to respond to 2300 Unwin for persons loitering in the hallway. Upon our arrival we observed Mr. Jones and Mr. Jackson loitering in the hallway.

Neither party lived in the building or had any reason to be in the hallway. A routine wants and warrants check was requested, and the above warrant was located for Mr. Jones. Mr. Jackson cleared, was advised not to trespass on CMHA property, and was sent from the area. Mr. Jones was advised that he was being placed under arrest for the outstanding warrant and was read his Miranda Rights, which he stated he understood. Mr. Jones was placed in handcuffs, put in the rear of ZC103, and transported to the Cleveland Police Department 5th District, where he was booked for the above charge.

#### FOR A WARRANT ARREST REPORT ON AN ON-VIEW:

At 0200, while on foot patrol in the area of 2300 Unwin, we observed Mr. Jones and Mr. Jackson loitering in the hallway. Neither party lived in the building or had any reason to be in the hallway. A routine wants and warrants check was requested, and the above warrant was located for Mr. Jones. Mr. Jackson cleared, was advised not to trespass on CMHA property, and was sent from the area. Mr. Jones was advised that he was being placed under arrest for the outstanding warrant and was read his Miranda Rights, which he stated he understood. Mr. Jones was placed in handcuffs, put in the rear of ZC 103, and transported to the Cleveland Police Department 5th District, where he was booked on the above charge.

#### FOR A GENERAL REPORT RECEIVED AS A BROADCAST:

At 0345 we received a radio broadcast to respond to 1300 Crestline #412 in reference to a damage to property report. Upon our arrival, we spoke with the complainant, Betty Davis, who reported the following: This morning, at approximately 0335, while looking out of her bedroom window, she observed James Green w/m throw a rock through her window. Ms. Davis knows Mr. Green, but does not know any pertinent information. Ms. Davis completed a Voluntary Statement attesting to the same, see attached. Further investigation revealed a broken window in the bedroom, approximately 5' by 3'. There was a pile of broken glass on the bedroom floor, and a rock on top of that. The scene was documented using camera #12, picture 13.

#### FOR A GENERAL REPORT RECEIVED AS AN ON-VIEW:

At 0345, while on foot patrol in the area of 1300 Crestline, we were approached by Betty Davis, who reported the following: This morning, approximately 0335, while looking out of her bedroom window, she observed James Green w/m throw a rock through her window. Ms. Davis knows Mr. Green, but does not know any pertinent information. Ms. Davis completed a Voluntary Statement attesting to the same, see attached. Further investigation revealed a broken window in the bedroom, approximately 5' by 3'. There was a pile of broken glass on the bedroom floor, and a rock on top of that. The scene was documented using camera #12, picture 13.

#### SUBSEQUENT PARAGRAPHS

The final paragraphs should tie up any lose ends that remain in the report. This would include evidence, referrals- either verbally or printed material, and any other pertinent information.

#### FOR AN ARREST REPORT WITH EVIDENCE:

A field booking card was completed and a photograph was taken using camera #12, photo #16.

The 3 "rocks" of suspected crack cocaine were placed in an evidence bag, transported to Headquarters, and turned over to Lt. Morenz #626 for processing.

I respectfully request that the Narcotics Unit handle the follow-up associated with this arrest.

\*\*\*\* NOTE: Narcotics only follows-up on felony charges.\*\*\*\*

#### FOR A GENERAL REPORT:

Ms. Davis was referred to the City of Cleveland Prosecutor to file charges against Mr. Green. She was also advised to Management to assist in getting her window repaired.

#### FOR DOMESTIC VIOLENCE REPORTS:

She/he was given form 123 titled Help for Victims of Domestic Violence, and pamphlet 13 titled Compensation for Victims of Violent Crimes. She/he was also advised to contact the Domestic Violence Helpline at 391-4357.

These are general guidelines and should not be construed as the only information needed. Each report is unique, and therefore will require some latitude. But, the basic format remains the same.





Police Department
5715 Woodland Avenue
Cleveland, Ohio 44104-2740
tel 216.426.7760 fax 216.361,3759

Anthony H. Jackson Chief of Police

October 26, 2005

Ohio Department of Public Safety Traffic Crash Records Sections P.O. Box 182081 Columbus, Ohio 43218-2081

#### Gentlemen:

Pursuant to Ohio Revised Code Section 3937.41(D), this is to certify that the police officer named on the attached accident report was engaged in his official duties at the time of the accident. This accident report should not be included in a certified abstract of information under Division (A) of Section 4509.05 of the Ohio Revised Code.

1.	Name of Police Officer	Paul Styles #656	
2.	Officers Driver's License No.		
3.	Officer's Social Security No.		
4.	Officer's Date of Birth	July 5, 1963	
5.	Date of Accident	March 28, 2003	
6.	Accident Report No.	#2003-1342	COMDOC
7.	Cruiser License Plate No.	<u>OH -7857</u>	100

Very truly yours,

Stanley C. Murrey

Deputy Chief of Administration



#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul Styles #656, Sergeant- OIC Narcotics Unit

FROM: Ronald J. Morenz #626, Lieutenant-Special Operations

Γ	PAGE	SUBJECT	DATE
	1 of 2	Improper Payroll Submission- Pay Ending 07OCT05	04OCT05
_			

While reviewing your payroll submission I found a number of mistakes and omissions. The following need to be corrected:

#### **OVERTIME LOG:**

- o The Overtime Log you submitted is missing the day on the 3<sup>rd</sup> and 4<sup>th</sup> entries.
- o For the 4<sup>th</sup> entry you have it listed as "Call Back Staff Meeting." Staff Meetings are on Wednesdays not Tuesday. That entry should have been for court.
- o For the entries for PO Harris you only list the first initial of the person charges were filed on, use complete first names.

#### **TIMECARDS:**

- O Your timecard does not have the amount of hours to be paid listed for 30SEP05. There are no times for 03OCT05, were you here?
- O Det. Kuska's timecard does not have the amount of hours to be paid listed for 30SEP05. There are no times for 03OCT05, was he here?

#### **DANCY'S PRE-APPROVAL OVERTIME FORM:**

o Incorrect pay ending date.

#### **OVERTIME LOGS:**

- You incorrectly list "COURT" as a "Call Back" on your OT Log.
- O You incorrectly list "COURT" as a "Call Back" on Det. Dancy's OT Log. DO NOT staple Court Cards and Court Vouchers together, they go in two different directions. Paperclip them.
- Why is Harris putting in for time that should have been submitted on the last pay period? Did you check his last OT Log to insure that he hasn't already been paid for this?
- O Det. Hermensky's Unit is not "2<sup>nd</sup> Platoon/Patrol", he is assigned to the "Narcotics Unit."

- 1	PAGE	SUBJECT	DATE
١	2 of 2		04OCTOS
ı	2 01 2	Improper Payroll Submission- Pay Ending 07OCT05	04OCT05
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- O Does Det. Moskal have a first name? If so, have him use it on his form.
- O Why is Moskal putting in for time that should have been submitted on the last pay period? Did you check his last OT Log to insure that he hasn't already been paid for this?
- Moskal's Court Card for 8/25/05 has not been reviewed.
- O Moskal's Court Card for 9/1/05 has a disposition of "Judgement", would that be in favor of CMHA or the defendant?
- o Moskal's Court Card for 9/7/05 has not been reviewed.
- Kuska's Court Card for 10/3/05 has not been reviewed.

#### **COURT VOUCHERS:**

O Court Vouchers are signed just like checks, not written on the front underneath them. Yours are incorrect.

As a supervisor it is your responsibility to insure that your subordinates complete their paperwork correctly. Because you are a supervisor you should be completing your paperwork correctly. Take a few extra minutes and make sure that your work is complete and correct.

You are to have all of this corrected and re-submitted to me by 05OCT05 @ 0900. Also sign this memo including date/time and forward the entire package back to me.

Ronald J. Morenz, Lieutenant

040cT65@ 2100 hrs

# CMHA Police Department OVERTIME LOG

Shift/Unit: Narcotics

Pay Period Ending: 070CT05

Date: 030CT05

Date: 050C103	DECEDIATION	4.00 Court Rm 23-C Karen McDonald - VSDI Continued of 122	Call Back Staffing Meeting	Extended Tour 05-12671 Late Report > C. 12-7	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ate Report	4.00 Call Back Staffing Meeting	Task Force Assignment	Task Force Assignment	Lask Force Assignment	Court Rm 13-D Martin Davis - Drug Abuse Pled Guilty 04-2799	Meeting with Legal in reference to T. Fuller	Court Rm 15-C Erwin Jackson - Drug Abuse Manijuana pled Guilty 05-8274	Court for Arbitration in reference to T. Fuller	Call Back Filing Charges against Anderson	Call Back Filing Charges againsf S. Jackson	Extended Tour 05-13049 Late Report VSDL	Court Rm 17-D Anthony Broclins - VSDL Continued 04-3830	Extended Tour 05-13225 Late Report VSDL	Court Rm 19-D Perstina Wells - VSDI. Continued 04 2770	Extended Tour 05-12504 Late Report	4.00   Court Rm 17-D Anthony Brockins - VSDL Continued 04-3830	Extended Tour 05-12504 Late Report	4.00 Call Cack straight Released Roberick Moore	4.00 Call Back straight Released Shirletha Solomon	4.00 Court Rm 23-C Karen McDonald - VSDI. Continued 05 1226	4.00 Court Rm 23-C Charles Green - Criminal Tressnass Continual A 2 200	4.00 Court Rm 23-C Charles Green - Criminal Tressnass Caning 05 7000	4.00 Court Rm 3-A Roy McCrary - Eviction Indoement 05 11446	0-111440.
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DATE/DAV	19SEP05 MON	21SEP05 WED	21SEP05	27SEP05	27SEP05 WED	28SEP05 WED	26SEP05 MON	27SEP05 TUE	01OCT05 SAT	03OCT05 MON	07SEP05 WED	08SEP05 THU	12 SEP05 MON	24SEP05 SAT	25SEP05 SUN	26SEP05 MON	27SEP05 TUE	28SEP05 WED	Q							,_	r*1		TOTALS	

Submitted By: Sgt. Styles #656 Pco 656

Date: 030CT05

7 NONEXEMPT

STYLES, PAUL - UNION 210 POLICE & SECURITY 210 POLICE & SECURITY Pay Ending: 10/07/05

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7 NONEXEMPT
KUSKA, STEVE - UNION
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## OVERTIME PRE-APPROVAL AND INDIVIDUAL OVERTIME LOG FORM

#### PRE-APPROVAL FORM

(To be completed prior to hours being worked)

- 1. The Overtime Pre-Approval and Individual Overtime Log Form will be used to request and obtain pre-approval/approval for all overtime hours for non-exempt employees.
- 2. Each request must be fully justified as to the reason the work could not be completed during regular working hours.
- 3. The Overtime Pre-Approval Form must be completed and signed by the Supervisor and the Department Director in advance of the work being performed.
- 4. If individual overtime hours will exceed the 150-hour overtime cap pre-approval must be obtained from the Supervisor, Department Director, and the Executive Director.
- 5. If individual overtime hours will exceed the 300-hour overtime cap (for employees assigned to work in the Resident Services Department, Housing Services Department, Property Maintenance Department, and the Police & Security Department), pre-approval must be obtained from the Supervisor, Department Director and the Executive Director.
- 6. Supervisors should retain a copy of the Overtime Pre-Approval and Individual Overtime Log Form as a means for controlling the overtime worked by non-exempt employees.
- 7. Justification should be attached to this form and submitted to the Payroll Division for any overtime hours worked in excess of the amounts pre-authorized on this form.

Note: This form must be submitted to the Payroll Division along with the employee's time card. Incomplete forms will delay processing of any overtime hours worked.

Name of en	• •		Name of estate/department to which overtime is assigned:
Alvin I	vancy		Police Department
Total overt requested:	ime, or Holiday hours	Total overtime hours worked year to date:	Date work is to be performed:
	15	277	Pay Period Ending 070CT05
Purpose of	overtime (Routine/Non-routi	ne):	
Caribbean Ga	ing/Drug Task Force Assignmen	ots	
Justificatio	on (Please describe in detail w	hy it is necessary for the	overtime hours to be worked): To complete his duties while
	e Caribbean Gang/Drug Task F		
Date:	Requested by (Supervisor):	Na	me of Estate/Department:
30.70805	A00656	F	Police Department
Date:	Pre-Approved by (Departme		-Approved by (Executive Director, if applicable):
<u> </u>			

# POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

EMPLOYEE NAME: Paul A. Styles	SOCIAL SEC	CURITY NUMBER:				
UNIT DESCRIPTION: Narcotics	DEPT./ COST CENTER NUMBER: 210 -210					
PAY PERIOD ENDING: 07OCT05	BADGE # 656	CLASSIFICATION: Sergeant				

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PAY PERIOD ENDING: 07OCT05	E	656	CLAS Serg	SIFICATIO	ON:			
0.475	DAY	START	END	١	AL HOUR WORKED		2nd = 048 3rd = 049 SHIFT	
DATE	DAY	TIME	TIME	OT	REG	COMP	CODE	TYPE OF HOURS WORKED
19SEP05	Monday	0900	1049			4.0		Gall Back Count Dy
21SEP05	Wednesday	1000	1150			4.0		Call Back
21SEP05	Wednesday	0000	0028	.50			048	Extended Tour
27SEP05	Tuesday	0900	1002			4.0		Gall Back Color Py
27SEP05	Tuesday	0000	0020	.50			048	Extended Tour
28SEP05	Wednesday	1400	1500			4.0		Call Back
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# POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

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# POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

EMPLOYEE NAME: James E. Harris	SOCIAL SEC	SOCIAL SECURITY NUMBER:								
UNIT DESCRIPTION: Narcotics Unit	DEPT./ COS 210 -250	DEPT./ COST CENTER NUMBER: 210 -250								
PAY PERIOD ENDING: 7 Oct 05	BADGE # CLASSIFICATION: 03 Detective									

7 Oct 05		03	Det	ective				
		071		тот	AL HOUR: WORKED	S	2nd = 048 3rd = 049	
DATE	DAY	START TIME	END TIME	ОТ	REG	COMP	SHIFT	The of the transfer
7 SEP05	Wednesday	0900	0930	4.0				TYPE OF HOURS WORKED
~8 SEP05	Thursday	0900	1041		4.0		<del></del>	Call Back
12 SEP05	Monday	1000	1150		4.0			Court
24 SEP05	Saturday	1230	1330	4.0				Court
25 SEP05	Sunday	1900	1930	4.0				Call Back
26 SEP05	Monday	1200	0408	4.25				Call Back Extended Tour
.27 SEP05	Tuesday	0900	1002		4.0			Court
28 SEP05	Wednesday	0000	0126	1.5				Extended Tour
.28 SEP05	Wednesday	0900	0937		4.0			Court
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CTILL THE COURT								
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OTAL HOURS				17.75	16			٨
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## POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

EMPLOYEE NAME: Paul Hermensky	SOCIAL SECU	RITY NUMBER:
UNIT DESCRIPTION: 2nd Platoon/Patrol	DEPT./ COST ( 210 -210	CENTER NUMBER:
PAY PERIOD ENDING: 10/7/05	BADGE # 05	CLASSIFICATION: Police

PAY PERIOD ENDING: 10/7/05		BADGE # CLASSIFICATION:  05 Police		ON:				
					AL HOUR WORKED	s	2nd = 048 3rd = 049	
DATE	DAY	START TIME	END TIME	ОТ	REG	СОМР	SHIFT CODE	TYPE OF HOURS WORKED
9/19/05	Friday	0000	0035	.75			048	Extended Tour
9/27/05	Tuesday	0900	1102			4.0	047	Court
9/27/05	Tuesday	0000	0146	2.0		ļ	048	Extended Tour
10/1/05	Saturday	1100	1300			4.0	047	Call Back
10/2/05	Sunday	1630	1800	- 1		4.0	047	Call Back
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ACTUAL TIME SPENT								
TOTAL HOURS	· · <del>· · ·</del>			2.75		12		
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APPROVED BY:			_		424		EMPLOYEE	SIGNATURE
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#### POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

EMPLOYEE NAME: Moskal	SOCIAL SEC	SOCIAL SECURITY NUMBER:				
UNIT DESCRIPTION: Narcotics Unit	DEPT./ COS 210 -210	T CENTER NUMBER:				
PAY PERIOD ENDING: 07OCT05	BADGE # 53	CLASSIFICATION: Detective				

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**TOTAL HOURS** 2nd = 048WORKED 3rd = 049START END **SHIFT** DAY DATE TIME TIME COMP OT REG CODE TYPE OF HOURS WORKED 8-25-05 0900 1048 Tuesday 4.0 Court 8-29-05 Monday 0900 1146 4.0 Court 8-30-05 Tuesday 0900 1003 4.0 Court 9-1-05 Thursday 1030 1056 4.0 Court 9-7-05 1030 Wednesday 1037 4.0 Court 9-28-05 Wednesday 0900 1050 4.0 Court 9-29-05 Thursday 0930 1030 4.0 Court **ACTUAL TIME SPENT** TOTAL HOURS 28 100656 Det Markal 53 REQUESTED BY: **EMPLOYEE SIGNATURE** APPROVED BY: DATE: TITLE: COMMENTS: CODE 0 WILLIAM - UNION OUT 王SS 7 NONEXEMPT SECURITY 0/07/05  $\mathbf{Z}$ COMP. HRS. USED REG. HOL. HRS. ANNUAL LEAVE HRS. WORKED HERE WOP HOURS 83.0 CCI 5 1. 33 SKK LEAVE 000 233 38 જ 100 S 2 5 18 113 (00) 210 POLICE 210 POLICE Pay Ending Z 節 **EXPLAIN PRIOR PAY** 50 ?

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P0:13	RECORD OF COURT APPEARANCE CMHA POLICE DEPARTMENT
(1) Pt1.MOSKAI #53 (2	2) Date: 8 /35/05 (3) Time In: 0900 (4) Time Out: 1048
	enald (6) Date of Arrest 8 /10 /05 (7) Estate: 109H
(8) Arresting Officers: Mosk	A/ #53 WALL #86 (9) Complaint #:05-/32
	officer Appearing in Court: On Duty Off Duty_
	(13) Docket No.: (14) Rm. No.:23.C
(15) Judge: Gallagher (	16) Disposition: Continued
(17) Charge No. 2:	(18) Docket No.: (19) Room No.:
(20) Judge: 11003 400	21) Disposition:
(22) Next Court Date Charge No.	Clerk Of Courts Stamp
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### RECORD OF COURT APPEARANCE CMHA POLICE DEPARTMENT

(1) Ptl. MosKAL #53 (2) Date: 9/1	/ <u>05</u> (3) Time In: <u>1035</u> (4) Time Out:1056
(5) Defendant's Name: Roy McCrary (6) Date o	f Arrest 5/20/05 (7) Estate: 228
(8) Arresting Officers: MosKAI #53 H	ARRIS #03 (9) Complaint #: 05-1446
(10) Arrest #: <u>05-1446</u> (11) Officer Appearing	In Court: On Duty Off Duty
(12) Charge No. 1: EVICTION (13) Doc	ket No.: (14) Rm. No · 3 - Δ
(15) Judge: Pope (16) Disposition:	Judgement
(17) Charge No. 2: (18) Doci	ket No.: (19) Room No.:
(20) Judge: (21) Disposition:	
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### RECORD OF COURT APPEARANCE CMHA POLICE DEPARTMENT

(1) Ptl. Moskac #53 (2) Date: 9/7/05 (3) Time In: 1030 (4) Time Out: 1037
(5) Defendant's Name: Donald Clark (6) Date of Arrest 3/7 105 (7) Estate: Wale
(8) Arresting Officers: MOSKA #53 Ovalle #30 (9) Complaint #: 05-137
(10) Arrest #: 05/370 (11) Officer Appearing In Court: On Duty Off Duty
(12) Charge No. 1: Eviction (13) Docket No.: (14) Rm. No.: 3=A
(15) Judge: POPE (16) Disposition: Configure
(17) Charge No. 2: (18) Docket No.: (19) Room No.:
(20) Judge: (21) Disposition;
(22) Next Court Date Charge No. 1: 13/65 (23) Next Court Date Charge No. 2: //
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### RECORD OF COURT APPEARANCE CMHA POLICE DEPARTMENT

(1) Pt1. Dext. Knskin # 3 (2) Date: 10/3/	<u> </u>
(5) Defendant's Name: 1/11/10 + Thorn(6) Date of	Arrest 11 / 18/02 (7) Estate: 106/7
(8) Arresting Officers: Pt. Ishlam #34	#(9) Complaint #: <u>\200</u> 3-60
(10) Arrest #: (11) Officer Appearing	
(12) Charge No. 1: <u>V501</u> (13) Dock	et No.: (14) Rm. No.: 17-13
(15) Judge: Mc Ocomo // (16) Disposition:	
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#### **CMHA**

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Paul Styles #656, Sergeant- OIC Narcotics Unit

FROM: Ronald J. Morenz #626, Lieutenant-Special Operations

PAGE	CIMPOR	
	SUBJECT	DATE
1 of 2	Improperly Completed Payroll for Pay Period Ending 23SEP05	20SEP05

While reviewing the payroll that you submitted for the Narcotics Unit, many glaring errors were found. While I understand that portions of the payroll are new to you as the Narcotics Unit OIC, many of the errors are for items that should have been addressed during your tenure as a Patrol Sergeant. The errors are as follows:

#### YOUR OVERTIME LOG:

- You failed to put your Cost Center Number on the form.
- You put pay period ending as 09SEP05; the correct date is 23SEP05.
- You failed to list the overtime you worked on 18SEP05.

#### **DET. ALVIN DANCY'S OVERTIME LOG:**

- He failed to complete page \_\_ of \_\_\_.
- His put his Unit Description as Police Department. This is a Police Department form, his Unit is Narcotics.
- He failed to put his Cost Center Number on the form.
- He put a date in the area reserved for the person who approves the Overtime Sheet.
- You did not complete an overtime form for him, or require him to submit one, that conforms with Departmental standards to be forwarded with the payroll. The one you submitted is strictly for Departmental use, not payroll.

An Overtime Log is a basic Department form. As a supervisor you should not only know how to properly complete one, you are also responsible to insure that your subordinates can properly complete one as well.

#### OVERTIME DOCUMENTATION ON THE TIMECARD:

On all of the timecards that you submitted that had documented overtime, you failed to follow Departmental standards. As a supervisor you are required to make a notation on the proper date on the time card to document instances of overtime. If an officer works 2 hours of overtime, the documentation should read 2 OT followed by your initials. Your documentation covers multiple lines/days on the time cards. You also used the abbreviations "ext. tour and ext.." This does not

PAGE	SUBJECT	DATE
2 of 2	Improperly Completed Payroll for Pay Period Ending 23SEP05	20SEP05

conform to Departmental standards. On the back of the time card is where you document an Extended Tour or Callback, not the front.

When you total up the hours in the last box for each day, you do not reflect any overtime being worked. you simply marked "8". The proper notation when .50 of overtime is worked is 8/.50.

You also wrote S-SU above the first in column on all of the time cards. There is no reason to write anything in this area, nor is anything required. I need an explanation as to why you did that, or why you think it is proper.

You also wrote Det. Hermensky in on the 15<sup>th</sup> and 16<sup>th</sup>. Departmental Rules and Regulations require that all employees punch in and out. I am aware that on occasion an officer may forget to punch-in even though they have been here for some time. This was an issue when Det. Hermensky was previously assigned to the Narcotics Unit. In the future when you write an employee in on their timecard, you are required to submit me a CMHAPD94-001 explaining why you took such action.

#### DAYS-OFF MATRIX:

There are no entries for Det. Hermensky's days off. The matrix is an integral part of a supervisors' duties. It must be updated on a daily basis so that the rest of the department has updated information when they review departmental attendance. You also had your days off listed as 18SEP05 and 20SEP05. Your actual days off were 18SEP05 and 19SEP05. Detail is an essential requirement for a supervisor.

As a supervisor assigned as an OIC of a specialized unit, you need to be more attentive to detail. The manner in which you complete your assignments is viewed by your personnel. If they can submit paperwork that is not in compliance with Departmental standards and not have it returned, they will keep submitting it. It is your responsibility to insure that it does not continue and to bring your personnel up to a satisfactory operating level.

Morenz, Lieutenant

Reviewed 221-05 200626

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#### OVERTIME PRE-APPROVAL AND INDIVIDUAL OVERTIME LOG FORM

#### PRE-APPROVAL FORM

(To be completed prior to hours being worked)

- 1. The Overtime Pre-Approval and Individual Overtime Log Form will be used to request and obtain pre-approval/approval for all overtime hours for non-exempt employees.
- 2. Each request must be fully justified as to the reason the work could not be completed during regular working hours.
- 3. The Overtime Pre-Approval Form must be completed and signed by the Supervisor and the Department Director in advance of the work being performed.
- 4. If individual overtime hours will exceed the 150-hour overtime cap pre-approval must be obtained from the Supervisor, Department Director, and the Executive Director.
- 5. If individual overtime hours will exceed the 300-hour overtime cap (for employees assigned to work in the Resident Services Department, Housing Services Department, Property Maintenance Department, and the Police & Security Department), pre-approval must be obtained from the Supervisor, Department Director and the Executive Director.
- 6. Supervisors should retain a copy of the Overtime Pre-Approval and Individual Overtime Log Form as a means for controlling the overtime worked by non-exempt employees.
- 7. Justification should be attached to this form and submitted to the Payroll Division for any overtime hours worked in excess of the amounts pre-authorized on this form.

Note: This form must be submitted to the Payroll Division along with the employee's time card. Incomplete forms will delay processing of any overtime hours worked.

Name of em	ployee:		Name of estate/department to which overtime is assigned:				
Alvin D	ancy #32		Police Department				
Total overti requested:	me, or Holiday hours	Total overtime hours worked year to date:	Date work is to be performed:				
	25	262	Pay Period Ending 07OCT05				
Purpose of	overtime (Routine/Non-routin	e):					
Caribbean Ga	ng/Drug Task Force assignments	==					
Justificatio	n (Please describe in detail wh	y it is necessary for the	overtime hours to be worked): To complete his duties while				
assigned to th	ne Caribbean Gang/Drug Task Fo	rce					
Date:	Requested by (Supervisor):	Na	ame of Estate/Department:				
9019-05	277626	l l	Police Department				
Date:	Pre-Approved by (Department	nt Director): Pro	Pre-Approved by (Executive Director, if applicable):				

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	Name of estate/department to which overtime is assigned:				
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### POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

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		START	END		VORKED		3rd = 049 SHIFT			
DATE	DAY	TIME	TIME	OT	REG	COMP	CODE	TYPE OF HO	OURS WORK	ŒD
9-16-05	TUESDAY	0500	0900	4.0				TASK FORCE		
9-06-05	TUESDAY	1800	2600	2.0				TASK FORCE		
9-07-05	WEDNES	DAY 1800	2/00	3.0				TASK FORLE	Assien	MIRL
9-18-05	THURSDA		2000	2.0				TASK FIRE	A ( 1 / A )	44504
9-09-05	FRIDAY	0500		4.0				TASK FORCE	Accia	MENT
9-10-05	SAFURDA		-	4.0				TASK FORCE	T 1435/6/1	MENT
9-13-05	TUESDAY	1800	2200	4,0			,	ALLIE I MAR	W ARA TO	MENT
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### POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

EMPLOYEE NAME: Alvin Dancy	SOCIAL SECURITY NUMBER:							
UNIT DESCRIPTION: Narcotics	DEPT./ COST CENTER NUMBER: 210 -210							
PAY PERIOD ENDING: September 23, 2005	BADGE # 32	CLASSIFICATION: Detective						

September 23, 2005		32	Dete	ctive				
					AL HOUR WORKED	S	2nd = 048 3rd = 049	
DATE	DAY	START	END TIME	от	REG	COMP	SHIFT CODE	TYPE OF HOURS WORKED
06SEP05	Tuesday	0500	0900	4		ļ		Task Force Assignment
06SEP05	Tuesday	1800	2000	2				Task Force Assignment
07SEP05	Wednesday	1800	2100	3				Task Force Assignment
08SEP05	Thursday	1800	2000	2				Task Force Assignment
09SEP05	Friday	0500	0900	4				Task Force Assignment
10SEP05	Saturday	1300	1600	4				Task Force Assignment
13SEP05	Tuesday	1800	2100	4				Task Force Assignment
14SEP05	Wednesday	1800	2000	2				Task Force Assignment
9								
CTUAL TIME SPENT								
OTAL HOURS				25				
PPROVED BY:	3626					Pa	EMPLOYEE S	SIGNATURE

REQUESTED BY: 17, 17	- true	
APPROVED BY:	EMPLOYEE SIGNATURE	
TITLE:	DATE:	
COMMENTS:		
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### POLICE AND SECURITY APPROVAL FORM AND OVERTIME LOG

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EMPLOYEE NAME: Paul A. Styles		SOCIAL SE	CURITY I	NUMBER:			1	
UNIT DESCRIPTION: Narcotics	t	DEPT./ COS 210 -	ST CENTE	R NUMBE	R:			
PAY PERIOD ENDING: 09SEP05	E	BADGE # 656		SSIFICATI geant	ON:			
		START	END		AL HOUR WORKED	S	2nd = 048 3rd = 049	
DATE	DAY	TIME	END TIME	от	REG	СОМР	SHIFT	TYPE OF HOURS WORKED
05SEP05	Monday	2300	2330	.50			048	Extended Tour
11SEP05	Sunday	0900	1100			4.0		Call Back
14SEP05	Wednesday	1000	1200			4.0		Call Back
14SEP05	Wednesday	0000	0027	.50			048	Extended Tour
15SEP05	Thursday	0000	0133	1.5	1		048	Extended Tour
17SEP05	Sunday	1700	1934	2.5				Extended Tour
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### CUYAHOGA METROPOLICAN HOUSING AUTHORITY POLICE DL RTMEI

APPENDIX E P&P 1.10

### **Request for Certification for Outside Employment**

Name 1 4441	Last Name	Styl	es		
Street Address	Manie			Apartmen	t/
City	Zip			Unit #	
SWORN POLICE OFFICER	RESERVE OFFICE	) []	-		OTECTION OFFICER
MEMBER AUTHORIZATION	RESERVE OFFICE	, <u> </u>		PN	OTECTION OFFICER
I HEREBY AUTHORIZE THE CHAPPO TO ACCESS AND OB	TAIN RECORDS FROM THE BELOW-I	ISTED PR	OPOSED I	EMPLOYER.	
MEMBER SIGNATURE					ATE 26DEC18
NAME OF PROPOSED SECONDARY EMPLOYER			100		
Company American Communications	Network				
Address		Telephon	e		
Supervisor Self		Title	IB	0	
Duties You Will Perform I will be recruting an	d providing consultation	for ba	sic uti	lities and e	ssential services.
Police Commission YES NO X	Generic Police Uniforn Required?	YES		NO 🛛	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
<ul> <li>CMHA does not authorize its members to eng the employer's current Workers' Compensation</li> <li>CMHA requires non-commissioned members</li> </ul>	gage in secondary employment ion must be provided.				ide Workers' Compensation. A copy of
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### CUYAHOGA METROPULIFAN HOUSING AUTHORITY POLICE DI RTMENT

APPENDIX / P&P 1.1:

**Request for Secondary Employment** I REQUEST PERMISSION TO ENGAGE IN SECONDARY EMPLOYMENT Styles Name Name Street Apartment/ Address Unit# City SWORN POLICE OFFICER **RESERVE OFFICER** PROTECTION OFFICER NAME OF PROPOSED SECONDARY EMPLOYER American Communicatiobns Network Address City Zip Telephone Contact Self Title IBO Person The estimated length of My hourly rate 1 Year N/A employment is: of pay will be: Hours per day; not to exceed twenty-eight (28) hours in a week; I will be working or twelve (12) hours while on a vacation day; or six (6) hours on a workday. I will be recruting and providing consultation for basic utilities and essential services. Duties You Will Perform **Police Commission** Generic Police NOTE: CMHA PD UNIFORM AND DEPARTMENT YES ио 🔀 YES NO Required? **Uniform Required?** ISSUED WEAPONS ARE NOT AUTHORIZED. IMPORTANT NOTICE • I understand the CMHA Chief of Police shall be the final determinant for granting approval to engage in secondary employment. I have not received disciplinary action greater than a written reprimand within the last two (2) years. • I have not used more than fifteen (15) days or more than one-hundred twenty (120) hours of sick time during the previous 12month period. • I understand that I MAY NOT engage in secondary employment with proposed employer whose primary business involves the distribution or dispensing of alcoholic beverages nor on police duty in front of such premises. • I understand that a current copy of secondary employer's Workers' Compensation Certificate must be provided. I UNDERSTAND THAT IF MY SECONDARY EMPLOYMENT IS OF A POLICE NATURE, THAT CMHA REQUIRES A CERTIFICATE OF LIABILITY INSURANCE IN THE AMOUNT OF \$1,000,000 PER OCCURRENCE AND \$2,000,000 AGGREGATE. CMHA MUST BE ADDED AS AN ADDITIONAL INSURED ON THE POLICY. I UNDERSTAND THAT MY REQUEST FOR SECONDARY EMPLOYMENT WILL BE DENIED IF I FAIL TO PRODUCE SAID ORIGINAL CERTIFICATE OF LIABILITY AND POLICY ENDORSEMENT. (See Appendix B, P&P Ch. 1.13) • I understand and acknowledge that CMHA does not authorize the use of the CMHA uniform or any department issued weapon while engaged in secondary employment. BY SIGNING BELOW, I CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE AND AGREE TO COMPLY WITH THE REQUIREMENTS AND AUTHORIZE CMHA TO ACCESS AND OBTAIN RECORDS FROM THE PROPOSED EMPLOYER. Member 26DEC18 Date Signature Paul A. Styles Print Name

SUPERVISOR'S ENDORSEMENT	
The above member has used $\underline{\mathcal{L} oldsymbol{\psi}}$ sick hours in the past twelve (12) months and is	not classified as a sick abuser.
DO NOT recommend approval of the above member's recommend	quest to engage in secondary employment.
Supervisor's Signature (B) 411 2 (C) 7	Date 12 in a lon
Commander's Signature	Date / 2//0
Deputy Chief's Signature way of the signature	Date 12/27/19

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#### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Dale Homerick #636, Lieutenant

FROM: Paul A. Styles #656, Sergeant

PAGE	SUBJECT	DATE
1 of 1	Secondary Employment Request Addendum	26DEC18

In regards to this request, there is no workers compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. The nature of this request does not require me to be involved with dispensing any alcoholic beverage or usage of any CMHA equipment. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving my involvement with American Communications Network, (ACN).

Respectfully,

SGT. Sweet A. Styles, Sergeant



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas Burdyshaw #603, Commander

FROM: Dale Homerick #636 Lieutenant

PAGE 1 of 1	Subject Secondary Employment Request by	DATE/NUMBER 26DEC18
L	Sergeant Paul A. Styles #656	

The attached request by Sergeant Paul A. Styles #656 permission to engage in secondary employment with (American Communications Network) for 2019 is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul Styles' Sick Time during the previous twelve months revealed she has used: 24.00 Hours.

Paul A. Styles has not received discipline greater than a reprimand within the past two years. Paul A. Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Planning Unit (PU) for proper recording.

Respectfully,

Dale Homerick, Lieutenant



**FINAL DECISION** 

**☑** Approve

**□Deny** 

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY Application for Outside Employment Authorization

I REQUES	T PERMISSION TO ENGAGE IN OUTSIDE EMPL	OYMENT									
First Name	aul		Last Name	Styles							
Street Address			realife		Apartment/						
City		Zip			Unit #						
СМНА	Police Sergeant - Nopba										
Position	- Olice Sergeant - Noppa										
PROPOSE	D OUTSIDE EMPLOYER										
Company Name	Americal Communications Network										
Address											
City		Zip		r memetr even aranna a mass son not objetter w	Telephone						
Contact	16-44-4		20	Title	1						
Person Title of the F	Position										
Duties You V		C78	The est	mated length of en	ployment is:						
Perform					<u> </u>						
Hours You V	Vill Work										
NOTE: CMHA	A ISSUED UNIFORMS, TOOLS, AND EQUIPMENT ARE NOT	PERMITTED T	O BE USEC	WHILE ENGAGED	N OUTSIDE EMPLO	YMENT					
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Employee Sig	gnature				Date 1	/8/2019 11:45:57 AM					
Print Name	See attached documentation										
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Mark Hur											
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Elizabeth	McCafferty	- 10									
Director of H	uman Resources Name and Signature			2 Approve	□Deny	Date 1/23/2019 10:23:58 AM					

Date: 1/23/2019 10:23:58 AM



Chief of Police

## CUYAHOGA ME OPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT Request for Certification for Outside Employment

MEMBER INFORMATION				
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City	Zip		Phor	ne
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MEMBER AUTHORIZATION				
I HEREBY AUTHORIZE THE CMHAPD TO ACCESS AND OBT	AIN RECORDS FROM THE BELOW	V-LISTED PROP	OSED EMPLOYER.	
SIGNATURE // A. J.				DATE 13DEC17
NAME OF PROPOSED SECONDARY EMPLOYER				
Company American Communications	Network			
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IMPORTANT NOTICE FOR THE SECONDARY EMPLO	YER			70.70
<ul> <li>the employer's current Workers' Compensation</li> <li>CMHA requires non-commissioned members to CMHA accepts no responsibility for members to responsibility for the acts of the employee who CMHA requires a Certificate of Liability Insurant permitting the Member to engage in secondar certificate language must read: "Cuyahoga Micoverage is primary and non-contributory with recognizing its position as an additional insure day notice for non-payment.</li> <li>CMHA does not authorize the use of the CMHA employer agrees to at all times indemnify and aries, Affiliates, directors, officers, agents, sendamages, costs, expenses, judgments or liens, property of any party arising directly or indirect CMHA may request records associated with the CMHA Office of Legal Affairs may be contacted require additional assistance. BY SIGNING BELOW, REQUIREMENTS</li> </ul>	to be listed on the employer's working outside of CMHA. The life engaged in secondary employer in the amount of \$1,000, by employment, the Employer in the amount of \$1,000, by employment, the Employer in the any insurance carried by the dynamic and the certificate of insurant in the certificate of insurants, and employees from an including attorneys' fees, arietly from, or in any way relative member.  at (216) 271-2875 if you have	he employee ployment.  000 per occur must includity is an additional rance shall contained against and against arising from boing to, the mine any questice.	is an agent of the arrence and \$2,000 le CMHA as an additional insured pural insured pural insured. CMHA ontain a thirty (30) pon while engaged in Housing Authoring and all claims, a dily or personal in ember's performa	2,000 aggregate. As a condition of ditional insured on the policy. The rsuant to written agreement and a requires a policy endorsement and a day cancellation notice and a ten (10) and in secondary employment. The ity, its Board of Commissioners, Subsidications, causes of actions, liabilities, losse jury, sickness, disease, death, or injury to nce of work on behalf of the employer.
REQUIREMENTS.				
Employer Signature A. Styles	-	1-1-1-	D	ate 13DEC17
Fitle IBO				
OR CMHA USE ONLY				
TO THE CMHA - CHIEF EXECUTIVE OFFICER:				
DO DO NOT D Endorse the abo	ve member's request	for secon	dary employ	ment.

Date



# CUYAHOGA MI OPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT Request for Secondary Employment

Plant	TO ENGAGE IN SECONDARY I		VI
Name Paul	Name	Styles	
Street Address			Apartment/ Unit #
City	Zip		Phone
SWORN POLICE OFFICER	RESERVE OFFICER		PROTECTION OFFICER
NAME OF PROPOSED SEC	CONDARY EMPLOYER		
Company American Communic	cations Network		
Address			
City	Zip		Telephone
Contact Self Person	1100	Title IBO	
The estimated length of employment is:		My hourly rate of pay will be: ${f N}$	/A
1 2 1	er day; not to exceed twenty-eight (2	8) hours in a we	ek;
working $\frac{3}{2}$ or twelve	e (12) hours while on a vacation day;	or six (6) hours	on a workday.
Duties You Will Perform 3			
Police Commission YES Required?	NO Generic Police Uniform Required? YES		NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
IMPORTANT NOTICE			
<ul> <li>I have not used more than fifteer month period.</li> <li>I understand that I MAY NOT eng distribution or dispensing of alco</li> <li>I understand that a current copy</li> <li>I UNDERSTAND THAT IF MY SECO INSURANCE IN THE AMOUNT OF ADDITIONAL INSURED ON THE PEAIL TO PRODUCE SAID ORIGINAL</li> <li>I understand and acknowledge the while engaged in secondary emp</li> <li>BY SIGNING BELOW, I CERTIFY THAT I AUTHORIZE CONTA TO ACCESS AND OBT</li> </ul>	\$1,000,000 PER OCCURRENCE AND \$2,0 POLICY. I UNDERSTAND THAT MY REQUING CERTIFICATE OF LIABILITY AND POLICY nat CMHA does not authorize the use of bloyment.	wenty (120) hours cosed employer we cont of such premise consation Certific ATURE, THAT CM 100,000 AGGREGA EST FOR SECONDA ENDORSEMENT. the CMHA uniford	whose primary business involves the ses. ate must be provided. HA REQUIRES A CERTIFICATE OF LIABILITY ATE. CMHA MUST BE ADDED AS AN ARY EMPLOYMENT WILL BE DENIED IF I (See Appendix B, P&P Ch. 1.13)
Print Name Paul A. Styles			
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The above member has used	sick hours in the past twelve (12) month	ns and is not class	ified as a sick abuser.
I DO 🔯 DO NOT 🗀 i	recommend approval of the above mem	ber's request to	engage in secondary employment.
Supervisor's Signature	112/1		Date /2/, /
Commander's Signature	Keep to	<b>(</b>	Date //3//7
Deputy Chief's Signature	my bales	00.	Date / 2 / 13 / 17

Styles,	P	au	ıaı													MAT															
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#### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas M. Burdyshaw #603, Commander

FROM: Paul A. Styles #656, Sergeant

ſ	PAGE	SUBJECT	DATE
Į	1 of 1		
ı	1 01 1	Secondary Employment Request Addendum	13DEC17
			<u></u>

In regards to this request, there is no workers compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. No CMHA equipment will be needed. The nature of this request does not require me to be involved with dispensing any alcoholic beverage. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving my involvement with American Communications Network, (ACN).

Respectfully,

Paul A. Styles, Sergeant



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Angel J. Morales, Deputy Chief

FROM: Thomas M. Burdyshaw #603, Commander

PAGE 1 of 1	Secondary Employment Request by	DATE/NUMBER 13DEC17
	Sergeant Paul A. Styles #656	

The attached request by Sergeant Paul A. Styles #656 permission to engage in secondary employment with (American Communications Network, ACN) is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul A. Styles' Sick Time during the previous twelve months revealed she has used: 11.00 Hours. Paul A. Styles has not received discipline greater than a reprimand within the past two years.

Paul Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Complaint Investigation Unit (CIU) for proper recording.

Respectfully,

Thomas M. Burdyshaw, Commander



## CUYAHOGA ME POLITAN HOUSING AUTHORITY POL DEPARTMENT Request for Certification for Outside Employment

MEMBER INFORMATION						
First Paul		Last Name	Style	es		
Street Address					Apartmei Unit #	nt/
City		Zip			Phone	
SWORN POLICE OFF	ICER 🛛	RESERVE OFFICE	₹ 🔲		PI	ROTECTION OFFICER
MEMBER AUTHORIZATION			er some at an exercise			The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
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Deputy Chief's Signature

## CUYAHOGA MET POLITAN HOUSING AUTHORITY POLIDEPARTMENT Request for Secondary Employment

Name Paul	Last Name	Styles	
Street Address			Apartment/ Unit #
City	Zip		Phone
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NAME OF PROPOSED SECONDAR	Y EMPLOYER		
Company American Communications N	etwork,		
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City	Zip		Telephone
Contact Paul A. Styles		Title IB	0
The estimated length of a Year employment is:		My hourly rate of pay will be:	N/A
working $\frac{3}{}$ or twelve (12) hour	to exceed twenty-eight ( s while on a vacation day	•	
Duties You Will Perform I will be providing consul			
AFC L L VIOLEX L	Generic Police Uniform Required?	□ NO ⊠	NOTE: CIMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
IMPORTANT NOTICE			
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12/19/16

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#### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas M. Burdyshaw #603, Commander

FROM: Paul A. Styles #656, Sergeant

PAGE	SUBJECT	DATE
1 of 1	Secondary Employment Request Addendum	16DEC16

In regards to this request, there is no Workers Compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. No CMHA equipment will be needed. The nature of this request does not require me to be involved with dispense any alcoholic beverage. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving American Communications Network, (ACN).

Respectfully,

Paul A. styles, Sergeant



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Angel Morales, Deputy Chief

FROM: Thomas M. Burdyshaw, Commander

1 of 1	Secondary Employment Request by	DATE/NUMBER 16DEC16
	Sergeant Paul A. Styles #656	

The attached request by Sergeant Paul A. Styles #656 permission to engage in secondary employment with (American Communications Network) is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul A. Styles' Sick Time during the previous twelve months revealed she has used: 24.00 Hours. Paul A. Styles has not received discipline greater than a reprimand within the past two years.

Paul A. Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Complaint Investigation Unit (CIU) for proper recording.

Respectfully

Thomas M. Burdyshaw, Commander



### CUYAHOGA METROPOLITAN HOUSING AUTHORITY Application for Outside Employment Authorization

TREQUEST PERMISSION TO ENGAGE IN OUTSIDE EMPLOY	YMENT				
Name Paul	Last Name	Styles			
Street Address			Apartment/ Unit #		
City	Zip		Phone		
CMHA Position Police Sergeant - Nopba			<u> </u>	<u>_</u>	
Position					
PROPOSED OUTSIDE EMPLOYER		== 1/10 = 1	EW		
Name Americal Communications Network					
Address					
City	Zip		Telephone		
Contact Person		Title			
Title of the Position	The esti	mated length of emp	ployment is:		
Duties You Will Perform					
Hours You Will Work		**			- Passar
NOTE: CMHA ISSUED UNIFORMS, TOOLS, AND EQUIPMENT ARE NOT PE	RMITTED TO BE USED	WHILE ENGAGED II	N OUTSIDE EMP	PLOYMENT	
IMPORTANT NOTICE	TO THE STATE OF				
I have read and understand the CMHA policy on Outside Employment as	stated in Section A-XI	of the Personnel Pe	olicies and Proc	edures Manual	and agree to abide by it
<ul> <li>conflict with the employee's CMHA position</li> <li>conflict with the best interests of CMHA</li> <li>adversely affect the working hours of the employee's CMHA position</li> <li>tire, or reduce the efficiency or performance of the employee</li> <li>conflict with the Conflict of Interest Policy as stated in Article 8</li> <li>I further understand that:</li> <li>CMHA has no responsibility or liability for my actions resulting a result of my conduct during my outside employment.</li> <li>I must inform Human Resources of any changes to my outside</li> <li>CMHA has the right to revoke its permission allowing me to w</li> <li>My outside employment must be consistent with CMHA's Con</li> <li>A violation of any of the above provisions by me may result in</li> <li>A letter must accompany this request for outside employment or me. If I have contracted my services, the accompanying let</li> <li>This authorization, if approved, expires on December 31st of exployee Signature</li> </ul>	in his/her CMHA posits 3-XIII of this Administr g from my outside em employment status. ork outside employmentict of Interest policy revocation of CMHA's t from the proposed a ter shall specify who i	ployment nor will Cl ent at any time. s permission, employ employer indicating is	MHA assume lia yee discipline, o that workers' co rage, the outsid	r both. ompensation co e employer or ndar year or if I	overage is being provide
Print Name See attached documentation			Date	1/4/2017 1	10:30:14 AM
- Coo attached documentation				<del>.</del>	
CHAIN OF REVIEW					3 111
Andres Gonzalez		B.A	EDan.		D-1 - 41/0047 40 50 00 P
Department Director Name and Signature		* Approve	EDeny		Date 1/4/2017 12:58:08 PM
Mark Hunt Director of Compliance Name and Signature		8 Approve	□Deny		Date 1/4/2017 1:53:47 PM
Director of Compliance Name and Signature  Elizabeth McCafferty		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Director of Human Resources Name and Signature		& Approve	Deny	:	Date 1/6/2017 9:32:04 AM
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FINAL DECISION SApprove Deny Date:	1/6/2017 9:32:04 AM				



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: A

Angel Morales, Deputy Chief

FROM:

Thomas M. Burdyshaw, Commander

PAGE 1 of 1	Secondary Employment Request by	DATE/NUMBER 09DEC15
	Sergeant Paul A. Styles #656	

The attached request by Sergeant Paul A. Styles #656 permission to engage in secondary employment with the (American Communication Network, ACN) is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul Styles' Sick Time during the previous twelve months revealed he has used: **00.00 Hours.** Paul Styles has not received discipline greater than a reprimand in 2014 or 2015.

Paul Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Complaint Investigation Unit (CIU) for proper recording. **Approval** received will initiate the issuance of two CMHAPD 94-018 forms to the officer(s) supervisor for completion. One CMHAPD 94-018 form will be filed in the C.I.U office.

Respectfully

Thomas M. Burdyshaw, Commander



### CUYAHOGA ME... OPOLITAN HOUSING AUTHORITY POL DEPARTMENT

### **Request for Certification for Outside Employment**

MEMBER INFORMATION First Paul		Last	Carles		
Name Paul Street		Name	Styles		
Address				Apartme Unit #	nty
City		Zip		Phone	
SWORN POLIC	E OFFICER 🔀	RESERVE OFFICER		Р	ROTECTION OFFICER
MEMBER AUTHORIZATION	N				
I HEREBY AUTHORIZE THE CUY	YAHOGA METROPOLITAN HO WPOSPO DISCIPLINE AND/OR	USING AUTHORITY POLICE DEPART MEDICAL INFORMATION.	MENT AND THE	BELOW-LISTED	PROSPECTIVE EMPLOYER TO EXCHANGE
MEMBER SIGNATURE	AJUK			C	DATE 09DEC15
NAME OF PROPOSED SECO	ONDARY EMPLOYER				
Company American (	Communications N	letwork, ACN			
Address		Te	ephone		
Supervisor <b>Self</b>			Title In	dependen	t Business Owner
Duties You Will Perform  Uti	ilities Consulting				
Police Commission YES Required?	П ио ⊠	Generic Police Uniform Required?	YES	ио 🛛	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
IMPORTANT NOTICE FOR 1	THE SECONDARY EMPLOY	/FR			
<ul> <li>responsibility for the a</li> <li>CMHA requires a Certipermitting the Member certificate language mecoverage is primary or recognizing its position day notice for non-pay</li> <li>CMHA does not author employer agrees to at Subsidiaries, Affiliates, losses, damages, costs injury to property of an employer.</li> <li>The CMHA Office of Legal A</li> </ul>	acts of the employee while ificate of Liability Insurance or to engage in secondary must read: "Cuyahoga Me and non-contributory with a san additional insured, yment. The contributory with all times indemnify and hand in times indemnify and hand in times, expenses, judgments or any party arising directly or affairs may be contacted a	e engaged in secondary employ to in the amount of \$1,000,000 employment, the Employer mustropolitan Housing Authority is any insurance corried by the A and the certificate of insurance uniform or any department lisse old harmless the Cuyahoga Meis, servants, and employees from liens, including attorneys' fees, andirectly from, or in any way att (216) 271-2875 if you have an	ment. per occurrence st include CM an additional Insu- e shall contain ned weapon we propolitan Hou- n and against a arising from be relating to, the	e and \$2,000,0 HA as an addit Insured pursured." CMHA re a thirty (30) deathle engaged it using Authority any and all clai podily or person e member's per	ay cancellation notice and a ten (10)
Employer Signature	11.56	<i>₹</i>		Dat	e 09DEC15
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FOR CMHA USE ONLY			***		
TO THE CMHA - CHIEF EXE	CUTIVE OFFICER:				
DO DO DO NOT	Endorse the abov	e member's request for	secondar	y employm	ent.
Chief of Police	al figilize	Hof 12/10/2	20		ite



### CUYAHOGA ME...OPOLITAN HOUSING AUTHORITY POL. DEPARTMENT

### **Request for Secondary Employment**

1 - 30	Last Name	Styles	
Street Address	e to be sufficient and a set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to the set to t		Apartment/ Unit #
City	Zip		Phone
SWORN POLICE OFFICER	RESERVE OFFICER		PROTECTION OFFICER
NAME OF PROPOSED SECONDA	ARY EMPLOYER		
Company American Communication	Network, ACN		
Address			
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The estimated length of employment is:	**************************************	My hourly rate of pay will be:	V/A
I will be Hours per day; no	ot to exceed twenty-eight (2		veek;
	ours while on a vacation day	or six (6) hou	s on a workday.
Duties You Will Perform  Utilities Consulting			
Police Commission YES NO NO	Generic Police Uniform Required?	YES NO	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
IMPORTANT NOTICE			
police duty in front of such premises.	twelve (12) months.	the distribution	n or dispensing of alcoholic beverages nor o
<ul> <li>I UNDERSTAND THAT IF MY SECONDARY EINSURANCE IN THE AMOUNT OF \$1,000,0</li> <li>ADDITIONAL INSURED ON THE POLICY. I FAIL TO PRODUCE SAID ORIGINAL CERTIFIC</li> <li>I understand and acknowledge that CMHA engaged in secondary employment.</li> </ul>	EMPLOYMENT IS OF A POLICE N 100 PER OCCURRENCE AND \$2,1 UNDERSTAND THAT MY REQU CATE OF LIABILITY AND POLICY	ATURE, THAT CI 000,000 AGGREC EST FOR SECONI ENDORSEMENT	GATE. CMHA MUST BE ADDED AS AN DARY EMPLOYMENT WILL BE DENIED IF I . (See Appendix B, P&P Ch. 1.13) orm or any department issued weapon while
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Total Attendance Points during 2014: 0

Current Attendance Points:

0

Current Attendance Point Status:

Safe

Current Sick Abuse Events: 0
Current Event Status: Safe
Abuse Points Calculated Range: N/A

Date Comment
1/7/2014 HR Training
2/5/2014 Approved by 640
4/2/2014 Appoved by 640
9/8/2014 PELC Week one
9/29/2014 VCA Training 0700-1000
10/13/2014 PELC Week 2

11/17/2014 PELC

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#### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas M. Burdyshaw, Commander

FROM: Paul A. Styles #656, Sergeant

PAGE	SUBJECT	DATE
1 of 1	Secondary Employment Request Addendum	09DEC15

In regards to this request, there is no Workers Compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. No CMHA equipment will be needed. The nature of this request does not require me to dispense any alcoholic beverage. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving American Communications Network.

Respectfully,

Paul A. styles, Sergeant #656

MEMBER IS NOT AUTHORIZED TO CONDUCT BUSINESS AT CHILA -

12/10/265



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Angel Morales, Deputy Chief

FROM: Thomas Burdyshaw, Commander

PAGE 1 of 1	Secondary Employment Request by	DATE/NUMBER 16DEC14
	Sergeant Paul A. Styles #656	1022011

The attached request for Sergeant Paul Styles #656 permission to engage in secondary employment with (American Communications Network, ACN) is in compliance with Policy & Procedures Chapter 1.13.

An audit of Paul Styles' Sick Time during the previous twelve months revealed he has used: **00.00 Total Hours.** Paul Styles has not received disciplinary action in 2014 greater than a reprimand.

Paul Styles has not used more than the annual allotment of sick time during the previous (12) month period, which is (15) days (120) hours.

Upon approval/denial, please forward a signed copy of all paperwork to the Complaint Investigation Unit (CIU) for proper recording. **Approval** received will initiate the issuance of two CMHAPD 94-018 forms to the officer(s) supervisor for completion. One CMHAPD 94-018 form will be filed in the C.I.U office.

Respectfully

Thomas Burdyshaw, Commander



# **CMHA**CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO: Thomas Burdyshaw, Commander

FROM: Paul A. Styles #656, Sergeant

	Para Laboratoria	
PAGE	SUBJECT	DATE
1 of 1	Secondary Employment Request Addendum	02JAN15

In regards to this request, there is no Workers Compensation coverage required. The secondary employment is not of a police nature and does not require a certificate of liability. No CMHA residents or employees will be solicited regarding this request. I take full responsibility for liability and hold CMHA harmless from possible legal actions involving American Communications Network.

Respectfully,

SGT- law A. Sty L # (56)
Paul A. styles, Sergeant



### CUYAHOGA MELLOPOLITAN HOUSING AUTHORITY POL. 2 DEPARTMENT

### Request for Secondary Employment

Name Paul	lost	iPLOYM yles		
Street Address	Name		Apartn	ent/
City	Zip	***************************************	Unit #	ρ
SWORN POLICE OFFICER	RESERVE OFFICER		-	PROTECTION OFFICER
NAME OF PROPOSED SECONDA	ARY EMPLOYER			
Company American Communication	THE RESERVE OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE			
Address		=======================================		
City	Zip		Telepho	ne
Contact Person Paul A. Styles	Title	Own	er	
The estimated length of employment is:		nourly rate ay will be:	N/A	
	not to exceed twenty-eight (28) h	ours in a v		
Duting Van Mill	ours while on a vacation day; or		s on a	workday.
Perform Sign Up Customers	For Gas and Electricity Service	\$		
Police Commission Required? YES NO	Generic Police Uniform Required? YES	☐ NO	$\boxtimes$	NOTE: CMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPONS ARE NOT AUTHORIZED.
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<ul> <li>I have no disciplinary actions on file greater. I have used 0 sick hours within the last.</li> <li>I understand that I MAY NOT engage in supplice duty in front of such premises.</li> <li>I understand that a current copy of secont. I UNDERSTAND THAT IF MY SECONDARY INSURANCE IN THE AMOUNT OF \$1,000,000.</li> <li>ADDITIONAL INSURED ON THE POLICY.</li> <li>FAIL TO PRODUCE SAID ORIGINAL CERTIF.</li> </ul>	twelve (12) months. econdary employment involving the ndary employer's Workers' Compens EMPLOYMENT IS OF A POLICE NATU 000 PER OCCURRENCE AND \$2,000,	distribution sation Certif RE, THAT CI 2000 AGGREG FOR SECONI PORSEMENT	icate mu MHA RE GATE. C DARY EN	ensing of alcoholic beverages nor or ust be provided. QUIRES A CERTIFICATE OF LIABILITY MHA MUST BE ADDED AS AN 1PLOYMENT WILL BE DENIED IF I 1.ppendix B. P&P Ch. 1.13)
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## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT Request for Certification for Outside Employment

First David			
Name Paul	Name Style	es	
Street Address		Apartme Unit #	nt/
City	Zip	Phone	
SWORN POLICE OFFICER	RESERVE OFFICER	P	ROTECTION OFFICER
MEMBER AUTHORIZATION	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
I HEREBY AUTHORIZE THE CUYAHOGA METROPOLITAN HO INFORMATION REGARDING IMPOSED DISCIPLINE AND/OR	USING AUTHORITY POLICE DEPARTMENT AN	ID THE BELOW-LISTED	PROSPECTIVE EMPLOYER TO EXCHANGE
MEMBER SIGNATURE WAS A- Style	S	[0	ATE 16DEC14
NAME OF PROPOSED SECONDARY EMPLOYER			
Company American Communications N	letwork		
Address	Telephone		
Supervisor Self	Title	Owner	
Duties You Will Sign Up Customers For Perform	· Gas Electricity and Phone Ser	rvices	
Police Commission YES NO X	Generic Police Uniform Required?	□ NO ⊠	NOTE: CIMHA PD UNIFORM AND DEPARTMENT ISSUED WEAPON ARE NOT AUTHORIZED.
<ul> <li>CMHA does not authorize its members to engage the employer's current Workers' Compensation</li> <li>CMHA requires non-commissioned members to CMHA accepts no responsibility for members were responsibility for the acts of the employee while CMHA requires a Certificate of Liability Insurance permitting the Member to engage in secondary certificate language must read: "Coyahogo Metacoverage is primary and non-contributory with recognizing its position as an additional insured, day notice for non-payment.</li> <li>CMHA does not authorize the use of the CMHA employer agrees to at all times indemnify and he Subsidiaries, Affiliates, directors, officers, agents losses damages, costs, expenses judgments or losses.</li> </ul>	must be provided. be listed on the employer's license (corporking outside of CMHA. The employees engaged in secondary employment. e in the amount of \$1,000,000 per occuemployment, the Employer must include topolitan Hauting Authority is an additional insurance corried by the Additional and the certificate of insurance shall couniform or any department issued weapold harmless the Cuyahoga Metropolitas, servants, and employees from and agliens, including attorneys' fees, arising for	mmission).  is an agent of the source and \$2,000,00 le CMHA as an additional insured pursual insured pursual insured. CMHA rontain a thirty (30) doon while engaged in Housing Authority alost any and all clairom bodily or person	econdary employer who will accept ful 00 aggregate. As a condition of ional insured on the policy. The sort to written ogreement and equires a policy endorsement ay cancellation notice and a ten (10) a secondary employment. The tis Board of Commissioners, ms. actions. causes of actions. liabilitie
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EMPL ID 1784	Request Date 12/14/2015	Effective Date 12/10/2015
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

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Last Name		First Name	<u> </u>	.1	Suffix	Birth Date	_	Status		Race	Resid		
Styles		Paul			<u> </u>	07/05/1963	M	Single		Black	Υ		
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	Code	Desc	ription			Hrly	S	alary	Dep	artment		Dept ID #	
To:	Job Job Code					Rate of I	Pay					<u> </u>	
	Code De		Description			irly Salary			Depa	rtment		Dept ID#	
1/1/2015	17033	Police	Sergeant	- Nopba		34.068	7			Administ	ration	210000	
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Department [	Director:	Date			Bi	udgetary Appro	val:		Date	<del></del>	·	_	

Chief Executive Officer:

Date



EMPL ID 1784	Request Date 1/13/2015	Effective Date 1/1/2015
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

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Last Nam	ne	First Nam	e	M.I.	Sut	ffix	Birth Date	Sex			Race	CMHA Reside			
Styles		Paul					07/05/1963	М	Single		Black	Y	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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Chief Executive Officer:

Date



EMPL ID 1784	Request Date 1/8/2015	Effective Date 1/6/2015			
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt			

Last Na	meFi	rst Name	M.I.	Suffix	Birth Date	Sex	Marital Status	Race	CMHA Resident
Styles	Pa	aul			07/05/1963	M	Single	Black	Y
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EMPL ID 1784	Request Date 1/22/2014	Effective Date 1/1/2014
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

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Last Nan	no.	First Nam		M.I.	6	ıffix	Dinth Date		Marita			CMHA	
Styles	110	Paul	16	IVI.1.	1 30	IIIIX	Birth Date 07/05/1963			Status Ra		Resident	
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Department	Director	: Date			/	Buc	dgetary Appro	oval:	1	Date		<u></u>	



EMPL ID	Request Date 3/8/2012	Effective Date 1/1/2012		
SOCIAL SS#	Employee Status ACTIVE	FLSA Status		
(mask- last 4 digits)	Ī			

	First Name	<b>.</b>	C. #	D: # 5 +		Marital		СМНА	
		M.I.	Suffix	Birth Date	Sex	Status	Race	Resident	
STYLES	PAUL		<u></u>	7/5/1963	IM.		BLACK		
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Mailing Add	1633 1	Address 2		City		State	Zip Code		
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	Job Codo	Job Code		of Pay	Department		Dept ID #		
	Code	Description	Hrly	Salary				_	
SERGEANT			<u> </u>	\$66,126.00	POLIC	CE	21	0 21000	
COMMENTS		alary increas	e is effectiv	e 1/1/12.					
- 	Correction: S	Salary increase		e 1/1/12.  Director of H	uman f	Resources	Date		
- 	Correction: S			* ·			Date		



EMPL ID		Request Date 12/30/2011	Effective Date 1/7/2012			
SOCIAL SS#		Employee Status ACTIVE	FLSA Status			
(mask- last 4 d	ligits)					

		<del></del>	7	T	П	Marital		CMHA
Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Status	Race	Resident
STYLES	PAUL			7/5/1963			BLACK	1.00.00.1
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Mailing Add	iress 1	Address 2		City		State	Zip Code	
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TO:	Job	Job Code	I Rate	e of Pay	Dana	rtment	Dept ID #	
	Code	Description	Hrly	Salary	Depai	i tillelit	Debt ID#	
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i veduesiedi.	1 Strate	Pale U		Director of Hi	ıman	Resources	Date	
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Department	Director	Date	•	Budgetary Ap	nrova	1	Date	<del>-</del>
,					, p. 0 1 c.	•	Daio	
		Chief Executi	ve Officer	<del></del>	Date	•		



EMPL ID	Request Date 1/13/2011	Effective Date 1/1/2011
_	Employee Status ACTIVE	FLSA Status
(mask- last	4 digits)	<u> </u>

Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Marital Status	Race		MHA Resident	
STYLES	PAUL		- Carrier	7/5/1963		Ottaile	BLACK	<del></del>	toolaont	
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Mailing Address 1		Addı	ess 2	City		State	Zip Code			
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	Action	Actio					· · · · · · · · · · · · · · · · · · ·			
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SENGEANT			30.00	3   \$04,200.00	<u> </u> FOL	ICE.	-	210	210000	
COMMENTS:										
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Requested By	1 il 8	Date	•	Director of H	umar	Resource	r Date			
The day of the	10 /	Date		Director of th	amai	11030010	A Date			
/ Julies	1/14/201									
	1/19/201									
Department Direct	or	Date	•	Budgetary A	pprov	al	Date			
		<del></del>	whee D'		Deti					
		⊨xec	utive Dir	ector	Date					

# CMHA CUYAHOGA METROPOLITAN

HOUSING AUTHORITY

#### PERS NNEL TRANSACTION FO VI

EMPL ID	Request Date	Effective Date		
1784	11/23/2010	11/24/2010		
SOCIAL SS#	Emp Status	FLSA Status		
	Active	Nonexempt		

Loot Nama	Circt No.	ma	MI	C. ASS.	Dieth Data	C	Marita		Dana	CM	
Last Name	First Na	ime	M.I.	Suffix	Birth Date	Sex	Status		•		sident
Styles	Paul				7/5/1963	М	Single		Black	Υ	-
Mailing Addre	ess 1		Address 2		City		State		Zip Code		
	Action		Action								
Action	Reason		Description	· · · · · · · · · · · · · · · · · · ·	Cost Numb			· · · · · · · · · · · · · · · · · · ·		per Description	
PAY	MER		Pay Rate C	change	100446001000000125000   P		POLICE	POLICE STAFF ONLY 1/11		Н	
FROM:	Job	loh	Code		R	ate of F	Pav	Depar	tmont		Dept ID #
PROIVI.	Code	1	cription		Hrly	10011	Salary	Depai	n angert		Debrin 4
1/1/2009	17033	***************************************	e Sergeant -	Nopba	29.0935	,	60514.48	Police	Administration	n	210000
TO:	Job	1	Code			Rate of Pay			Department		Dept ID #
	Code	Des	cription		Hrly		Salary				
11/24/2010	17033	Police	Sergeant - I	Nopba	29.9664		2330.11 Police		e Administration		210000
COMMENTS		1/1/201	10								
Uk	lu 1	hzd	-3 12/	17/10							
Requested By: (Date)			Director of Human Resources			ces:	Date				
Department D	Director:	<del>~ ()</del>	Dale	<u>.                                     </u>	Budgetan	/ Appro	oval:		Date		
			Chief Exe	cutive Officer:	:		Date				



EMPL ID	Request Date 12/8/2008	Effective Date 1/1/2009
	Employee Status ACTIVE	FLSA Status
(mask- last 4	4 digits)	

I act Name	First Name	M.I. S	Suffix Birth	Data		/larital	Beer	CMHA
Last Name STYLES	PAUL	IVI.I.				Status	Race	Resident
	I FAUL			5/1963 N	VI _		BLACK	
Mailing Address 1		Addres	s 2 City		15	State	Zip Code	
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### Cu loga Metropolitan Housing Thority REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First	Middle	SOCIAL SECURITY	IO. DATE OF BIR	TH - Black SI
STYLES Paul		10	Month 7 Day 0	5 Year 63 - White - Hispanic M
ADDRESS: Street	City	State	Zin Pi	Other HONE NO. RES
	= 22/28/2011   11 11			Y
DEPARTMENT/DIVISION/ESTATE POLICE	COST CENTER	Moren - 04 Day 07		FECTIVE DATE 01Day 08 Year
APPOINTMENT:	CHANGE:		SEPARATION:	
1. Full Time	1. Promotio	n = = = = = =	1. Resignation	. Reason
2. Part Time	2. Demotion			D¥
3. Temporary, Ends	3. Detail			
4. Trainee		utable A	2. Retirement	
to	4. Iransfer v	vithin Agency	3. Deceased	
5. Former Employee	5. Reinstate	ment	4. Dismissal	
Last Year Worked	From		5. Probationa	ry
Bargaining Unit	6. Change in	n Status	ļ	
Union Name	XX 7. Salary inc	crease	6. Reduction	
Local No.	6. Work out	of Classification	7. Job Abolist	nment 
Date Cleared Employment Screening	9. Other (Sp	ecify)	8. Disability	
POSITION:	3. 3 (3.	81	9. Military Lea	ive
1. New (attach position description)			10. Lanua at 11	
2. Reclassification			10. Leave of At	osence
3. Replacement			11. Suspension	
(Last Held By)			12. Other (Spec	cify)
	Date of Last Evaluation	)	Evaluation Score	
DATE	Date of Last Wage Inci	rease		
FROM: Title/Classification Step SERGEANT	Hourly Rate \$27.2909	Annual Salary \$56,764.98	Department/Division/Estate POLICE	Ext. COST CENTER
TO: Title/Classification Step SERGEANT	Hourly Rate \$28.1778	Annual Salary \$58,609.84	Department/Division/Estate POLICE	Ext. COST CENTER
NOTES: (1) Attach Copy of Termination or Res		(2) Justify (	if requesting positions in exce	ess of approved budget)
EMARKS: CONTRACTUAL INCREASE				
				F Heat
Edwill Home	Whil	1		
EQUESTED BY:	DATE	BUDGET MANAGER		DATE
W. W. J. J. Zana and				24. THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF T
I HUNCH ALOMON	17/11/	1 Mache		13/34/07
PPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICE	R	DATE
THORES. (SEPTIBLY ESTATE)				
	EXECUTIVE DI		DATE	

### Cuyahoga Metropolitan Housing Authority REQUEST FOR PERSONNEL TRANSACTION

NAME:	Last First  FYLES PAUL	Middle	SOCIAL SECURITY NO	DATE OF BIR Month()7 Day ()		- Aslan	SE
ADDRESS	: Street	City	State	Zip PH	ONE NO.	- Other	RESIG
				Establish Park Wast			Y/
DEP/ Police	ARTMENT/DIVISION/ESTATE	COST CENTER 210	Month2 REQUEST DATE 12 Day 05	Year Month	FECTIVE (		Year
APPOINT	MENT:	CHANGE:		SEPARATION:		20-10-5 (Care	To be seen
1.	Full Time	1. Promotion	1	1. Resignation	Reason _		4.6
2.	Part Time						
3.	Temporary, Ends	2. Demotion			Washington Co.		AT SET
	Trainee	3. Detail		2. Retirement			
	la la la la la la la la la la la la la l	4. Transfer w	ithin Agency	3. Deceased			
		5. Reinstater	nent				
<u> </u>	Former Employee	Emm		4. Dismissal			
<u>-</u>	Last Year Worked			5. Probational	У		
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	Local No.	8. Work out o	of Classification	7. JOD ADDIST	ment		
	Date Cleared Employment Screening	9. Other (Spe	acifu)	6. Disability			
POSITION:				9. Military Lea	ve		
1.	New (attach position description)						
2.	Reclassification			10. Leave of At	sence		
3	Replacement			11. Suspension			
	(Last Held By)			12. Other (Spec	ify)		
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SERGEA	e/Classification Step ANT	Hourly Rate \$25.47	Annual Salary \$52,991.96	Department/Division/Estate Police	Ext.	COST CEI	NTER
TO: Title SERGEA	e/Classification Step ANT	Hourly Rate \$26.49	Annual Salary \$55,111.63	Department/Division/Estate Police	Ext.	COST CEI 210	VTER
	(1) Attach Copy of Termination or : CONTRACTUAL INCREA	선생님이 사용하다 하다 하는 것이 아니는 아이를 하나 하다 않는데 아니다.	(2) Justily (if	requesting positions in exce	ss of app	proved budg	jet)
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and the second			ne como n	Section 1991			
		EXECUTIVE DIF	RECTUR	DATE			
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# Cuyahoga Metropolitan Housing Authority Personnel Transaction Form



NAME: Last STYLES, PARIL	First	Middle	soc	CIAL SECU	JRITY NO.	97/05/63	I SEX
ADDRESS. Street		Civ		<b>St</b> ate	Zip	RACE COI	DE
PHONE NO.		ENTER A SECURITY	CMHA RESIDENT? Y	REQU	JEST DATE	EFFECTIVE 91/91/9	
APPOINTMENT		CHANGE) SY - DALAS	sy incr	EASIE	SEPA	RATION	910
P4057434)M2					11 AV		
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REMARKS	(A) TARTON				COMD	,	1.13
REQUESTED BY  DEPARTMENT DIRECTO		DATE DATE	BUDGE	TOR OF H	Ju. T	<u> </u>	DATE

### Ct hoga Metropolitan Housing thority REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First STYLES Paul	Middle	SOCIAL SECURITY NO.	Month 7 Day 05		- Black - White - Hispanic - Asian - Other	SE
ADDRESS: Street	City	State	Zip	ONE NO.	- Oliver	RESID Y/I
DEPARTMENT/DIVISION/ESTATE POLICE	COST CENTER 210	Morting 04 Day 07	Year Month	FECTIVE (	AND THE RESIDENCE	/ear
APPOINTMENT:	CHANGE:		SEPARATION:			
	5. Reinstate 5. Reinstate 6. Change i XX 7. Salary Inc 8. Work out	within Agency ement in Status crease of Classification	1. Resignation.  2. Retirement  3. Deceased  4. Dismissal  5. Probationar  6. Reduction i  7. Job Abolish  8. Disability  9. Military Lea	y n Force ment		
2. Reclassification 3. Replacement (Last Held By)	Date of Last Evaluation	n		sity)	YEAR SHOP	
FROM: Title/Classification Step SERGEANT	Hourly Rate \$27.2909	Annual Salary \$56,764.98	Department/Division/Estate POLICE	Ext.	COST CEN	ITER
TO: Title/Classification Step SERGEANT	Hourly Rate \$28.1778	Annual Salary \$58,609.84	Department/Division/Estate POLICE	Ext.	COST CEN	ITER
NOTES: (1) Attach Copy of Termination or REMARKS: CONTRACTUAL INCREASE AND ADDRESS OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROP		(2) Justify (if	requesting positions in exce	ess of app	proved budg	iet)
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APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICER			DATE	
1 — Employee / white 2 — MIS / blue	EXECUTIVE D		DATE		ent lanidenn	



# CUYAHOGA METROPOLITAN HOUSING AUTHORITY Personnel Transaction Form

NAME Last	First	Middle	soc	CIAL SEC	URITY NO.	DATE OF BI	RTH	SEX
STYLES, PAGL			76			07/05/6	13	×
ADDRESS: Street		City		State	Zip	RACE	CODE	14年1年
						C-BLACK		
PHONE NO.	COST	CENTER	CMHA RESIDENT?	REQU	JEST DATE	EFFECTIVI	DATE	
	210 POLICE	N SECURITY	Y	0171	1.7.057	01/01	19/1	
APPOINTMENT:		CHANGE:			SEP/	RATION:		
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POSETTON:					1,6,4,7	6t :		
11 (8 to 14 to 15 to 16 to								
FROM: Title/Classification	Pay Range	Hourly Rate Annual	Salary		Project Descrip	tion	Projec	ct
POLICE SERCEANS	r - Nobay	26 : 4959	55,11	L POI	.TCB & SB	CHRITY	21	69
TO: Title/Classification	Pay Range	Hourly Rate Annual	Salary		Project Descript	ion	Projec	et
POLICE SERGEANT	C - NOPBA	27.2909	56,76	5 POI	JCE & SE	CURTTY	21	64
REMARKS:	THORRASE	*						
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				7 17	9.7		- 1	1
REQUESTED BY		DATE	DIRECTO	R OF HUM	AN RESOLIBCES		DAT	07
			Diffeore	A. O. HOW	TIEGOONGES		DAI	
DEPARTMENT DIRECTOR		DATE	BUDGET	MANAGE	3		DATE	
		monday.			7 13.0	7		
	EXEC	CUTIVE DIRECTOR			DATE			
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1 - H.R. File/white

2 - Pers. Specialist/blue

3 - Payroll/green

4 - Employee file/canary

5 - Budget/pink

6 - Supervisor/goldenrod



# Cuyahoga Metropolitan Housing Authority Personnel Transaction Form



NAME: Last	First	Middle	SOC	IAL SECU	RITY NO.	DATE OF BI	RTH SEX
Control of the second						27,017	1 1 1
ADDRESS: Street		City	11 11 11	State	Zip	RACE	CODE
PHONE NO.	1 101	COST CENTER	CMHA RESIDENT?	REQU	JEST DATE	EFFECT	IVE DATE
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t in it is and i					1014		
FROM: Title/Classification	Pay Rango	e Hourly Rate Annual	Salary		Project Descripi	tion	Project
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TO: Title/Classification	Pay Range	e Hourly Rate Annual	Salary		Project Descripio	tion	Project
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	May be Villa					er men er er er er er er er er er er er er er	1/1/-
REQUESTED BY		DATE	DIREC	TOR OF H	IUMAN RESOU	JRCES	DATE
DEPARTMENT DIRECTOR		DATE	BUDGE	ET MANA	GER		DATE
	ЕУ	ECUTIVE DIRECTOR			DATE		

### Cuyanoga Metropolitan Housing Auntority REQUEST FOR PERSONAL TRANSACTION

NAME: Last First STYLES PAUL	Middle	SOCIAL SECURITY NO.	Month 7 Day 05			SEX
ADDRESS: Street	City	State	Zip PH	ONE NO.	R	RESIDE
DEPARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATE  Month 03 Day 03	Year Month	FECTIVE I		Y/N ar
POLICE	210			UI	03	
APPOINTMENT:	CHANGE:		SEPARATION:			
2. Part Time	1. Promotic	on.	1. Resignation.	Heason .		
3. Temporary, Ends	2. Demotion	n				ENG.
4. Trainee	3. Detail		2. Retirement			
4. Iranee		within Agency	3. Deceased			
5. Former Employee	5. Reinstate	ement	4. Dismissal			
Last Year Worked	From		5. Probationar			
Bargaining Unit	Cart vice Street and the Cart	in Status	J. Hopatola			
Union Name			6. Reduction i	n Force		
Local No.			7. Job Abolish	ment		
Date Cleared Employment Screening	a. Work ou	t of Classification	8. Disability			
POSITION:	9. Other (S	pecify)	9. Military Lea	va.		
1. New (attach position description)						
2. Reclassification			10. Leave of Ab	sence		
3. Replacement	Solve State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the		11. Suspension			
(Last Held By)			12. Other (Spec	:ify)		
		nC	Evaluation Score			95.5
DATE	不可以是是 <b>自己的</b>	crease	Percent of Last Increase	SASSWORLD TO		
FROM: Title/Classification Step	Hourly Rate	Annual Salary	Department/Division/Estate	Ext.	COST CENT	TER
SERGEANT	\$23.0903	\$48,028	POLICE		201	
TO: Title/Classification Step	Hourly Rate	Annual Salary	Department/Division/Estate	Ext.	COST CENT	TER
SERGEANT	\$24.0144	\$49,950	POLICE		201	
NOTES: (1) Attach Copy of Termination of REMARKS: CONTRACTUAL INCREA	r Resignation	(2) Justify (if	requesting positions in exc	ess of ap	proved budge	et)
PREQUESTED BY:	/2/12/ DATE	BUDGET MANAGER			DATE	_
July Joken,	14 12 16 12 16 1	2 nex	V X			
APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICER	7	1	DATE	
	MA / /N) EXECUTIVE O	DIRECTOR	DATE 12/19	1.	ć	
1 — Employee/white 2 — MIS/blue			5 Budgets / pink 6			

### Cuyahoga Metropolitan Housing Authority DUEST FOR PERSONNEL TRANSACTIC

NAME:	Last	First	Middle	soc	IAL SECURITY NO.	Mon	DATE OF BIRT	ΓΗ Year	A Black - White - Hispani	SE
	STYLES,	PAUL	e garini ah	activity.	(B)	7	5	6:	- Asian - Other	
ADDRESS	: Street		City	State		Zip	PH	ONE NO.		RES
DEP	ARTMENT/DIVISION/ESTAT	Eroca sou	COST CENTER	Transfer and the	REQUEST DATE	NO VENEZULE E	SANTON AND RE	FECTIVE	DATE	
	POLICE		210	Month 5	Day 10	Year	Month	Day		Year
APPOINT	Affacts does bearing the tells		CHANGE:		10	02 SEPAR	I ATION:	1		02
	. Full Time		1. Prom	otion		<b>计系统器线数</b>	Resignation.	Reason		
2	Part Time								LANE BY	
3	. Temporary, Ends		2. Demo							
	. Trainee		3. Detai			-	2. Retirement			
	to		4. Trans	fer within Agency			3. Deceased			
5	. Former Employee		5. Reins	statement			4. Dismissal			
	Last Year Worked		From				5. Probationar	v		
	Bargaining Unit		6. Chan	ge in Status						
	Union Name			y Increase CO	NTRACTUAL	gel Male	6. Reduction i	n Force		
	Local No.		8. Work	out of Classificati		-	7. Job Abolish	ment		
	Date Cleared Employment Screening		d. Work				8. Disability			
POSITION:		To the file of the	9. Other	(Specify)		1	9. Military Lea	VA		
1	New (attach position descr	iption)								
2	Reclassification						10. Leave of Ab	sence		
	Replacement						11. Suspension			
	(Last Held By)						12. Other (Spec	cify)		
		Castrica	Date of Last Evalu	ation		Evetuetic				
	DATE						on Score of Last Increase		FOR BUILDING	
FROM: Tit	tle / Classification	Step	Hourly Rate	Of the Section of the Section of	entitle 200 og semborg tilb i men	Personal Properties	Division/Estate	Ext.	COST CE	NTE
SERG	BEANT								1000000	10
	le / Classification	Step	Hourly Rate	\$44 Annual	Salary		Division/Estate	Ext.	COST CE	
SERGE	EANT		141:17	\$48	,028	POLIC	E			10
NOTES:	(1) Attach Copy of Term	ination or Resi	gnation		(2) Justify (if	requesting p	ositions in exce	ess of ap	proved but	dget)
REMARK	S:									
						100				
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REQUEST	TED BY	enfat em	3/10	702	150 JA	1.10			5/11/	10
	TEO DI.	/	DAT	E BUUC	GET MANAGER				DATE	
- da	eller. and	1. VA. 1. 6.4	il 5-10	447						
APPROVE	D: (DEPT/DIV/ESTATE)	1 . 5-7-7-6	DAT		ONNEL OFFICER				DATE	
		1 Mari	1/1/2		1 / 1.4	6 - 5		7		
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1 — Emp	loyee / white 2 — MIS	S/blue 3 -	- Payroll / green	4 — Personal	File / canary 5	- Budgets	pink 6 —	Departm	ent <i>i golden</i>	rod

### Cuyal a Metropolitan Housing Aut rity REQUEST FOR PERSONAL TRANSACTION

NAME: Last First  STYLES PAUL	Middle	SOCIAL SEC	URITY NO.	DATE OF BIRT Month Day 07 05 19	H Year	- Black - White - Hispanic - Aslan - Other
	* City	State	Zip	a selection and a selection of the selection	ONE NO.	RESIDEN
				Complete Complete Complete		Y/N
	OST CENTER	Month Di	ay Ye	ar Month	Day	Year
	210	02 02	1999	01	01,0	1999
APPOINTMENT:	CHANGE:			SEPARATION:	1	5 (1)
1. Full Time	1. Promo	tion		1. Resignation.	Reason	
2. Part Time	2. Demoti	ion				
3. Temporary, Ends	3. Detail			2. Retirement		
4. Trainee	4. Transfe	er within Agency				
to	\ \			3. Deceased		
5. Former Employee	5. Reinstr			4. Dismissal		
Last Year Worked				5. Probationar	y	
Bargaining Unit	6. Chang	e in Status		6. Reduction i	n Force	
Union Name	7. Salary	Increase		7. Job Abolish	ment	
Local No.	8. Work o	out of Classification				
Date Cleared Employment Screening	XXX 9. Other	(Specify) Contract	ual	8. Disability	257	
POSITION:		Increase		9. Military Lea	ve Ca	
1. New (attach position des <u>cription)</u>				10. Leave of Āb		
2. Reclassification						
3. Replacement				11. Suspension		
(Last Held By)		_		12. Other (Spec	ify)	
	Date of Last Evalua	ation		Evaluation Score		
DATE	NOTES TO SECURITION	Increase -	SETTINGS FOR THE	Percent of Last Increase		
FROM: Title/Classification Step	Hourly Rate	Annual Salary	Dep	artment/Division/Estate	Ext.	COST CENTER
Sergeaut	19.7379	41,054.83	Po:	lice Div	3700	210
TO: Title/Classification Step Sergeant	Hourly Rate 20-5274	Annual Salary 42,695.99	Po:	artment/Division/Estate	Ext. 3700	COST-CÉNTER 210
NOTES: (1) Attach Copy of Termination or Resig	gnation	(2)	Justily (if requ	esting positions in exc	ess of ap	proved budget)
REMARKS:						
A CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR			x (7 - 11) -		ik sile	717 T 258
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May July	~~ X- X	-99		7		24179
REQUESTED BY:	DAT	E BUDGET MA	ANAGER			DATE
	1					
milly Miller, the	1 3 13	97				
APPROVED: (DEPT/DIV/ESTATE)	DAŢ	E PERSONNE	L OFFICER	1 11/1		DATE
	1.1	141-141	- V			
	EXECUTIVE	DIRECTOR		DATE		
1 — Employee / white 2 — MIS / blue 3 -	- Payroll <i>l gr</i> een	4 — Personal File / ca	anary /5 — 1		Departme	ent <i>l goldenrod</i>

### Cuya ja Metropolitan Housing Aur prity

**HEQUEST FOR PERSONNEL TRANSACTION** 

NAME:	Last First	Middle	SOCIAL SECURITY NO	Month	OF BIRTH Day Year	Black - White - Hispanic - Asian - Other			
ADDRESS:	Street	City	State	Zip	PHONE NO.				
DEPA	RTMENT/DIVISION/ESTATE	659-210	Month Day Day 08 9	Year Month	EFFECTIVE I Day				
APPOINTM	IENT:	CHANGE:		SEPARATION:					
1.	Full Time	XXX 1. Promotion	1	1. Res	ignation. Reason	Exit 55			
2.	Part Time	2. Demotion							
3.	Temporary, Ends					Mark Control			
4	Trainee	3. Detail		2. Retirement					
100	to	4. Transfer w	ithin Agency	3. Deceased					
5	Former Employee	5. Reinstate	ment	4. Dis	miceal				
	Last Year Worked	From							
	Bargaining Unit		Catal	5. Pri	obationary				
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	D: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICE	ν ir	<u> </u>	8 Mbs. DATE			

### Cuy oga Metropolitan Housing & hority REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First	Middle	SOCIAL SECURITY NO.	. DATE OF Month Da		Black - White - Hispanic - Asian		
ADDRESS: Street	City	State	Zip OF	PHONE NO.	- Asian - Other		
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DEPARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATE		EFFECTIVE I	DATE		
Police Niv.	750-210	Month 1.2 22 37	Year Month	Day	Year		
APPOINTMENT:	CHANGE:	A STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STA	SEPARATION:				
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2. Part Time	2. Demotion						
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to	4. Transfer w	ithin Agency	3. Decea	sed			
5. Former Employee	5. Reinstate	ment	4. Dismis	sal			
Last Year Worked	From						
Bargaining Unit		Status	5. Probat	ionary			
Union Name		시점 등일에 빠뜨겁니다면서 사이를 내려가면 있는 걸리면 없는데 때	6. Reduc	tion in Force			
		10030	7. Job At	olishment			
Local No Date Cleared	8. Work out	of Classification	8. Disabil	itu			
Employment Screening POSITION:	9. Other (Sp	ecify)	0.000				
			9. Military	Leave			
New (attach position description)			10. Leave	of Absence			
2. Reclassification			11 8				
3. Replacement			11. Suspen				
(Last Held By)			12. Other (	Specify)	Term officials		
	— Date of Last Evaluation		Evaluation Score				
DATE	Date of Last Wage Inc	rease	Percent of Last Increase				
FROM: Title/Classification Step	Hourly Rate	Annual Salary	Department/Division/Est	ate Ext.	COST CENTER		
PATROLMAN 2	\$17.69	\$26.826.00	Police Div	3700	10		
TO: Title/Classification Step	Hourly Rate	Annual Salary	Department/Division/Est		COST CENTER		
PROFEDURAL 3	\$14.62	\$30,828.00	Folice Div.	3/100	10		
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REQUESTED BY:	DATE	1	11/13		//		
REQUESTED BY:  APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICER	Jan Jag		- DAGE		
		PERSONNEL OFFICER	DATE		DAYE .		

### Cui hoga Metropolitan Housing inhority REQUEST FOR PERSONNEL TRANSACTION

NAME: Last Fir	st Middle	SOCIAL SECURITY	/ NO. Monti	DATE OF BIRTH	Year	- Black - White - Hispank - Asian - Other	SE M/
ADDRESS: Street	City	State	Zip	PHO	NE NO.	100	RESIG
			March 1981 Library 1987 - Addison 198	. note that years			Y/
DEPARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATI	E Year	EFF. Month	ECTIVE Day		Year
Police Div.	853-210	11 14	96	10	22	96	
APPOINTMENT:	CHANGE:		SEPARA	TION:			
1. Full Time	1. Proi	notion		<ol> <li>Resignation. I</li> </ol>	Reason _		4574
2. Part Time	2. Dem	otion					
3. Temporary, Ends	3. Deta	ll de la company		2. Retirement			
4. Trainee	4. Tran	sfer within Agency					
to				3. Deceased			
5. Former Employee		statement		4. Dismissal			
Last Year Worked	Fron	n <u>Tamaka (n. 1864) - Esta Maria (n. 1864)</u> Santing de Casa (n. 1864)		5. Probationary			
Bargaining Unit	6. Cha	nge in Status		C. Daduatian in			
Union Name	7. Sala	ry Increase		6. Reduction in	Force		
Local No.	8 Worl	cout of Classification		7. Job Abolishm	nent		
Date Cleared Employment Screening	<b>建筑的设计 自然地位的 克克</b>		an I avener t	8. Disability			
POSITION:	<u> </u>	or (Specify) Outside En		9. Military Leave			
1. New (attach position description)				o. Military Loan			
2. Reclassification				O. Leave of Abs	ence		
			<u> </u>	1. Suspension			
3. Replacement			1	2. Other (Specif	۷)		
(Last Held By)		And Die Frankliche Standbild Pala 1977 in 1986 des 66 februar D		Erift Marin andri Nother Services			BSS 60 Lebium
		uation	HERE'S STATES	Score			ANGEL ANGEL
DATE		e Increase	Percent o	Last Increase _	al Parket and the	A. District	COSTON
FROM: Title/Classification Ste	Hourly Rate	Annual Salary	Department/D	Pivision / Estate	Ext.	COST CE	NTEF
TO: Title/Classification Step	Hourly Rate	Annual Salary	Department/D	ivision/Estate	Ext.	COST CE	NTEF
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APPROVEĎ: (DEPT/IDIV/ESTÁTE)	/ DA	TÉ PERSONNEL OFF	ICER	٥		DATÉ	
	EXECUTIV	'E DIRECTOR	D/	ATE			
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#### Cuyah( 1 Metropolitan Housing Authority

REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First STYLES P	Middle AUL A.	SOCIAL SECUI	RITY NO.	DATE OF BIR Month Day 07 05	TH Year 63	Black - White - Hispanic - Asian
ADDRESS: Street	. City	State	Zip	Time a southern results to	IONE NO.	- Other
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DEPARTMENT / DIVISION / ESTATE	COST CENTER	REQUEST I	DATE Year	Month EF	FECTIVE I	OATE Year
Police Div.	853-210	11 04	96	11	04	96
APPOINTMENT:	CHANGE:		SE	PARATION:	1007	TENONE.
1. Full Time	1. Promotio	n _	_	1. Resignation	. Reason _	
2. Part Time	2. Demotion					
3. Temporary, Ends	3. Detail			To the territory or		
4. Trainee	4. Transfer v	uithin Azanau		2. Retirement		
to	Account to the second		-	3. Deceased		
5. Former Employee	X 5. Reinstate	ment		4. Dismissal		
Last Year Worked	From			5. Probationa	ry	
Bargaining Unit	6. Change i	in Status				
Union Name	7. Safary In-	crease	-	6. Reduction	in Force	
Local No.	0.146-4	of Classification	-	7. Job Abolish	nment	
Date Cleared Employment Screening		of Classification	_	8. Disability		
POSITION:	9. Other (Sp	pecify)		9. Military Lea		Man (
1. New (attach position description)				5. Williary Lea	IVO	
			-	10. Leave of At	osence	
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FROM: Title/Classification Step	Hourly Rate			nent/Division/Estate	Ext.	COST CENTER
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TO: Title/Classification Step PATROLMAN	Hourly Rate	Annual Salary		nent/Division/Estate	Ext.	COST CENTER
	Access of 1992 Tendential and the particle	\$23,088	Police	of star of the star of the	3700	210
NOTES: (1) Attach Copy of Termination REMARKS:				ing positions in exc		proved budget)
	D TO THE POSITI		CHECK TO BE AND AND	Sanction of Action (Sales Server Sanction of Sales Servers		
FUNDING	SOURCE: COMP-MO	D GRANT 853	area most, so reclavious de mine	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	Chronical Tables	
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REQUESTED BY:	DATE	BUDGET MAN	AGER	1_ )		DATE
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APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL C	OFFICER			DATE
		1				
	EXECUTIVE D	IRECTOR	100 6 20 50	DATE		
1 — Employee / white 2 — MIS/ blue	3 — Payroll/green 4					ent <i>l goldegrad</i>

#### Cuyaho Metropolitan Housing Auth ity

REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First Styles Paul	Middle	SOCIAL SECURITY	NO. Month 7	DATE OF BIRTI Day 5	H Year 63	- Black - White - Hispanic - Asian - Other
ADDRESS: Street	City	State	Zip	PHO	NE NO.	
DEPARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATE Month Day	Year	Month	ECTIVE D	ATE
Police & Security	210	3 25	96	3	29	9
APPOINTMENT:	CHANGE:		SEPARAT			
1. Full Time 2. Part Time 3. Temporary, Ends 4. Trainee 5. Former Employee Last Year Worked Bargaining Unit Union Name Local No. Date Cleared Employment Screening POSITION: 1. New (attach position description) 2. Reclassification 3. Replacement	3. Detail 4. Transfer 5. Reinstail From 6. Change 7. Salary II 8. Work ou 9. Other (S	within Agency ternent in Status	XX (	2. Retirement 3. Deceased 4. Dismissal 5. Probationary 6. Reduction in 7. Job Abolishm 7. Job Abolishm 9. Military Leave 10. Leave of Abs 11. Suspension 12. Other (Specif	金章 Force nent ence	
(Last Held By)	CONTRACTOR STREET	on				
DATE			CONTRACTOR STATE OF THE STATE OF	Score		
FROM: Title/Classification Step	Hourly Rate	Annual Salary	Department/Di	Last Increase _	And Personal Property	COST CE
Police Officer	11.10		Police & Se	CONTROL OF STREET STREET	Ext.	210
TO: Title/Classification Step	Hourly Rate	Annual Salary	Department/Div	vision/Estate	Ext.	COST CEI
NOTES: (1) Attach Copy of Termination of REMARKS: ** Lay-Off due to	or Resignation lack of funding.	(2) Justify	y (if requesting pos	sitions in excess	ss of app	DATE
TEQUESTED BY:	DATE	Junio	1. (km)	Edean		3/27
APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFI	CER .	escon !	,	3/27 DATE

#### **Cuyahoga Metropolitan Housing Authority**

#### REQUEST FOR PERSONNEL TRANSACTION



NAME:	Last First	Middle	SOCIAL SECURITY NO.	ASS 2.6 (a)	ay Year	- Asian
ADDRESS:	Street	City	State	Zip	PHONE NO.	
		1110000				
DEPAR	POLICE DIV	<b>COST CENTER</b> 848-210	Month 11 28 9	4 Year Month	EFFECTIVE Day	DATE Year
APPOINTM	ENT:	CHANGE:		SEPARATION:		
1.	Full Time	XXX 1. Promotic	on	1. Resign	ation. Reason	
2.	Part Time	2. Demotion	n		II_IS _5_7	
3.	Temporary, Ends	3. Detail		O. Bull		
4.	Trainee		untable America	2. Retire	ment	
	to		within Agency	3. Dece	ased	
5.	Former Employee	5. Reinstate	ement	4. Dismi	ssal	
	Last Year Worked	From		5. Proba	tionary	- 02 EW
	Bargaining Unit '	6. Change	in Status			
	Union Name	XXX_ 7. Salary In	ncrease	1 3/50/5	ction in Force	Sc 01 1 3
	Local No.	8. Work ou	A of Ota-16-At-		bolishment	(2)
	Date Cleared Employment Screening	O. WORK OU	8.4	8. Doll	20 1994	[-]
POSITION:	Employment octooning	9. Other (S	pecify)	Of a wall	50 Tags	E
1.	New (attach position description)			10. Leave	1994 y Leave	A
2.	Reclassification					
3.	Replacement	× ×		11. Suspe	nsion	=
	(Last Held By)		a 2	12. Other	(Specify)	
	19	Date of Last Evaluation	on	Evaluation Score	ac_ we	1 - N
	DATE	Date of Last Wage In	crease	Percent of Last Inci	ease	
FROM: Title	/Classification Step	Hourly Rate	Annual Salary	Department/Division/E	3/3/6	COST CENTE
	ARMED SPECIAL O		\$18,844.80	Police Div	. 3700	210
TO: Title	/Classification Step PATROLMAN ENTRY	Hourly Rate \$10.19	Annual Salary \$21,195.00	Department/Division/En		COST CENTE
NOTES:	(1) Attach Copy of Termination o	r Resignation	(2) Justify (if	requesting positions i	n excess of a	pproved budget
HEWAINS.		CCESSFULLY COM	PLETED ALL PHASE	S TO BECOME	A POLT	CF.
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REQUESTE	ED BY	11/2019	in the same	yes.		21194
HEQUESTE	2.4/0/	DATE	BUDGET MANAGER			DATE
/h	The Melisar	Ohiel 1219	ed & e Hall	- Rico		10/08/91
APPROVE	D: (DEPTYDIV/ESTATE)	DATE	PERSONNEL OFFICEI	R Carlo State Control		DATE
		EXECUTIVE I	DIRECTOR	DATE		

5 - Budgets / pink

6 — Department / goldenrod

#### Syanoga Metropolitan Housing Authority

#### REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First	Middle	SOCIAL SECURITY NO	SAMPLE SUPERIOR	DATE OF BIRT Ionth Day	H Year	ABlack - White - Hispanic - Asian - Other
ADDRESS: Street	City	State	Zip	PHO	ONE NO.	RESID Y/I
DEPARTMENT/DIVISION/ESTATE	COST CENTER	Month REQUEST DATE Day	Year	EFF Month	ECTIVE D	THE RESERVE THE PROPERTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE
APPOINTMENT:		within Agency ment n Status crease NNNUAL		ARATION:  1. Resignation.  2. Retirement  3. Deceased  4. Dismissal  5. Probationary  6. Reduction in  7. Job Abolish  8. Disability  9. Military Leav  10. Leave of About  11. Suspension  12. Other (Speci	/ n Force ment /e sence	
DATEStep	Date of Last Evaluation	nrease	Perce	ation Score  nt of Last Increase _ nt/Division/Estate		
TO: Title/Classification Step		Annual Salary	Departmen	s nt/Division/Estate	Ext.	COST CENTER
NOTES: (1) Attach Copy of Termination of REMARKS:	r Resignation		PRINTER AND ADDRESS OF	g positions in exce	ess of app	proved budget)
REQUESTED BY:	DATE	BUDGET MANAGER		4-7		DATE
APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICE	R.			///2/19/ DATE
	EXECUTIVE D	IRECTOR		DATE		

4 — Personal File / canary

5 — Budgets / pink

6 — Department / goldenrod

1 - Employee / white

2 - MIS/blue

3 - Payroll/green

## The heave C shoga Metropolitan Housing Aut PERSONNEL TRANSACTION

ity 381-7816 801-7714

NAME: Last First	14.14.	L accus	(Maria and		081-2			
//	PAUL	SOCIAL SEC	URITY NO.	Month	,	Year	X Black White U Hispanic	SEX M/F
ADDRESS: Street		City		J 7 State	5	63 Zip	☐ Asian ☐ other	Resident
								Y/NX
DEPARTMENT/DIVISION/ESTATE	COST CENTER	Month	REQUEST DATE Day	Vee	EFFEC	TIVE DATE		
Police Div.	844-210	1	11	93	Month	Day	<	Year
APPOINTMENT:	CHANGE:				SEPARATION:	\_		72
X 1 Full Time	1	Promotion			1 Resignation,	Reason		
2 Part Time	2 D	emotion						
3 Temporary, Ends	3 La	ateral Change				·		
4 Trainee		ansfer within Ag	encv		2 Retirement			
to		om	•		3 Deceased	1	1-	C1 -
5 Former Employee					4 Dismissal	1-	17.	75
Last Year Worked	5 Re	einstatement			5 Probationary	Α.	IJ.' 730	_
BARGAINING UNITYes	Fr Fr	om			_	0	150	)
UNION NAMENOPBA	6 Cr	nange in Status			6 Lay Off			
LOCAL NO.	Fr	om			Job Abolishme	ent		
DATE CLEARED BY POLICE	1/9/93 7 Na	me Change from	n	1	8 Disability			
POSITION:		_			9 Military Leave	to		9.1
X_ 1 New				_	10 Leave of Abser			
2 Reclassification	8 Wd	ork out of Classifi	ication, and			ice		
3 Replacement	da	te		-	11 Suspension			
(Last Held By)	9 0	ther (Specify)		_	12 Other (Specify)	)		
	Date of Last E	valuation		$ \top$	Evaluation Score			
DATE	Date of Last W	age Increase			Percent of Last Increase _			
FROM: Title / Classification St	ep Hourly Rate	A	nnual Salary	De	epartment/Division/Estate	Ext.	COST C	ENTER
TO: Title /Classification Co								
TO: Title/Classification St Non- Comm. Sec. Offi	ep Hourly Rate		nnual Salary	De	epartment/Division/Estate	<i>\$</i> 61-	COST C	- 1
			\$11,648.00		Police Div.	3700	210	
NOTES: (1) Attach Copy of Termination Funding Sou	rce: Comp-Mod Gr		ustify Position		Camustan			
TEIVIANNS:	Toc. comp rica ar	unes 10 1	epiace dari	15011	security.			
	calil was	Cura las		-	L x . r	200		
	897-1408	100 -101	000 - 210	-000	#.A.fl			
ECOMMENDED: YES NO			RECOMMEND	DED: Y	ESNO			
Marie Commission	1/12/	3-7	M	رمرز	2/11		1/10	10
Chief of Personniel	Date	-72	Department/Divi	ision/Estate	, aves		Da	7,
COMMENDED: YES NO			RECOMMEND	DED: Y	ES NO	_		
Budget Manyager	1/12/93	3	0	11 12				
	ROVED:	,	Department/ Divi	sion/Estate	•		Da	ite
	Prince h ()	W.		192				
$\chi$	EXECUTIVE DIRE	CTOR		ate	-			

### Cuyahosa Metropolitan Housing Authore Request For Personnel Transaction

NAME: Last First	Middle	SOCIAL SECURITY NO.	. N	DATE OF BIR	TH Year	¥ Black - White - Hispanic M/F
STILES, FAUL	· ·			07 05		- Aslan - Other
ADDRESS: Street	City	State	Zip	PH	IONE NO.	RESIDE
						Y/N
DEPARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATE	Year	OF REAL PROPERTY AND ADDRESS OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF	FECTIVE C	
Police Div.	853-210	Month O3. Day O5.	1681	Office of	Day	Year
APPOINTMENT:	CHANGE:	SECTION TO SEE	SEP	ARATION:		Harris San San
1. Full Time	1. Promotio	n		1. Resignation	Reason _	
2. Part Time	2. Demotion					
3. Temporary, Ends						
4. Trainee	3. Detail			2. Retirement		
to	4. Transfer	vithin Agency		3. Deceased		
5. Former Employee	5. Reinstate	ment		4 Diamiasal		
Last Year Worked	From			4. Dismissal		
	AND SERVICE SERVICES			5. Probational	ry	
Bargaining UnitUnion Name	SHEET BUILDING THE SHEET SHEET SHEET			6. Reduction	in Force	
		crease from the		7. Job Abolish	ment	
Local No	8. Work out	of Classification				
Employment Screening	9. Other (Sp	ecify)		8. Disability		
POSITION:				9. Military Lea	ive	
1. New (attach position description)						
2. Reclassification				10. Leave of At	sence	
3. Replacement				11. Suspension		
(Last Held By)				12. Other (Spec	cify)	and the second
	Date of Last Evaluatio		Evalua	ation Score		
DATE	Date of Last Wage Inc	rease	Perce	nt of Last Increase		
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REQUESTED BY:	DATE	BUDGET MANAGER		************		DATE
	11		V			
APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICER				DATE
	EXECUTIVE D	RECTOR		DATE		

4 — Personal File / canary

5 — Budgets / pink

6 — Department/goldenrod

1 - Employee / white

2 - MIS/blue

3 — Payroll/green

#### ja Metropolitan Housing Aumority Cuyar

REQUEST FOR PERSONNEL TRANSACTION

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ADDRESS:		City	State	THE RESIDENCE OF THE PROPERTY AND ADDRESS.	HONE NO.		RESID
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DEPA	ARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATE		FFECTIVE D	JATE	Y
	Police Div.	853-210	Month Day	Vone   Manth	Day		Year
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312 00		2. Demotion	on				
3.	Temporary, Ends	3. Detail		2. Retirement	ul		
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	to			3. Deceased			
5.	Former Employee	XXX 5. Reinsta		4. Dismissal			
	Last Year Worked	From _		5. Probation	ary		
	Bargaining Unit	6. Change	in Status				
	Union Name	7. Salary I	ncrease	6. Reduction	in Force		
	Local No.			7. Job Aboli	hment		
	Date Cleared	8. Work or	at of Classification	8. Disability			
POSITION:	Employment Screening	9. Other (	Specify)				
				9. Military Lo	ave		
1.	New (attach position description)			10. Leave of a	Absence		
2.	Reclassification						
3.	Replacement			11. Suspensio			
	(Last Held By)			12. Other (Sp	ecify)	SECTION STO	6 14 Hou
		Date of Last Evaluat	ion	Evaluation Score	15.207	13. W. 15.	
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	PATROLMAN	\$9.38	\$19,510.40	Police Div.	3700	210	
NOTES:	(1) Attach Copy of Termination or	Resignation	Koff and A virtual and most Audi, and discount Andrews	requesting positions in ex	to be a financial and a		dget)
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REQUEST	ED BY:	DATE	BUDGET MANAGER			DATI	E
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du	las Missen	tw/ 7.79-9	C mary	Line Your Street			
APPROVE	D: (DEPP-70IV/ESTATE)	DATE	PERSONNEL OFFICER	( )		DATE	
		EXECUTIVE	DIRECTOR	DATE			
				UNIE	High St.		
1 - Empl	oyee / white 2 - MIS / blue	3 — Payroll / green	4 — Personal File / canary 5	- Buddets/pink 6 -	AND THE PROPERTY.	and I malelan	annel

4 - Personal File / canary

5 - Budgets / pink

6 — Department/goldenrod

3 — Payroll/green

## TREQUEST FOR PERSONNEL TRANSACTIO

NAME:	Last	First	Mic	idle	SOCIAL	SECURITY NO.	Mc	DATE OF BIR	Mary L. Comp. N. A. A. A. Santon	Black - White	SEX
Styl	les	Paul		١.		PTRACES PRODUCE	🤊	onth Day 5	63	- Hispanio - Asian - Other	(1)//
ADDRESS:	Street		City		State		Zip	PI	ONE NO.		RESIDE
1					COMPLETE POLICE TOPON			E.S. 182/8/3093/400			Y/N
DEPA	RTMENT/DIVISIO	ON/ESTATE	COST CE	NAMED OF TAXABLE PARTY OF TAXABLE PARTY.	REQ! Month	UEST DATE Day	Year		FECTIVE C	PRINCIPLE DOTTER DESCRIPTION	
Police	Divisio	n	844-210	3	WORK	23	93	Month 3	15 Day	93	Year
APPOINTM	IENT:		CHAI	IGE:			SEPA	RATION:			
1.	Full Time		122	1. Promotion				_ 1. Resignation	. Reason _		
2.	Part Time			2. Demotion							
3.	Temporary, Ends						M No. 11				
4.	Trainee			3. Detail				_ 2. Retirement			
		to		4. Transfer w	thin Agency			_ 3. Deceased			
5.	Former Employee	9		5. Reinstaten	nent			_ 4. Dismissal			
	Last Year Worker			From			10043				
To the second	MACHINE MERCEN		ACCUMANT RESERVE	_ 6. Change in	Statue			_ 5. Probationa	y		
				7. Salary Inc				_ 6. Reduction	in Force		
				_ r. calary me	Caso			_ 7. Job Abolisi	ment		
	Date Cleared		777	8. Work out o	of Classification	2020200		_ 8. Disability			
PODITION	Employment Scre	eening	XX	_ 9. Other (Spe	Pay I	ncrease	15				
POSITION:								_ 9. Military Lea	IV <del>0</del>		
-	New (attach posi	tion description)					<u> </u>	_ 10. Leave of Al	osence		
2.	Reclassification							_ 11. Suspension			
3.	Replacement										
	(Last Held By)						A PAR LAND	_ 12. Other (Spe	cify)		
			Date of	of Last Evaluation			Evalua	tion Score			
	DATE		Date of	of Last Wage Incr	ease		Percen	t of Last Increase		CHECK!	a board and Al-
FROM: Title	e/Classification	Step	Hou	rly Rate	Annual Sala	ıry	Departmen	t/Division/Estate	Ext.	COST CE	NTER
Non-Co	mm. Sec.	Officer	\$5.6	0 \$1.	L,648	Police	e Divi	sion	3900		
	/Classification	ATE AND RESIDENCE MANY			Annual Sala			t/Division/Estate	Date National	COST CE	NTER
Comm.	Sec. Off	icer	\$7.6	0 \$1!	5,808	Police	e Divi	sion	3700		
NOTES:	(1) Attach Copy	of Termination all qua	or Resignation lificati	ons to l	pe place	(2) Justify (if d in an	requesting armed	positions in exc l status.	ess of app	proved bud	lget)
REQUEST	ED BY: D: (DEPT/DIV/F	CONTE		DATE = 7/23/9	<i>3 _//</i>	MANAGER	<i>f</i> ( )			DATE 3/25	19
ALL DOVE	D. (DEFT/DIV/)	-SIAIE)		DATE	PERSUN	NEL OFFICER				DATE	
			1	EXECUTIVE DI	RECTOR			DATE			
1 — Empl	ovee / white	2 - MIS I hlug	3 — Pauroll	Igreen A	Paragonal File	Joanana E	Dudask	-1-1-1			

## Cuy oga Metropolitan Housing / nority

REQUEST FOR PERSONNEL TRANSACTIO.

Styles Paul A.  Styles Paul A.  Other Stement Cry State 27  Department/lovision/estrate Cost center Report System Cry State 27  Department/lovision/estrate Cost center Report Report Cry State 27  Department/lovision/estrate Cost center Report Report Cry State 27  Department/lovision/estrate Cost center Report Report Cry State 27  APPOINTMENT:  I. Full Time									**						225
ADORESS: Street  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  State  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City  City	NAME:	Las	t First		Middle		·	SOCIAL S	SECURITY NO.		Month			- White	
DEPARTMENT/DIVISION/ESTATE  POLICE DIVISION  844-210  844-210  844-210  CHANGE:  1. Pull Time  2. Part Time  3. Temporary, Ends  4. Tander  1. Full Time  4. Tander within Agency  5. Former Employee  6. Change in Status  1. Last Year Worked  Bergaring Unit  1. New (attach position description)  1. New (attach position description)  2. Readsestication  2. Readsestication  3. Deceased  4. Diarnéssat  5. Probabilionary  6. Change in Status  1. Saley increase  2. Men out of Classification  2. Readsestication  2. Readsestication  3. Deceased  4. Diarnéssat  5. Probabilionary  6. Readsestication  7. Salary increase  1. New (attach position description)  1. New (attach position description)  2. Readsestication  3. Regarement  (Last Held Bh)  Date of Last Scalation  Date of Last Week phoresse  Percent of Last Increase  FROME Title/Classification  Sec. Officer  57. 60  \$11, 648  Police Division  1. Supponion  1. Supponion  Evaluation or last increase  FROME Title/Classification  Sec. Officer  57. 60  \$15, 808  Police Division  1. Supponion in excess of approved budget)  REQUESTED BY:  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE	Styl	.es	Paul		Α.						7	5"	63	- Asian	( Z .
DEPARTMENT/ORVISION/ESTATE  POLICE DIVISION  844-210  3 23  93  155  93 Year  APPOINTMENT  1. Full Time 1. Full Time 2. Part Time 3. Temporary, Ends 3. Detail 4. Trainee 4. Trainee 5. Former Employee 5. Reinstatement From Leaf Vaer Worked Bargaining Unit Union Name Leaf Vaer Worked Employment Screening Clear Ma. Date Cleared Employment Screening Other (Specify)  1. New (attach position description) 2. Reclassification 3. Replacement (Leaf Hold Br) Date of Last Wage horease  PROM. Tiles Classification To: Tiles/Cleasification Sec. Officer St. Go. St.), 648  Police Division  7. Job Abolishment 1. Supportsion 1. New (attach position description) Date of Last Wage horease Process To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/Cleasification To: Tiles/C	ADDRESS:	Street			City		Ē.	State	401	Zip		P	HONE NO.		
POLICE DIVISION  844-210  3															''''
POLICE DIVISION 844-210 3 23 93 3 15 93  APPOUNTMENT:  CHANGE:  1. Full Time  2. Part Time  3. Temporary, Ends  4. Trainee  4. Trainee  5. Former Employee  Last War Worked  Bargaining Unit Union Name  Local No. Date Cleared Employment Screening  Employment Screening  1. New (attach position description)  2. Reclassification  3. Replacement  (Last Held Br)  Date of Last Evaluation.  Date of Last Evaluation.  Date of Last Evaluation.  Date of Last Vage Increase  PROME Title/Classification  TO: Title/Classification  Step  Hourly Rate  Hourly Rate  Annual Salary  Department/ Division/Estate  SED  Department/ Division/Estate  SED  COST CENTER  3/23/93  APPROVED: (DEPT/DIV/ESTATE)  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  DATE  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  DATE  DATE  BUDGET MANAGER  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE	DEPAR	TMENT/DIVI	ISION/ESTATE	C	OST CENTER		Month	REQU		Vo	.				· ·
APPOINTMENT  1. Full Time  2. Part Time  3. Temporary, Ends  4. Trainee  5. Former Employee  1. Last Wear Worked  Barguining Unit  Local No.  Date Classed  Change in Status  7. Salary Increase  1. New (attach position description)  2. Redaselfication  XX 9. Other (Specify)  Date of Last Evaluation.  Date of Last Evaluation.  Date of Last Evaluation.  Date of Last Evaluation.  Date of Last Evaluation.  Date of Last Evaluation.  Sec. Officer  St. 60 \$11,648  Police Division  Sep  Non-Comm. Sec. Officer  St. 60 \$15,808  Police Division  Sep  Norte: (3) Alach Copy of Termination or Resignation  REMARKS: Has met all qualifications to be placed in an armed status.  3 [24,44]  APPROVED: (DEPT/DIV/ESTATE)  DATE  DATE  BUDGET MANAGER  1. Resignation.  1. Resignation.  1. Resignation.  1. Resignation.  2. Restrement  4. Dismissal  2. Restrement  4. Dismissal  2. Restrement  4. Dismissal  2. Restrement  4. Dismissal  5. Probationary  8. Work out of Classification  XX 9. Other (Specify)  9. Other (Specify)  10. Leave of Absence  11. Leave of Absence  11. Leave of Absence  12. Other (Specify)  12. Other (Specify)  13. Leave of Absence  14. Dismissal  15. Probationary  16. Change in Status  17. Job Aboldanment  18. Work out of Classification  XX 9. Other (Specify)  9. Milliary Leave  10. Leave of Absence  11. Leave of Absence  11. Leave of Absence  11. Leave of Absence  12. Other (Specify)  12. Other (Specify)  13. Leave of Absence  14. Dismissal  15. Redasedd  16. Change in Status  17. Job Aboldanment  18. Work out of Classification  XX 9. Other (Specify)  19. Leave of Absence  10. Leave of Absence  11. Leave of Absence  11. Leave of Absence  11. Leave of Absence  12. Other (Specify)  13. Leave of Absence  14. Dismissal  15. Leave of Absence  16. Change in Status  17. Job Aboldanment  18. Work out of Classification  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of Absence  19. Leave of	Police	Divis	ion	844-	-210				23		a.		15	93	rear
2. Part Time 2. Demotion 3. Temporary, Ends 4. Transfer Within Agency 5. Former Empkyee 1. Last Year Worked 2. Bargaining Unit 3. Detail 4. Transfer within Agency 5. Painstatement 6. Change in Status 1. Local No. 1. Date Cleared 1. Date Cleared 1. New (attach position description) 2. Reclassification 3. Replacement 1. New (attach position description) 4. Date of Last Evaluation 5. Pooling in Status 6. Reduction in Force 7. Job Abolishment 8. Work out of Classification 7. Job Abolishment 8. Disability 8. Other (Spocity) 9. Military Leave 11. Suspension 12. Other (Spocity) 12. Other (Spocity) 13. Leave of Absence 11. Suspension 12. Other (Spocity) 13. Date of Last Wage Increase 14. Suspension 15. Probationary 16. Replacement 17. Job Abolishment 18. Disability 19. Military Leave 19. Military Leave 10. Leave of Absence 11. Suspension 10. Leave of Absence 11. Suspension 12. Other (Spocity) 12. Other (Spocity) 13. Date of Last Wage Increase 14. Date of Last Wage Increase 15. Probationary 16. Replacement 17. Job Abolishment 18. Disability 19. Military Leave 19. Military Leave 10. Leave of Absence 11. Suspension 12. Other (Spocity) 12. Other (Spocity) 13. Date of Last Evaluation 14. Date of Last Evaluation 15. Probationary 16. Replacement 17. Job Abolishment 18. Disability 19. Military Leave 19. Military Leave 19. Military Leave 10. Leave of Absence 11. Suspension 12. Other (Spocity) 12. Other (Spocity) 13. Date of Last Residention 15. Probationary 16. Reduction in Force 17. Job Abolishment 18. Disability 19. Military Leave 19. Military Leave 19. Military Leave 19. Military Leave 10. Leave of Absence 11. Suspension 12. Other (Spocity) 12. Other (Spocity) 13. Date Description of Call Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave Leave					CHANGE:		- 83		n	Τ	SEPARA	TION:			•
2. Petitorion  4. Trainine  4. Trainine  5. Former Employee  5. Former Employee  5. Rainstatement  From  6. Change in Status  1. Last Year Worked  1. Date Cleared  1. Date Cleared  1. Date Cleared  1. Date Cleared  2. Reduction in Force  3. Decased  5. Probationary  6. Reduction in Force  7. Job Abolishment  8. Work out of Classification  10. Leave of Absence  11. Suspension  12. Other (Specify)  13. Decased  5. Probationary  6. Reduction in Force  7. Job Abolishment  10. Leave of Absence  11. Suspension  12. Other (Specify)  13. Decased  6. Reduction in Force  7. Job Abolishment  14. District Classification  15. Probations  16. Reduction in Force  17. Job Abolishment  18. District Classification  19. Leave of Absence  11. Suspension  12. Other (Specify)  12. Other (Specify)  12. Other (Specify)  13. Decased  14. District Classification  15. Probationary  16. Reduction in Force  17. Job Abolishment  18. District Classification  19. Leave of Absence  11. Suspension  12. Other (Specify)  12. Other (Specify)  12. Other (Specify)  13. Department/Division Scale  14. District Classification  15. Probationary  16. Reduction in Force  17. Job Abolishment  19. Military Leave  10. Leave of Absence  11. Suspension  12. Other (Specify)  12. Other (Specify)  12. Other (Specify)  13. Department/Division Scale  14. District Classification  15. Probationary  16. Reduction in Force  17. Job Abolishment  18. District Classification  19. Leave of Absence  11. Suspension  12. Other (Specify)  12. Other (Specify)  12. Other (Specify)  13. Department/Division Scale  14. District Classification  15. Probationary  16. Reduction in Force  16. Reduction in Force  17. Job Abolishment  18. Department/Division Scale  19. Leave of Absence  19. Leave of Absence  11. Suspension  12. Other (Specify)  12. Other (Specify)  13. Department/Division Scale  14. District Classification  19. Leave of Absence  11. Suspension  10. Leave of Absence  11. Suspension  12. Other (Specify)  13. Department/Division Scale  16. Reduction in Force  19. Department	1.	Full Time			1.	Promo	otion					1. Resignatio	n. Reason _	=	
	2.	Part Time			2	Demoi	tion								
4. Trainee  4. Trainee  5. Former Employee  5. Reinstatement  From  6. Change in Status  7. Salary Increase  7. Salary Increase  7. Job Abolishment  8. Work out of Classification  Date Cleared Employment Screening  POSITION:  1. New (stitach position description)  2. Reclassification  3. Replacement  (Last Held By)  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Position  Sec. Officer  Stop  Hourly Rate  Annual Salary  Department/Division/Estatis  3/100  TO: Title/Classification  Stop  NOTICE:  (1) Attach Copy of Termination or Resignation  REMARKS: Has met all qualifications to be placed in an armed status.  A Trainster within Agency  3. Deceased  4. Dismissal  4. Dismissal  5. Probationary  6. Reduction in Force  6. Reduction in Force  7. Job Abolishment  8. Disability  Pay Increase  7. Job Abolishment  8. Disability  9. Military Leave  10. Leave of Absence  11. Suspension  12. Other (Specity)  13. Cost CENTER  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  Sec. Officer  7. Solo \$11, 648  Police Division  3/100  3/100  Sec. Officer  9. OST CENTER  COMM. Sec. Officer  9. Annual Salary  Department/Division/Estatis  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100  3/100	3.	Temporary, Er	nds												
S. Former Employee	4.	Trainee										2. Retireme	nt		
Last Yer Worked			to		4.	Transfe	er within Ag	gency				3. Deceased	4		
Last Year Worked Bargaining Unit	5.	Former Emplo	byee		5.	Reinst	atement				(*	4. Dismissal	l		
Bargaining Unit		Last Year Wor	rked	100		From				-		5. Probation	ary		
Union Name					6.	Chang	je in Status	S							
Local No.   Date Cleared Employment Screening   XX   Superison   Pay Increase   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superison   Superiso					7.	Salary	Increase					6. Reduction	n in Force		
Date Cleared Employment Screening XX 9. Other (Specify) Pay Increase		Locat No.			_	344-4		-18141				7. Job Aboli	shment		
1. New (attach position description)  2. Reclassification  3. Replacement (Last Held By)  Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Date of Last Evaluation Department/Division/Estate Society  Department/Division/Estate Date Division  3670  COST CENTER Annual Salary Police Division Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Department/Division/Estate Depart		Date Cleared			<del> s</del> .	AAOLK 4	out of Class	Pay I	ncrease	د		8. Disability			
1. New (attach position description)  2. Reclassification  3. Replacement (Last Held By)  Date of Last Evaluation  DATE  Date of Last Evaluation  Date of Last Evaluation  Date of Last Wage Increase  Percent of Last Increase  FROM: Title / Classification  Non-Comm. Sec. Officer  \$5.60 \$11,648 Police Division  361  To: Title / Classification  Step Hourly Rate Annual Salary  Comm. Sec. Officer  \$7.60 \$15,808 Police Division  3700  NOTES: (1) Attach Copy of Termination or Resignation  REMARKS: Has met all qualifications to be placed  DATE BUDGET MANAGER  DATE  BUDGET MANAGER  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE		Employment	screening		9.	Other	(Specify)_	36		•		9 Military I	nava.		
2. Reclassification  3. Replacement (Last Held By)  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Date of Last Evaluation  Department/Division/Estate  3610  TO: Title/Classification  Step Hourly Rate Annual Salary  Comm. Sec. Officer \$7.60 \$15,808 Police Division  NOTES: (1) Attach Copy of Termination or Resignation  REMARKS: Has met all qualifications to be placed in an armed status.  DATE BUDGET MANAGER  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE  DATE		New (attach n	nosition description)									o. William L	5410		į
			131		64						1	IO. Leave of	Absence		
Date of Last Evaluation   Date of Last Evaluation   Date of Last Increase   Date of Last Increase   Date of Last Mage Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase   Percent of Last Increase			оп								1	1. Suspensio	n		
Date of Last Evaluation								14.			1	2. Other (Sp	ecify)		
DATE Date of Last Wage Increase Percent of Last Increase  FROM: Title/Classification Step Hourly Rate \$11,648 Police Division/Estate \$3\frac{1}{9}\frac{1}{0}\text{COST CENTER}\$  Non-Comm. Sec. Officer \$5.60 \$11,648 Police Division \$\frac{3}{9}\frac{1}{0}\text{COST CENTER}\$  To: Title/Classification Step Hourly Rate Annual Salary Police Division/Estate \$7.60 \$15,808 Police Division \$\frac{3}{3}\frac{7}{0}\text{COST CENTER}\$  NOTES: (1) Attach Copy of Termination or Resignation REMARKS: Has met all qualifications to be placed in an armed status.  DATE BUDGET MANAGER DATE  APPROVED: (DEPT/DIV/ESTATE)  DATE DATE  Personnel Officer  DATE  Personnel Officer \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER \$2.10 COST CENTER		(Last Held By	) <u> </u>			<del></del> .				┨─			<del></del> .		
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Comm. Sec. Officer \$7.60 \$15,808 Police Division 3700  NOTES: (1) Attach Copy of Termination or Resignation (2) Justify (if requesting positions in excess of approved budget) Has met all qualifications to be placed in an armed status.  REQUESTED BY: DATE BUDGET MANAGER DATE  APPROVED: (DEPT/DIV/ESTATE)  DATE DATE  PERSONNEL OFFICER  DATE				r										COST CE	NTER
NOTES: (1) Attach Copy of Termination or Resignation REMARKS: Has met all qualifications to be placed in an armed status.  REQUESTED BY:  DATE BUDGET MANAGER  DATE  APPROVED: (DEPT/DIV/ESTATE)  POITCE DIVISION   3700    (2) Justify (if requesting positions in excess of approved budget) in an armed status.  DATE  BUDGET MANAGER  DATE  Jajaya  PERSONNEL OFFICER  DATE													120T-	COST CE	NTER
DATE BUDGET MANAGER  DATE  S/23/93  APPROVED: (DEPT/DIV/ESTATE)  DATE  DATE  DATE  DATE  DATE  DATE  DATE	Comm.	Sec. 0	fficer		\$7.60		\$15,8	808	Polic	e i	)1718	310n	3700		
DATE BUDGET MANAGER  DATE  S/23/93  APPROVED: (DEPT/DIV/ESTATE)  DATE  DATE  DATE  DATE  DATE  DATE  DATE		(1) Attach Co	opy of Termination	or Resig	nation cation	ıs t	o be	place	(2) Justify (if ed in ar	requal	esting por	sitions in ex	cess of app	proved bud	iget)
APPROVED: (DEPT/DIV/ESTATE)  3/23/93  DATE  PERSONNEL OFFICER  3/24/9-	HEMARNS:		, E						To .		=	- x-	· -		
APPROVED: (DEPT/DIV/ESTATE)  3/23/93  DATE  PERSONNEL OFFICER  3/24/9-				- <u>-</u>	<del> </del>	-		<del></del>	.9				-		
APPROVED: (DEPT/DIV/ESTATE)  3/23/93  DATE  PERSONNEL OFFICER  3/24/9-										-	2000				_
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APPROVED: (DEPT/DIV/ESTATE)  3/23/93  DATE  PERSONNEL OFFICER  3/24/9-															
APPROVED: (DEPT/DIV/ESTATE)  3/23/93  DATE  PERSONNEL OFFICER  3/24/9-															
	REQUESTE	D BY:	52	74		DAT	Έ	BUDGET	MANAGER					DATE	<u> </u>
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EXECUTIVE DIRECTOR DATE	APPROVE	): (DEPT/Di	V/ESTATE)		•	DAT	E	PERSON	NEL OFFICE	H	100			DATE	=
EXECUTIVE DIRECTOR DATE															
					EXEC	CUTIVE	DIRECT	OR			D	ATE			

4 — Personal File / canary

5 — Budgets/pink

6 — Department I goldenrod

1 — Employee / white

2 - MIS/blue

3 - Payroll / green



EMPL ID 1784	Request Date 1/13/2015	Effective Date 1/1/2015
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

Last Name	First Name	M,I.	Suffix	Birth Date	Sex	Marital Status	Race	CMHA Resident
Styles	Paul			07/05/1963	М	Single	Black	Υ

Mailing Address 1	Address 2	City	State	Zip Code	
. T					

	Action	Action		
Action	Reason	Description	Cost Number	Cost Number Description
PAY	ATB	Across the Board	100446001000000125000	POLICE STAFF ONLY 1/11TH

FROM:	Job	Job Code	Rate of	of Pay	Department	Dept ID#	
Code	Code	Description	Hrly	Salary	Department	Dept ID #	
1/1/2014	17033	Police Sergeant - Nopba	33.4	69472	Police Administration	210000	

То:	Job	Job Code	Rate	of Pay	Donortmont	Doot ID #
Code	Description	Hrly	Salary	Department	Dept ID #	
1/1/2015	17033	Police Sergeant - Nopba	34.068	70861.44	Police Administration	210000

COMMENTS:

Contractual Increase effective January 1, 2015

Requested by: Date 205

Director of Human Resources:

Date

Department Director:

Date

Budgetary Approval:

Date

Chief Executive Officer:

## PL .SONNEL TRANSACTION DRM



EMPL ID	Request Date	Effective Date
1784	1/8/2015	1/6/2015
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Marital Status	Race	CMHA Resident
Styles	Paul			07/05/1963	М	Single	Black	Υ

Mailing Address 1	Address 2	City	State	Zip Code

Ţ	Action	Action		
Action	Reason	Description	Cost Number	Cost Number Description
		Secondary Employment	100446001000000125000	POLICE STAFF ONLY 1/11TH

EE	ROM:	Job	Job Code	Rate	of Pay	Deportment	Dont ID #
	NOIVI.	Code	Description	Hrly	Salary	Department	Dept ID #

To:	Job	Job Code		of Pay	Donortmont	Dept ID #
10.	Code	Description	Hrly	Salary	Department	Dept ID #

COMMENTS:

Please find attached, request for Secondary Employment with American Communications Network. eff. 1/2/15.

Requested By: Date 14 7015

Department Director: Date

Director of Human Resources:

Budgetary Approval:

Date

Chief Executive Officer:



EMPL ID 1784	Request Date 12/14/2015	Effective Date 12/10/2015
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Marital Status	Race	CMHA Resident
Styles	Paul	<u> </u>		07/05/1963	М	Single	Black	Υ

Mailing Address 1	Address 2	City	State	Zip Code	

	Action	Action		
Action	Reason	Description	Cost Number	Cost Number Description
		Secondary		
		Employment	100446001000000125000	POLICE STAFF ONLY 1/11TH

FROM:	ROM: Job Code Code Description	Rate	of Pay	Donortmont	Doot ID #	
TICOWI.	1	Description	Hrly	Salary	Department	Dept ID #
	32					

To:	Job	Job Code	Rate o	of Pay	Donostmont	Dant 10.4
10.	Code	Description	Hrly	Salary	Department	Dept ID #
1/1/2015	17033	Police Sergeant - Nopba	34.068	70861.44	Police Administration	210000

#### COMMENTS:

Requested

Please find attached, request for secondary employment with American Communications Network eff. 12/10/15

Department Director:

Date

Director of Human Resources:

Budgetary Approval:

ef Executive Officer:

Date



EMPL ID 1784	Request Date 1/22/2014	Effective Date 1/1/2014
SOCIAL SS#	Emp Status Active	FLSA Status Nonexempt

Last Nam		First Nam	10	M.I.	Suffi	,	Birth Date	Sex	Marital Status		Race	CMHA Reside	nt
Styles	-	Paul	16	IVI.I,	Suni	^	07/05/1963	M	Single		Black	Y	111
Cty.00		7 0001			l		0170071000	1			Diaon	<u> </u>	
Mailing A	ddress	 1	1	Address 2			City		State		Zip Cod	e	
Action	Action		Actio	n ription		oet N	umber		Cost Nu	mhor	Descript	ion	
PAY	ATB	JII	_	Rate Change		• • • • • • • • • • • • • • • • • • • •	00100000012	5000	+		F ONLY 1		
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	<u> </u>				-					· · · · · · · · · · · · · · · · · · ·			
FROM:	Job Cod		b Code scriptic		-		Rate o		Valan.	Dep	artment		Dept ID#
1/1/2013	170			geant - Nopba			Hrly 32.7451		68109,81	Poli	ce Admini	istration	210000
17172010	1	00 110	100 001	geant - Hopba			02.1401		00100,01	1 011	oc Admin	istiation	1210000
									<del></del>				
To:	Job Cod	1	b Code				Rate of		<del> </del>	Depa	artment		Dept ID#
1/1/2014	170		scriptic	geant - Nopba			33.4	Sa	lary 69472		e Adminis	tration	210000
1/1/2014	170	33   F0	iice Seit	geant - Nopua			33.4		09472	FOIIC	e Auminis	tration	210000
COMMEN		se effective	lonuon	. 1 2014									
Contractua	increas	se enective	January	7 1, 2014									
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Requested	Ву:	Date	е			Dir	ector of Huma	an Res	ources:	Date	/		_
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Description	A Disconti				/	1 -	1 4 -			5 .			-
Departmen	it Directo	or: Date	3		/	/ Bu	idgetary Appr	oval:		Date			



EMPL ID	Request Date 3/8/2012	Effective Date 1/1/2012
SOCIAL SS#	Employee Status ACTIVE	FLSA Status
(mask- last 4 digits)	7	

4146-1-114	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0111 01	X1V1		(mask- last 4 uit	jiis)	
First Name	M.I.	Suffix	Birth Date	Sex	Marital Status	Race	CMHA Resident
PAUL			7/5/1963	М		BLACK	
ress 1	Address 2		City		State	Zip Code	
							<u> </u>
Action Reason	Action Description		Cost Numbe	r		Cost Numbe	r Description
MER	MERII	<del></del>					
Job Code	Job Code			Depa	rtment	Dept ID #	
				POLI	CE	21	0 21000
Job Code	Job Code Description	Rate Hrly	of Pay Salary	Depa	rtment	Dept ID #	
•		31.7913	\$66,126.00	POLIC	CE	21	0 210000
S:	Salary increas	e is effectiv	re 1/1/12.	<u>-</u>	·	<u></u>	
	First Name PAUL  ress 1  Action Reason MER  Job Code  Job Code	First Name M.I.  PAUL  ress 1 Address 2  Action Action Description MER MERIT  Job Job Code Description  Job Code Description  Job Code Description  S:	First Name M.I. Suffix  PAUL  ress 1 Address 2  Action Action Description  MER MERIT  Job Job Code Pate Hrly  Job Code Description  Job Code Description  Job Code Hrly  30.8653	PAUL 7/5/1963  ress 1 Address 2 City  Action Reason Description Cost Number MER MERIT  Job Job Code Rate of Pay Salary 30.8653 \$64,200.00  Job Job Code Rate of Pay Salary 31.7913 \$66,126.00	First Name M.I. Suffix Birth Date Sex 7/5/1963 M  ress 1 Address 2 City  Action Reason Description Cost Number  MER MERIT  Job Job Code Pascription Hrly Salary  Job Job Code Rate of Pay Deparence Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Service Se	First Name M.I. Suffix Birth Date Sex Status  PAUL 7/5/1963 M  ress 1 Address 2 City State  Action Reason Description Cost Number  MER MERIT  Job Job Code Description Hrly Salary  30.8653 \$64,200.00 POLICE  Job Job Code Description Hrly Salary  31.7913 \$66,126.00 POLICE	First Name M.I. Suffix Birth Date Sex Status Race PAUL 7/5/1963 M BLACK  ress 1 Address 2 City State Zip Code  Action Reason Description Cost Number Cost Number  Job Job Code Description Hrly Salary 30.8653 \$64,200.00 POLICE 21  Job Job Code Description Rate of Pay Department Dept ID #  Job Job Code Description 31.7913 \$66,126.00 POLICE 21

Requested

Department Director Date



EMPL ID	Request Date 12/30/2011	Effective Date 1/7/2012
SOCIAL SS#	Employee Status ACTIVE	FLSA Status
(mask- last 4 digits)		

1 1 1	Circl Man		0. 65	District Date		Marital		СМНА
		M.I.	Suffix	Birth Date	Sex	Status	Race	Resident
STYLES	PAUL			7/5/1963	IM.	<u> </u>	BLACK	
Mailing Add	ress 1	Address 2		City		State	Zip Code	
	Action	Action						
Action	Reason	Description		Cost Number	r	·	Cost Numbe	r Description
PAY	MER	MERIT						
FROM:	Job	Job Code	Rat	e of Pay	Depa	rtment	Dept ID#	
, , , , , , , , , , , , , , , , , , , ,	Code	Description	Hrly	Salary	1		Гооргио и	
SERGEANT	Ī		30.865	3 \$64,200.00	POLI	CE	21	0 21000
TO:	Job	Job Code	Rat	e of Pay	Depa	rtment	Dept ID #	
	Code	Description	Hrly	Salary				
SERGEANT	Γ		31.791	3 \$66,126.00	POLI	CE	21	0 21000
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Requested/I	By: / 43	(Data)	-	Director of H	V C	Passurasa	Date	<del></del>
requesteori	المحمد عالة 90	Walet			lullian	Resources	Date	

**Department Director** 

Date

Chief Executive Officer



EMPL ID	Request Date 1/13/2011	Effective Date 1/1/2011
SOCIAL S	Employee Status ACTIVE	FLSA Status
(mask- las	4 digits)	
Marital		CMHA
Status	Race	Resident

						Marital		СМНА
Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Status	Race	Resident
STYLES	PAUL		<u> </u>	7/5/1963	M_	<u> </u>	BLACK	
64 90 A 1 1 A				Ion.		lovete	Tarra	
Mailing Address 1		Addi	ress 2	City		State	Zip Code	
	Action	Actio	on				1	
Action	Reason	Des	cription	Cost Numbe			Cost Numb	er Description
PAY	MERIT	MEF	RIT	210	)			
FROM:	Job	Job		te of Pay	Depa	artment	Dept ID#	
	Code	Des	Hrly	Salary	<u> </u>	·		
SERGEANT			29.966	\$62,330.10	POL	ICE	2	10 210000
ТО:	Job	Job	<b>1</b> Da	te of Pay	Don	artment	Dept ID#	
10:	Code		Hrly	Salary	l peb	artinent	Debt 10 #	
SERGEANT	0000			\$64,200.00	POL	ICE	2	10 210000
			1 00.00		<u>1:</u>		<u></u>	
COMMENTS:								
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Requested By	Las O	Date	•	Director of H	lumai	n Resourc	c: Date	
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	1/14/201			B	1/2	*	عليان	
Department Direc	tor	Date	_ e	Budgetary A	pprov	ral	Date	<del>_</del>
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Executive Director

## CMHA

#### CUYAHOGA METROPOLITAN HOUSING AUTHORITY

#### P SONNEL TRANSACTION RM

EMPL ID	Request Date	Effective Date
1784	11/23/2010	11/24/2010
SOCIAL SS#	Emp Status	FLSA Status
	Active	Nonexempt

Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Marital Status	Race	CMHA Resident
Styles	Paul			7/5/1963	М	Single	Black	Y

Mailing Address 1	Address 2	City	State	Zip Code	
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	Action	Action		
Action	Reason	Description	Cost Number	Cost Number Description
PAY	MER	Pay Rate Change	100446001000000125000	POLICE STAFF ONLY 1/11TH

FROM:	Job	Job Code	Rate	of Pay	Department	Dept ID #	
Code		Description	Hrly	Salary			
1/1/2009	17033	Police Sergeant - Nopba	29.0935	60514.48	Police Administration	210000	

	Job	Job Code	Ra	ate of Pay	Department	Dept ID #
	Code Description	Description	Hrly	Salary		
11/24/2010	17033	Police Sergeant - Nopba	29.9664	62330.11	Police Administration	210000

COMMENTS:

Salary increase effective 1/1/2010

Requested By: Date

cquested by

Department Director: Date

Madeent

Director of Human Resources:

12/9/10

Date

Budgetary Approval:

12-01-10

Date

Chief Executive Officer:



EMPL ID	Request Date 12/8/2008	Effective Date 1/1/2009
SOCIAL SS	Employee Status ACTIVE	FLSA Status
(mask- last	4 digits)	

			_					
		l				Marital	-	СМНА
Last Name	First Name	M.I.	Suffix	Birth Date	Sex	Status	Race	Resident
STYLES	PAUL			7/5/1963	M	<u> </u>	BLACK	
Mailing Address 1		Addi	ess 2	City		State	Zip Code	
							-	
	Action	Actio					1.	
Action	Reason		cription	Cost Numbe			Cost Number	Description
PAY	MERIT	MER	RIT	210				
FROM:	Job	Job (	( Rat	e of Pay	Depa	artment	Dept ID#	
	Code	Desc	Hrly	Salary	ľ		'	
SERGEANT		ĺ	28.178	\$58,609.84	POL	IÇE	210	)
TO:	Job	Job (		e of Pay	Depa	artment	Dept ID #	
	Code	Desc	Hrly	Salary				
SERGEANT			29.094	\$60,514.66	POL	CE	210	)
COMMENTS:								
								===
CONTRACTUAL INCI	REASE							
	`							
	<i>)</i>	<i>.</i>						
( 1. P. C. L	ala 12/	5/08		716	126	+ 191	15/08	
Requested By:	<del>} /</del>	Date	-	Director of H	umar	Pasouro	Date	-
Thoquested by.		Date		Director of 11	uiiiai	i i tesoui c	A Date	
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Department Director	<del>) /)                                  </del>	Date	<b>-</b>	Budgetary A	oprov	al	Date	-
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			ative Dire	ector	uate			

## Cuy . a Metropolitan Housing / rity REQUEST FOR PERSONNEL TRANSACTION

1073

NAME:	Last First	Middle	SOCIAL SECURITY NO	<u>0.</u> D	ATE OF BIRT		- Black - White	SE
STYLES	Paul			Month 07	Day 05	Year 6.	- Hispanio - Asian - Other	c MX
ADDRESS: Street	t	City	State	Zip	PH	ONE NO.	 I	RESID Y/
DEPARTMENT POLICE	/DIVISION/ESTATE	COST CENTER	REQUEST DATE Month 04 Day 07	Year N	EFI Month 01	FECTIVE DA		Year
APPOINTMENT:		CHANGE:		SEPARATIO	DN:			
1:: Full Tim	е	1.: Promot	ion		Resignation	Reason		
2 Part Tim	ie.	2. Demotic	on					
3. Tempora	ıry, Ends	3. Detail		,	Retirement			
4. Traines		4. Transfer	r within Agency	8	Deceased			
	to		• •	3.	Deceased			
5. Former I	• •	From	(tement		Dismissal			
	r Worked			- S.	Probationar	у		
	ng Unitame			6.	Reduction is	n Force		
Local No			11018494	7.	Job Abolish	ment		
Date Cle	pared	0. Work of		8.	Disability			
POSITION:	nent Screening	9. Other (	Specify)	-	Military Lea			
1. New (att	ach position description)				willian y coa	***		
2 Reclassit	fication			10.	Leave of Ab	sence		
3. Replacer	ment			11.	Suspension			
(Last Hel	ld By)			12.	Other (Spec	ify)		
		Date of Last Evaluat	ion	Evaluation S	Score	<u>-</u> -		
DATE			ncrease		ast Increase			
FROM: Title/Classific	cation Step	Hourly Rate	Annual Salary	Department/Divi	sion/Estate	Ext	COST CE	:NTEF
SERGEANT		\$27.2909	\$56,764.98	POLICE				
TO: Title/Classific SERGEANT	cation Step	Hourly Rate \$28.1778	Annual Salary \$58,609.84	Department/Divi POLICE	sion / Estate	Ext	COST CE	NTEF
	TRACTUAL INCREA	*	(2) Justify (i	if requesting posit	tions in exce	ess of app	roved bud	Jget)
Marid REQUESTED BY:	Melmor	<i>B/11/</i>	BUDGET MANAGER				DATE	E
DC David	I blomm	12/111	of mark	and and		,	10/24	07
APPROVED: (DEPI	T/DIV/ESTATE)	DATE	PERSONNEL OFFICE	ER I.		······	DATE	E
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## Cuyal. ga Metropolitan Housing Au ority REQUEST FOR PERSONNEL TRANSACTION

NAME:	Lasi	First	Middle	SOCIAL SECURITY NO			- Black	SE.
STY	YLES	PAUL			Monthy Day ()	5 Year 63	- Hispanic - Asian - Other	MY
ADDRESS:	Street		City	State	Zip PI	HONE NO.	<u> </u>	RESIO Y/I
								'''
	RTMENT/DIVISION/ES	i	COST CENTER	Month 12 Day 05	Year Month	FFECTIVE DA		Year
Police								
APPOINTM			CHANGE:		SEPARATION:			
1	Part Time		1 Promotio	n <sub>(S</sub>	1. Resignation	i. Reason		
			2. Demotion	1				
	Temporary, Ends		3. Detail		2. Retiremen	t		
4.			4. Transfer	within Agency	3. Deceased			
_	to		5. Reinstate					
5.	Former Employee			<u>.</u>	4. Dismissal			
	Last Year Worked		_		5. Probations	ıry		
	Bargaining Unit				6. Reduction	in Force		
	Union Name			crease	7. Job Abolis	hment		
	Local No Date Cleared		8. Work out	of Classification				
	Employment Screening		9. Other (Sp	pecify)	8. Disability			
POSITION:					9. Military Le	ave		
1.	New (attach position de	escription)			10. Leave of A	hsence		
2.	Reclassification							
3.	Replacement				11. Suspension	ı		
	(Last Held By)				12. Other (Spe	cify)		
			Date of Last Evaluatio	n	Evaluation Score			
	DATE		Date of Last Wage Inc	rease	Percent of Last Increase			
FROM: Title	/Classification	Step	Hourly Rate	Annual Salary	Department / Division / Estate	Ext.	COST CE	NTER
SERGEA	ANT		\$25.47	\$52,991.96	Police		210	
TO: Title	/Classification	Step	Hourly Rate	Annual Salary	Department/Division/Estate	Ext.	COST CE	NTER
SERGEA	ANT		\$26.49	\$55,111.63	Police		210	
NOTES:	1) Attach Copy of Te	rmination or Re	signation	(2) Justily (i	f requesting positions in exc	ess of app	roved bud	get)
REMARKS:				····				
	CONTRACTUA	AL INCREAS	ES			17		
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A SOLVESTE	SUBT:	1/1	DATE	BUDGET MANAGER			DATE	:
12	11.1.	Ken	1 0/1/12/15	-or milalle.			Islicit.	
APPROVED	): (DERT/DIV/ESTAT	E)	DATE	PERSONNEL OFFICE	<i>∱√1</i> :R		DATE	<u></u>
		/	CAPAIA	,	(-12-06			
5/1/1/1	- 10 -	<i>\</i>	EVECUTIVE	IDECTAD	DATE			



## Cuyahoga Metropolitan Housing Authority Personnel Transaction Form



NAME: Last	First	Middle	SOC	IAL SECU	SOCIAL SECURITY NO. DAT			
STYLES, PAU	il.					07/05/6	3	M
ADDRESS: Street		City		State	Zip	RACE (	CODE	
						C-BLACK		
PHONE NO.	COST	CENTER	СМНА	REQ	UEST DATE	EFFECT	IVE DA	TE
	SIN POLIC	E & SECURITY	RESIDENT?	03/02	2/04	01/01.	104	
APPOINTMENT	:	CHANGE:		·	SEPA	RATION:		
			. WEIDE	F A O G				
		ST - SAHAR	A TMILK	EASE				
POSITION:					LEAV	r: .		
V9					1. (. /h V			
FROM: Title/Classificati	_		-		Project Descrip		Projec	đ
POLICE SERGEAL	NT - NOPBA	24.0144	49,95	9 POI	TOE & SE	CURTTY	216	9
TO: Title/Classification	Pay Range		_		Project Descrip		Projec	
POLICE SERGEAL	NE - NOPBA	24.7348	51,44	8 201	ICE & SE	CURTTY	213	A.
REMARKS:	NTRACTUAL S	ALADV THE				<u> </u>		W
2. 47 47 4 (2.03)	R + IV II () IV I	BUBBLE LIKE					)	KN
	<u>.</u>		<u></u>		~		<del></del>	
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REQUESTED BY	Min	DATE	DIREC	TOR OF	HUMAN RESO	URCES	DAT	<u>(E</u> 7 . (5)
13		March	,,		′ / —	_		/
DEPARTMENT DIRECT	Mefletin, CA	DATE OF	2 RIDG	ET MANA	GER	0	_ <i>6/4</i> DAT	22/1/ FF
		Sala Va	, DODG.	- a manaran	· JAN		וחש	
	E	KECUTIVE DIRECTOR	₹		DATE	_		
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## Cuyan and Metropolitan Housing Autionity REQUEST FOR PERSONAL TRANSACTION

NAME:	Last	First	Middle	SOCIAL SECURITY		DATE OF BIRT		- Black - White	SE
ST	YLES	PAUL			N N	Month07 Day 05	Year 6	- Hispanic - Asian - Other	M)
ADDRESS:	Street		City	State	Zip	PHO	ONE NO.		RESI
									Y/
DEPA	RTMENT/DIVISION	ESTATE	COST CENTER	REQUEST DATE			ECTIVE DA	ATE	ш.
POLIC	E		210	Month 03 Day 0	3 Year	Month	01 <sup>Day</sup>	03	Year
APPOINTM	ENT:		CHANGE:		SEP	ARATION:			
1.	Full Time		1. Promotion	ì		1. Resignation.	Reason		
2.	Part Time								
3.	Temporary, Ends		2. Demotion						
4.	•		3. Detail		_	2. Retirement			
		. to	4. Transfer w	ithin Agency		3. Deceased			
5.	Former Employee		5. Reinstate	nent		4. Dismissal			
	Last Year Worked		From						
	Bargaining Unit			Otal		5. Probationary	/		
	Union Name					6. Reduction in	r Force		
				rease	_	7. Job Abolish	ment		
	Local No Date Cleared		8. Work out	of Classification		8. Disability			
2001000	Employment Screen	ing	9. Other (Sp	ecity)		6. Disability			
POSITION:					—	9. Military Leav	/8		
1.	New (attach position	description)				10. Leave of Ab	sence		
2.	Reclassification					44 . 0			
3.	Replacement				-	11. Suspension			
	(Last Held By)					12. Other (Spec	ify)		
			Date of Last Evaluation	)	Evalu	uation Score			
	DATE		Date of Last Wage Inc.	'ease		ent of Last increase			
FROM: Title	/ Classification	Step	Hourly Rate	Annual Salary		ent/Division/Estate	Ext.	COST CE	NTE
SERGEA	ANT		\$23.0903	\$48,028	POL			201	
TO: Title	/ Classification	Step	Hourly Rate	Annual Salary	Departme	ent/Division/Estate	Ext.	COST CE	NTE
SERGEA	NT		\$24.0144	\$49,950	POL	ICE		201	
NOTES: REMARKS	(1) Attach Copy of CONTRACTI	Termination of UAL INCREA	Resignation ASE	(2) Justify	y (if requesting	ng positions in exce	ess of app	roved bud	lget)
						44	izln l	52	
							<del> </del>	<u> </u>	
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11/2	1. 7.	Call	12/12/	0-2	`				
REQUESTE	ED BY:	1	DATÉ	BUDGET MANAGE	R			DATE	=
	7/ /	1	1 1	- <b>-</b> -	MAN			11	1-
(Mu)	chy fee	Bruj	aring 12-16-6	32 Mars	WIK	7		12-1	11-
APPHOVE	D: (DEPTIDIVIES	IATE)	DATE	PERSONNEL OFFI	CER	1. 1	. /	DATE	:
1 30	(E) 11000	· / -	em I/No	mh/sh	nun	12/19	7/0	Z	

## Cuyahoga Metropolitan Housing Authority P DUEST FOR PERSONNEL TRANSACTION

NAME:	Last Fin	st Mic	ddle	so	CIAL SECURITY NO	. Moi	DATE OF BIRTI	H Year	- White	SE M
5	STYLES, P.	AUL				7		63	- Asian - Other	"1
ADDRESS:	Street	City	,	Sta	e	Zip	PHO	NE NO.	_	RESII
										Y
DEPAI	RTMENT/DIVISION/ESTATE	COST CE	NTER	Month	REQUEST DATE Day	Year	EFF Month	ECTIVE D		Year
	POLICE	210		5	10	02	1	1		02
APPOINTM	ENT:	CHA	NGE:			SEPAF	RATION:			
1,	Full Time		1. Promotio	on		250	1. Resignation.	Reason 🛚		
2	Part Time		2. Demotio	n						
3.	Temporary, Ends		3. Detail				_ 2. Retirement			
4	Trainee	1000	4. Transfer	within Agenc	,	-				
	to		- 4 Hallstei	William Agoing	•	100	_ 3. Deceased			
5.	Former Employee	-	5. Reinstat				4 Dismissal			
	Last Year Worked		From _			-   -	5 Probationary	,		
	Bargaining Unit		6. Change	in Status		20 = 100	6. Reduction in	Force		
	Union Name	XX	X 7. Salary Ir	ncrease C(	NTRACTUAL	'				
	Local No.		8. Work ou	it of Classifica	ition	7	_ 7. Job Abolish	neni		
	Date Cleared Employment Screening		9 Other (S	Snecify)		_	8. Disability			
POSITION:		11.	0. 00. (0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- I	9. Military Leav	/e		
1	New (attach position description)						40 . 1 4 . 4			
2.	Reclassification						_ 10. Leave of Ab	sence		
3.	Replacement					-	11 Suspension			
	(Last Held By)					-	_ 12_ Other (Spec	ify)		
			of Last Evaluati	on		Evalua	tion Score			
	DATE						t of Last Increase			
FROM: Title	e/Classification Ste		urly Rate		al Salary		t/Division/Estate	Ext.	COST C	ENTE
SERG	ሮ አ እየጥ	\$2	21.34	ς <u>.</u> \$Δ	1,405	POLI				10
	Classification Ste		urly Rate 23.0903		al Salary		t/Division/Estate	Ext.	COST C	
SERGE	ANT	\$ 2	23.0900	\$48	3,028	POLI	CE		2	10
NOTES:	(1) Attach Copy of Termination	on or Resignation		·	(2) Justify (i	f requesting	positions in exce	ess of ap	proved bu	dget
REMARKS										
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					11-2-2-20-1-2					
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REQUEST	ED BY:	/ /	DATE	BU	DGET MANAGER	4			DAT	Έ
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		em /	1/4m	M	1 Jum		11010	<i></i>		
	•	•	EXECUTIVE	DIRECTOR!	•		DATE			

ga Metropolitan Housing At ority
REQUEST FOR PERSONAL TRANSACTION FILE GUTY

SOCIAL SECURITY NO.

Middle

City

NAME:

ADDRESS:

STYLES

Last

First

PAUL

- Black - White - Hispan - Asian - Other

Day

07

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M/F

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DDRESS:	Street	City	State	Zip	PH	ONE NO.	RESIDE
							N/V
DEPA	RTMENT/DIVISION/ESTATE	COST CENTER	REQUEST 0	DATE	EF	FECTIVE D	ATE
		Tarra	Month Day	Year	Month	Day	Year
•	ae Div	210	02 02	1999	01	01	1999
APPOINTM		CHANGE:		SEPA	RATION:		
1.	Full Time	1. Prom	otion		1. Resignation	Reason _	
2.	Part Time	2. Demo	otion				
3.	Temporary, Ends	3. Detail			-		
4.	Trainee	3. Detail	•		2. Retirement		
	to	4. Transf	fer within Agency		3. Deceased		
_		5. Reins	datement				
5.	Former Employee			-	4. Dismissal		
	Last Year Worked	From	-	<del></del>	5. Probationa	ry	
	Bargaining Unit	6. Chan	ge in Status		6. Reduction	- Faras	
	Union Name	7. Salan	y Increase	100000	_ 6. Reduction	in Force	
	Local No.			2-	7. Job Abolisi	nment	
	Date Cleared	8. Work	out of Classification	:5	8. Disability		
	Employment Screening	XXX 9. Other	(Specify) Contractua	al	=0.		
OSITION:			Tocrease	-	9. Military Lea	ive	
1.	New (attach position description)			İ	10. Leave of A	nsence	
2.	Reclassification				10. Coave of A	2301100	
3	Replacement			1 —	_ 11. Suspension		
	•				_ 12. Other (Spe	cify)	
	(Last Held By)						
		Date of Last Evalu	ation	Evalu	ation Score		
	DATE	Date of Last Wage	Increase	Perce	nt of Last Increase		
FROM: Title	/Classification Step	Hourly Rate	Annual Salary		nt/Division/Estate	Ext.	COST CENTER
Serg	eant	19.7379	41,054.83	Police	a Div	3700	210
ΓO: Title	/Classification Step	Hourly Rate	Annual Salary	Departme	nt/Division/Estate	Ext.	COST CENTER
Serg	eant	20.5274	42,696.99	Police		3700	210
MOTES:	(1) Attach Copy of Termination of	v Besignation	(2) (	uotifu (if socuentia		<u> </u>	
REMARKS		n nesignation	(Z) JI	ustify (if requesting	g positions in exc	ess or app	proved budget)
IEWANA							
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		Ph 6	7 - 1	12.11			
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EQUEST	ED BY:	DAT	TE BUDGET MAN	AGER			DATE
		9.0	00.70				
	Er Milan	200 / 5-11	1-49				
PPROVE	D: (DEPT/DIV/ESTATE)	DAT	TE PERSONNEL C	OFFICER	1577	-	DATE
	Y			The second	1		JAI C
		EXECUTIV	E DIRECTOR		DATE		

## Cuyal nga Metropolitan Housing Authority

REQUEST FOR PERSONNEL TRANSACTION

ADDRESS: Street City State Zip PHONE NO.	RESIDEN
ADDRESS: Street City State 7io Buoye vo	RESIDE)
ADDRESS: Street City State Zip PHONE NO.	Y/N
DEPARTMENT/DIVISION/ESTATE COST CENTER REQUEST DATE EFFECTIVE DATE	Y
Solice Tily Scanno Month Day Year Month S Day	Year
ADDOMESTIC	
A SATURE VYV	
1. Full Time1. Resignation. Reason	
2. Part Time 2. Demotion	
3. Temporary, Ends 3. Detail	
4. Trainee 4. Trainee 4. Transfer within Agency	
to	
5. Former Employee 5. Reinstatement 4. Dismissal	
Last Year Worked 5. Probationary	
Bargaining Unit 6. Change in Status	
Union Name 6. Reduction in Force	
7. Job Abolishment	
Local No 8. Work out of Classification 8. Disability	
9. Other (Specify)	
POSITION:  9. Military Leave	
1. New (attach position description) 10. Leave of Absence	
2 Reclassification	
3. Replacement	
(Last Held By)12. Other (Specify)	
, Great of Last microase	
COST C	ENTER
PATROLMAN 3 \$13.8586 \$28.825.88 Police Div. 3700 210  To: Title/Classification Step Hourly Rate Annual Salary Department/Division/Estate Ext. COST C	
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SERGEANT \$19.7379 \$41,055.00 Police Div. 3700 210	
NOTES: (1) Attach Copy of Termination or Resignation (2) Justify (if requesting positions in excess of approved but	dget)
REMARKS:	
FUNDING SOURCE: COMP-MOD GRANT 859-140800-107000-210-000	<u></u> `a
FUNDING SOURCE: COMP-MOD GRANT 859-140800-107000-210-000	777
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REQUESTED BY: DATE BUDGET MANAGER DAT	E
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APPROVED (DESTIDING STATE)	h
APPROVED: (DEPT/DIV/ESTATE)  DATE  PERSONNEL OFFICER  DAT	E
- ATA-MANIA- TELESIA	
EXECUTIVE DIRECTOR DATE	

4 - Personal Fite I canani

5 - Rudaate Iniak

6 Donortmont Landanerad

1 — Employee I white

2 - MIS/blue

3 - Pavroll I green

## Cuy: nga Metropolitan Housing A thority REQUEST FOR PERSONNEL TRANSACTION.

NAME:	Last Fir	st Middle	SOCIAL SECURITY NO.	Month Day	T <b>H</b> Year	Black - White - Hispanic - Asian - Other	SE M/		
ADDRESS:		City	State	Zip PH	IONE NO.		RESID Y/		
DEPA APPOINTN	ARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST DATE Month Day	Year Month Day Year  SEPARATION:					
2 3 4 5 5 2.	Full Time Part Time Temporary, Ends Trainee	5. Re 6. Ch 8. Wc 9. Oth	motion	2. Retirement 3. Deceased 4. Dismissal 5. Probationary 6. Reduction in Force 7. Job Abolishment 8. Disability 9. Military Leave 10. Leave of Absence 11. Suspension 12. Other (Specify)					
FROM: Titl	DATE le / Classification Ste		age Increase  Annual Salary	Percent of Last Increase  Department/Division/Estate		COST CE	NTE		
TO: Titl	PATROLMAN 2 le/Classification Ste PATROLPIAN 3  (1) Attach Copy of Termination	p Hourly Rate	Annual Salary	Department/Division/Estate  Department/Division/Estate  Frequesting positions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions in exceptions.	Ext.	COST CE	NTEI		
REQUEST			23/// DATE BUDGET MANAGER	11/3	2.6-66	5/9/5 DATI	E		
APPROVE	ED: (DEPT/DIV/ESTATE)	7000000	DATE PERSONNEL OFFICE	DATE		DAT			

## Cuyanoga Metropolitan Housing Authority

EQUEST FOR PERSONNEL TRANSACTION

FILE COPY

NAME:	Last Firs	t Middle	SOCIAL SEC	URITY NO.	DATE OF BIF	TU.	-Black	- A.	
	STYLES	PAUL A.			Month Day	Year	- White - Hispanic	SEX	
ADDRESS	Street	Chy			07 05	63	- Asian - Other	ـــ	
					P.	HONE NO.		PESIDE Y(N	
DEP	ARTMENT/DIVISION/ESTATE	COST CENTER	REQUEST	T DATE				Ĺ	
Po.	lice Div.	853-210	Month Da	ıy Year	Month	FFECTIVE ( Day		Year	
APPOINT	MENT:	CHANGE:	11 04		11	04	96	Year	
1,	Full Time		SEPARATION:  1. Promotion  1. Resignation. Reason						
2.	Part Time			8.4	1. Hesignation	n. Reason _			
3,	Temporary. Ends	2. Demotic	on				· ·		
4,	Trainee	3. Detail			2. Retirement	t			
	to	4. Transfer	within Agency	)   _	3. Deceased				
5.	Former Employee	X 5. Reinsta	tement	//					
	Last Year Worked	From _			4 Dismissal				
	Bargaining Unit	·	in Status		5. Probationa	ry			
	Union Name	3-		=	6. Reduction	in Force			
	Local No.				7. Job Abolisi	hment			
	Date Cleared Employment Screening	5 Work 60	t of Classification		8. Disability				
POSITION:		5. Other (S	pecify)		O. Disability				
1:	New (attach position description)	REC	EIVED	-	9. Military Lea				
2.	Reclassification	NOV	^	1 -	10. Leave of At	osence			
3.	Replacement	1100	7 1996	-	11 Suspension				
	(Last Held By)	HUMAN_	RESOURCES 1	6-	12. Other (Spec	cify)		_	
		Date of Last Evaluation	on	Eva	luation Score				
EROM. Titl	DATE	Date of Last Wage In	crease	1	cent of Last Increase				
	e/Classification Step	Hourly Rate	Annual Salary		nent/Division/Estate	Ext	COST CEN	ITER	
	PATROLMAN  P/Classification Step	\$9.38	\$19,510.40	Police	Div.	3700	210		
	PATROLMAN	Hourly Rate	Annual Salary		nent/Division/Estate	Ext.	COST CEN	TER	
	(1) Attach Copy of Termination	\$11.10	\$23,088	Police	Div.	3700	210		
REMARKS		or Hesignation	(2)	Justify (if requesti	ng positions in exc	ess of app	proved budg	 get)	
		ED TO THE POSIT	ON OF FULL	TIME POL	ICE OFFICE	ER		—	
	FUNDING	SOURCE: COMP-MC	DD GRANT 85	3-140800-	107000-210				
				0.0	107000-210		G (	—	
	΄ Λ			E	lace me	701	96	_	
	Fo	u 11/58	10.	A	1.	0		las	
REQUESTE	D BY:	DATE	BUDGET MAN	IAGER		<u> </u>	<i>             </i> DATE	<u>70</u>	
	11/11/11								
APPROVED	(DEPT(DIV/ESTATE)	1-5-53	<u> </u>						
	(32. (Collicolate)	DATE	PERSONNEL (	OFFICER			DATE	_	
		EXECUTIVE D	IRECTOR		DATE				
1 — Emplo	ivee / white 2 _ MIS / hlue	2 Davisattianna i	_ 10 _0						

## Cuyah ga Metropolitan Housing Autority

REQUEST FOR PERSONNEL TRANSACTION

NAME:	Last	First	Middle	SOCIAL SECU	URITY NO.	DATE OF BIR	TH	Black - White	ŞEX
	STYLES	PAUL	A.			Month Day	Year 63	- Hispanic - Asian	MI/F
ADDRESS:	Street		City	State	Zip	<u> </u>	HONE NO.	- Other	RESIDE
									Y/N
DEPA	ARTMENT / DIVISION / ESTATE	C	OST CENTER	REQUEST	DATE	E	FECTIVE D	ATE	<u> </u>
tol	ice Div.	85	3-210	Month Da		ear Month	Day 0.4		Year
APPOINTM			CHANGE:	1.1 ()4		SEPARATION:	.,,-3	19.76	
1.	Full Time		1. Prom	notion		1. Resignation	Reason		
2.	Part Time		0 0	-A	:				
3.	Temporary, Ends		2. Dem						
4.	Trainee		3. Detai	IF .		2. Retiremen	1		
	to		4. Trans	fer within Agency		3. Deceased			
5.	Former Employee	_	X 5. Reins	statement		4. Dismissal			
	Last Year Worked		From			5. Probations	IDV		
	Bargaining Unit		6. Chan	nge in Status		J. I lobations	'y		
	Union Name		7. Salar	-		6. Reduction	in Force		
Local No.						7. Job Abolis	hment		
	Date Cleared Employment Screening			out of Classification	İ	8. Disability			
POSITION:	Employment Screening		9. Other	r (Specify)		A Millian Land			
11	New (attach position descrip	tion)				9. Military Le	3V8		
	Reclassification					10. Leave of A	bsence		
						11. Suspension	1		
J.	Replacement (Last Held By)					12 Other (Spe	cify)		
	(Last Held by)			377					
				uation		Evaluation Score			
EDOM: Tale	DATE			e Increase		Percent of Last Increase	·-		
	e/Classification PATROLMAN	Step	Hourly Rate	Annual Salary	·	artment/Division/Estate		COST CEI	NTER
	/Classification	Step		\$19,510.40 Annual Salary			3700	210	
	PATROLMAN	Ciop		\$23,088			Ext. 3700	1	NIEH
	(1) Attach Copy of Termin	ation or Resig				esting positions in ex		<u> </u>	
	S:	ation of fiesign	nation	, (2)	Justily (II requ	esting positions in exi	ess or app	proved bud	get)
		ATED TO	THE POST	TION OF FULL	TIME PO	DLICE OFFICE	EP		
	CHINIST	NG SOUD	or. com.	MOD CDANT DE	2 74000	207000 21	0.00		
	- 11,01,11.	and Senitor	CV: Clinks	MOD GRANT 85				96	
		A.:			r.	coluce no	1 100	10	
	\ [8]	1	//	1/1)		(			1
		en		the -tolu	1.1/4	1	5	11/6	196
REQUEST	ED BY:	1	DA	TE BUDGET MA	NAGER	9=1)		DATE	
series de		han	1/1/11-		. /	1/2		1.	1-
APPROVE	D: (DEPT/DIV/ESTATE)	vasu, c	Auf 1/5	40 Run	11/1	pulls-	agents.	11/8/3	81
OF IT NUVE	D. (DEFNUNTESIAIE)		DA	TE PERSONNEL	OFFICER			DATE	i
	545								

**EXECUTIVE DIRECTOR** 

DATE

## Cuyah a Metropolitan Housing Authority

REQUEST FOR PERSONNEL TRANSACTION

NAME:	Last	First		Middle		SOCIAL SEC	CURITY NO.			DATE OF BIRT	Н	- Black	SEX
	Styles	Paul.						1	Month 7	Day 5	Year 63	- Hispani - Asian - Other	c M/F
ADDRESS:	Street			City		State		Zip		PHO	ONE NO.	i = Other	RESIDEN
													Y/N
DEPA	RTMENT/DIVISION/ES	TATE	CO	ST CENTER		REQUES					ECTIVE D	ATE	
Polic	e & Security	ė	210		'	Wonth D 25	Day	Year 96		Month 3	Day 29		Year
APPOINT	MENT:			CHANGE:					EPARAT	ION:			
1.	Full Time			1,	Promotion				1	Resignation.	Reason _		
2.	Part Time			2	Demotion								
3.	Temporary, Ends			3.	Detail								
4.	Trainee				Transfer wit	thin Annua		1	===	2. Retirement			
	to				iransiei wii	min Agency		1		3. Deceased			
5.	Former Employee			5.	Reinstatem	ent		١.		4. Dismissal			
	Last Year Worked				From			-		5. Probationary	/		
	Bargaining Unit			6.	Change in	Status			XX	6. Reduction in	**	Lay C	ff
	Union Name			<b>7</b> .	Salary Incr	ease		Ι,					
	Local No.			8.	Work out o	f Classification		3		7. Job Abolishi	ment		
	Date Cleared Employment Screening			9.	Other (Spe	cify)		1.		B. Disability			
POSITION:					, , , , , , , , , , , , , , , , , , , ,		•			Military Leav	/e		
1.	New (attach position de	escription)							10	). Leave of Ab	eance.		
2	Reclassification							] =			scrice		
3.	Replacement							-	11	Suspension			
	(Last Held By)							2	12	Other (Spec	ify)		
	(a)			Date of Las	t Evaluation.			E	valuation	Score			
	DATE		i	Date of Las	t Wage Incre	ase		Pe	ercent of	Last Increase			
	e/Classification	Step		Hourly Ra	ite	Annual Salary	54	Depar	tment/Di	vision/Estate	Ext.	COST C	ENTER
Pol	ice Officer			11.10		23,088	Pol	lice	& Se	curity		210	
TO: Title	e/Classification	Step		Hourly Ra	te	Annual Salary		Depart	tment/Di	vision / Estate	Ext.	COST CI	ENTER
				2.0								<u> </u>	
	(1) Attach Copy of Te 3: 大京 Lay-Off (				ino	(2)	) Justify (if r	eques	sting po	sitions in exce	ess of app	proved bu	dget)
HEMARKS	):		LUCK Q	a a date.						<u> </u>			
								-				0.70	-
								-					
	<u></u>		-						-				
					/								
	1111	alle.	2		3/25/9								
REQUEST	ED BY:				DATE	BUDGET MA	ANAGER		2.			DAT	E
								/ /	1	>		1	_ /
APPROVE	D: (DEPT/DIV/ESTAT	'E\			DATE	Am	(2).(	pr	n/	Macin		3/27	191
AL P HOVE	D. (DEFT/DIV/ESIAI	2)			DATE	PERSONNE	L UFFIÇER			$\bigcirc$	/	DAT	E
	-												
				EXEC	CUTIVE DH	RECTOR			DA	ΓE			

## Cuyab ga Metropolitan Housing Authority

NAME:	STILES, PAUL	MIGGIA	SOCIAL SECORITY NO	Monti	n Day	Year	- White - Hispanic - Asian - Other	M/F	
ADDRESS:	Street	City	State	Zip	PHO	ONE NO.		RESIDE	
								Y/N	
DEPA	RTMENT/DIVISION/ESTATE	COST CENTER	Month 1 Day	√i. Year	EFFECTIVE DATE				
APPOINTM	MENT:	CHANGE:		SEPARA	TION:	20		=	
1	Full Time	XXX 1. Promotio	on		1. Resignation.	Reason _			
2.	Part Time	2. Demotion	n = 1				00		
3.	Temporary, Ends	3. Detail		2. Retirement					
4-	Trainee to	4. Transfer	within Agency	3. Deceased					
5.	Former Employee	5. Reinstati		4. Dismissal					
	Last Year Worked	From _			5. Probationary	S			
	Bargaining Unit	6. Change	in Status		6. Reduction in	n Force			
	Union Name	xxx_ 7. Salary Ir	icrease		of Coisepility				
	Local No.	B. Work ou	t of Classification	P	Ex 200 188	11.000			
	Date Cleared Employment Screening	9 Other (S	pecify)	1601	(EDisability		1 0		
POSITION:		2. One (0	= 011 7		9. Military Leav	- 187			
1.	New (attach position description)				10. Leave of Ab	sence			
2.	Reclassification	E X		12.39	100				
3.	Replacement	y V a			11. Suspension				
	(Last Held By)				12. Other (Speci	ify)			
		Date of Last Evaluation	on_ = _	Evaluatio	n Score.	en Es			
	DATE	Date of Last Wage In	crease	18.0	of Last Increase			I B	
FROM: Titl	le/Classification Step	Hourly Rate	Annual Salary		Division / Estate	Ext.	COST CE	NTER	
	ARMED SPECIAL OFF	49,06	\$18,844.80		e Div. 🤘	700	210		
TO: Title	e/Classification Step FATROLMAN ENTRY	Hourly Rate	Annual Salary		Division/Estate	Ext, 200	COST CE	NTER	
NOTES:	(1) Attach Copy of Termination or Re	signation	(2) Justify (i	f requesting p	ositions in exce	ess of app	proved bud	dget)	
	WEETLES. FUNDING	SOURCE: COM	THOO BEARS 850	1-140800	1-107000	ĮD	/ / /	liy	
	. I let	11/2016					Llv	7	
REQUEST	TED BY:	DATE	BUDGET MANAGER				DAT	E	
36	The relian	20 m		< v2 - 1					
APPROVE	ED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICE	R			DAT	Ε	

**EXECUTIVE DIRECTOR** 

DATE

## Cuyanoga Metropolitan Housing Authority

#### REQUEST FOR PERSONNEL TRANSACTION

NAME: Last First	Middle	SOCIAL SECORITY NO.	Monti	h Day	n Year	- White - Hispanic - Asian - Other	M/
ADDRESS: Street	City	State	Zip	PHO	ONE NO.		RESIO Y/I
DEPARTMENT / DIVISION / ESTATE	COST CENTER	REQUEST DATE  Month Day	Year	EFF Month	ECTIVE D Day		Year
APPOINTMENT:	5. Reinstater From 6. Change in 7. Salary Inc 8. Work out	ithin Agency nent  Status rease ANGUAL of Classification		1. Resignation.  2. Retirement 3. Deceased 4. Dismissal 5. Probationary 6. Reduction in 7. Job Abolishr 8. Disability 9. Military Leav 10. Leave of Abs 11. Suspension 12. Other (Speci	r Force ment		
(Last Held By)	Date of Last Evaluation	)		on Score			
FROM: Title/Classification Step	Hourly Rate	Annual Salary	l .	of Last Increase Division/Estate	Ext	COST CE	NTE
TO: Title/Classification Step  NOTES: (1) Attach Copy of Termination	Hourly Rate or Resignation	Annual Salary (2) Justify (i	D #30 3	Division/Estate	Ext_ ess of ap	COST CE	
REMARKS:		) II	= H1102	>>			
REQUESTED BY:	DATE	BUDGET MANAGER		7		DAT	E
APPROVED: (DEPT/DIV/ESTATE)	DATE	PERSONNEL OFFICE	ER			DAT	E

## CLyahoga Metropolitan Housing Authority PERSONNEL TRANSACTION

NAME:	Last	First M	liddle	SOCIAL SECU	RITY NO.	T	DAT	E OF BIRTH	313	□ Black	SEX
51	TYLES	PAUL				Month		Day	Year	White Hispanic	M/F
ADDRESS	Street	1/2/2015				7		5	63	Asian other	
ADDRESS	Street			City		State			Zip		Resident
											Y/N
DEP		0031 0211	L11	Month	De De la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de la con	4			IVEDATE		
Pe	olice Div.	844-2	10	Month	Day 11	93	Month		Day	=	Year
APPOIN	ITMENT:		CHANGE:			15.0	SEPARA	TION	12		14
			Ī								
) <del></del>	Full Time			Promotion			<u> </u>	Resignation, F	leason		
2	Part Time		2 De	emotion							
3	Temporary, Ends		3 14	ateral Change							
4	Trainee			_			2	Retirement			
200			4 Tr	ansfer within Age	ency		3	Deceased			
	to		Fr	om		[	40.00	200 25 D			
5	Former Employee		5 Re	einstatement			4	Dismissal			
94	Last Year Worked	<del></del>		on otatomorn		- 1	5	Probationary			
	BARGAINING UNIT	Yes	Fr	om				523867			
	UNION NAME NOP		6 Ch	nange in Status			6	Lay Off			
			_	-			7	Job Abolishmer	nt		
	LOCAL NO.		FN	From			8	Dischille			
	DATE CLEARED BY POL	ICE 1/3/33	7 Na	ame Change from	1		8	Disability			
POSITIO	DN:		]				9	Military Leave	to		115
<u>y</u>	New		_				**	Lanua of About			
2	Reclassification		8 Wo	ork out of Classifi	cation, and		10	Leave of Absen	ce		
178000-000			da	te			11	Suspension			
3	Replacement			MI 45		l					
	(Last Held By)	-		mer (Specily)			12	Other (Specify)			
			Date of Last E	valuation			Evaluation	Score			
	DATE		Date of Last W	Vage Increase			Percent of	Last Increase _			
FROM: Ti	tle/Classification	Step	Hourly Rate		nnual Salary			Division/Estate		COST C	ENTER
					-		•				
TO: Ti	tle/Classification	Step	Hourly Rate	A	nnual Salary	Di	enartment / F	Division / Estate	(Cott)	COST	ENTED
No	n- Comm. Sec.	•	35.6		\$11,648.00			Div.	3111		
					51 -501 0 0 0		1011	J≌ BiV.	3700	210	1
NOTES:	(1) Attach Copy of Term				ustify Position						
REMARK	s:runoing	Source: Cor	np-1100 ar	ant, lor	oplace Gar	rison	Securi	ty.			
		(	44 . 19	Coope to	20010 110	20.0410	M A	/			
		Δ		3 - 17 - 11 - 1	000 dia	- 07475	-71 H-41	The second second			
-											
DE001111	/							- 3			
RECUMINI	ENDED: YES	NO			RECOMMEN	IDED: Y	'ES	NO	<del></del>		
Ohicia	3 5	7.	Slavor	*/P574	Min	for .	7. 6	a part of the same		1/12	2/9
Chief of Per	orm	·	Date		Department/Di					/ D	)até
HECOMMI	ENDED: YES	NO	1		RECOMMEN	DED: Y	'ES	NO			
/	wild - Com	Lucian	_ 1/12/4:	3	_						
Budget Mar	ager Fred		Date		Department / Di	vision/Estel	te		<del></del>	0	ate
1		APPROVED:									
						- W -					

## Cuyahaga Metropolitan Housing Arthority REQUEST FOR PERSONNEL TRANSACTION

NAME:	Last	First	Middle		8	OCIAL SEC	URITY NO.			OF BIRT		及 Black - White	SE
Sty:	les	Paul	A.						ionth 7	Day 5	63	- Hispanic - Asian - Other	:   <del>(</del> M}/
ADDRESS.	Street		City		S	itato	7	Zin		DU	NE NO		RESIDE
													Y/N
DEPA	RTMENT / DIVISIO	N/ESTATE	COST CENTER	1	Month	REQUES	T DATE ay	Year	Monti		ECTIVE D		Vone
Police	e Divisio	n	844-210	3		23		93	3	•	15	93	Year
APPOINTM	AENT:	=	CHANGE:			Œ	4	SEP	ARATION:				
	Full Time		1.	Promotion					1. Re	signation.	Reason		
2.	Part Time		2	Demotion					_				
3.	Temporary, Ends		3.	Detail					2 B	etirement			
4.	Trainee		4.	Transfer w	ithin Age	ncv	50						
		to			-	,		-	3. D	eceased			
5.	Former Employee	•	5.	Reinstater				50	4. Di	smissai			
_	Last Year Worked	=		From				_	5. Pr	obationar	/		
	Bargaining Unit		6.	Change in	Status				6. R	eduction in	n Force		
	Union Name		7.	Salary Inc	rease					b Abolish			
	Local No.	<u> </u>	0	Work out	of Classif	ication			/. 50	D ADOIISI	III OI IL		
N	Date Cleared Employment Scre	ening	XX 9.	Other (Sp	ecify)P	ay Ind	crease	-	8. Di	sability			
POSITION:	W				**				9. M	ilitary Lea	/e		
1.	New (attach posit	ion description)							10. Le	ave of Ah	eance		
2	Reclassification												
3.	Replacement							_	11. Su	spension	3		
	(Last Held By)							-	12. O	her (Spec	ify)		
			Date of La	st Evaluation	1			Evalu	uation Score	9			
	DATE								ent of Last				
FROM: Titl	le/Classification	Step	Hourly R			nual Salary	W1	.I	ent/Divisior		Ext.	COST CE	ENTER
Non-Co	omm. Sec.	Officer	\$5.60	\$1	1,64	8	Police	e Diy	visio	).	3900		
	e/Classification	Step	Hourly R	ate	Anı	nual Salary		•	ent/Division		361-	COST CE	ENTER
Comm.	Sec. Off	icer	\$7.60	\$1	5,80	8	Police	e Div	visio	n	3700		
	(1) Attach Copy					(2)	) Justify (if a	requestir	ng position	s in exc	ess of app	proved bu	dget)
REMARKS	s: <u>Has met</u>	: all oua	alification	is to	be p	laced	in an	arme	ed sta	atus.			
											_		
<u></u>					22.74								
REQUEST	TED RV:			DATE		UDGET M	ANACED	9.	277				-
NEQUEST	יום פוי			DATE	В	OUGE! M.	ANAGEH		,			DAT	E
-		7 /2		2/22/	42	11/18	lu.	111	LIK		tarre	3/2	4/0
APPROVE	ED: (DEPT/DIV/E	ESTATE)		DATE	_ د <u>_</u> P	ERSONNE	L OFFICER	(				DAT	E
							·						

**EXECUTIVE DIRECTOR** 

DATE

## Cuyah a Metropolitan Housing Aut ority

NAME:	Last	First	Middle	SOCIAL C	ECUDITY NO	· D/	TE OF BIRTH	4 <sup>3</sup>	ABlack - White	SEX
	مرسودوري ميدامر	C ALD				Month	Day	Year	- Hispanic	
ADDRESS:	STYLES.	P'AUL	City	SA-1-	*9:	07	0.5	A.S.	- Other	М
ADURESS.										RESIDE Y/N
DEPA	RTMENT/DIVISION/E	STATE	COST CENTER	REQUE	ST DATE	T'	EFF	ECTIVE DA	ATE	- 4
	Police Di	Lv.	853-210	Month 00	Day 96.	Year Me	onth 29	Day ∀⊜	,	/ear
APPOINTM	ICALY.		CHANGE:							
						SEPARATIO				
	Full Time		1 Prom	otion		1.	Resignation. I	Reason		
2.	Part Time		2 Demo	tion						
3.	Temporary, Ends		3. Detail							
4.	Trainee		2				Retirement			
	to	·	4. Iranst	er within Agency		3.	Deceased			
5.	Former Employee		XXX 5. Reins	tatement		4	Dismissal			
			From				5-5			
-	Last Year Worked					5.	Probationary			
	Bargaining Unit				191	6.	Reduction in	Force		
	Union Name		7. Salary	/ Increase		7	Job Abolishn	nent		
	Local No		8. Work	out of Classification			OOD / DONOITH	norte		
	Date Cleared Employment Screening		9. Other	(Specify)		8.	Disability			
POSITION:			s. Otter	(Эреспу)		9.	Military Leav	e		
1.	New (attach position d	escription)				> 10	Leave of Abs	ence		
2	Reclassification					10.	LOGIC OF NO.			
3	Replacement					11.	Suspension			
	(Last Held By)				İ	12.	Other (Speci	fy)		
	(Last Floid By)			05						
				ation		Evaluation Se	core			
	DATE		Date of Last Wage	Increase		Percent of La	ast Increase _			
FROM: Title	e / Classification	Step	Hourly Rate	Annual Salary	, De	epartment / Divis	sion/Estate	Ext.	COST CE	NTER
TO: Title	e/Classification	Step	Hourly Rate	Annual Salary	, De	epartment / Divis	sion/Estate	Ext.	COST CE	NTER
	PATROLMAN		\$9.38		.40 F		i			
NOTES: REMARKS	(1) Attach Copy of T				2) Justify (if req	22			210 roved bud	lget)
-		TEMPURA	RY REDUCTION	AT SPECIA	al porto	E RATE	DI ID CI I	ANT	TO TH	C
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	210-000			and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	GIVE OF THE	7111 920	00-140	200-7	0 2000	
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		<u></u>	EVECUTIV	E DIRECTOR		DATE				

# 

#### **CMHA Police Department Personnel File**

**SSN# EOD:** <u>1/15/93</u> Name: PAUL STYLES

Section 1	Section 2
Personnel Transaction Form (PTF)	Employment Application/Resume Employee Personal Data Profile Employee Reference Checks Address Change Forms
Section 3	Section 4
Oath of Office Certifications	Performance Evaluations Career Counseling Forms
Section 5	Section 6
Letter of Commendation/Awards Secondary Employment Disciplinary related memos (if appl.)	Pay Option Forms Miscellaneous Memos Equipment Issued

#### **SEPARATE FILES:**

Medical:

**Psychological Evaluations** Injury to Person Reports

Pre-Employment Physical Questionnaire

Drug Screens – MVA's/Injuries

Confidential:

Background Investigation Composite-

Criminal History & Driving Record

Home Visit

**Neighbor Interviews** Credential Verification **Prior Work History** 

Application Form Information Verification

Personal References

Voice Stress Analysis Results

**BCI Fingerprint Card** 

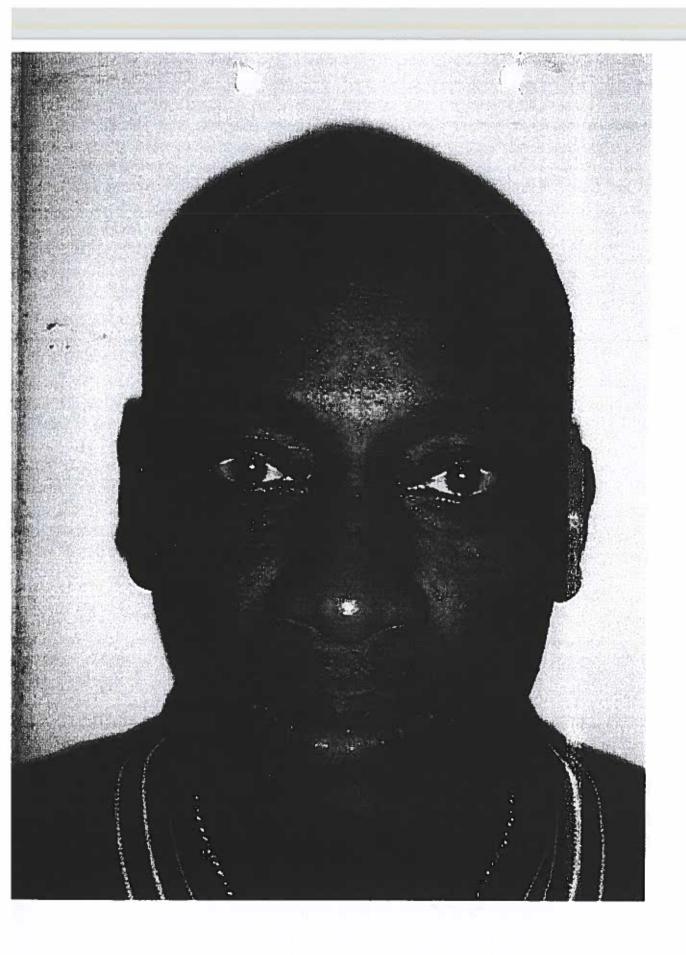
Training:

Police Department Orientation **In-service Training Documents Training Certifications** 

Discipline:

All disciplinary actions placed in one (1) main alphabetic file that is purged periodically to remove documentation that is over two

(2) years old



Styles.

APPLICATION FOR EXPLONERT
WAME STYLES PAUL TELEPHONE: HOME BUS.241-1494
ADDRESS CITY & ZIP _
ARE YOU BETWEEN THE AGES OF 18 AND 70? YES V NO LING, MILE
SOCIAL SECURITY NO.
POSITION DESIRED POLICE OFFICES, MINIMUM SALARY 7.00 Perhy FOR EMPLOYMENT 1/5/92
DO YOU HAVE A CHAUFFEUR'S LICENSE? // OTHER LICENSES?
Name of Grade School & City Name of High School & City Name of College & City  Augubou CLEV (AND JOHN HAY CLEVIAN Degree Major  Years 1 2 3 4 5 6 7 8 Years 1 2 3 4  OTHER SPECIAL TRAINING MAFTIAL ASTS, OPOTA TRAINING
IF UNION MEMBER, GIVE NAME
WORK HISTORY (Complete for 5 years. Show periods of unemployment, if any)
Name and Address of Employer Dates Job Title Supervisor Salary Reason for Leaving
SALVATION Army 6/92 Councelor John 16 Per LACK-01- WORK
19/9/2   1/6 (derky)
Clevel And YMCA 880 DIRDON MEXOSE FIRTY
Third Last From Started
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To Left
Fourth Last From Started
To Left
FURTHER DETAILS REGARDING YOUR WORK EXPERIENCE
OTHER EXPERIENCE THAT QUALIFIES YOU FOR THE POSITION HAND GUN, ShOT GUN TRAINING, COR, FIRST AID.  CAN ABOVE EMPLOYERS BE CONTACTED FOR REFERENCES? YES NO WHY NOT?
HAVE YOU OR ANY MEMBER OF YOUR FAMILY WORKED FOR C.M.H.A.? YES NO
WHO WHERE
ARE YOU PRESENTLY OR HAVE YOU EVER BEEN A RESIDENT OF PUBLIC HOUSING? YES NO
WHERE HOW LONG
THE FOREGOING ANSWERS ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF
DATE 1/130/92 APPLICANT'S SIGNATURE JAWL A TYPE
Cryahoga Metropolitan Housing Authority is an equal employment opportunity employer. An appointment is conditioned upon satisfactory results from the pre-employment physical examination and background investigation.

	ACHINES	[H		
GUAGES <u>N/A</u>		SPEAK	READ	WRITE
i	APPLICATION FOR MA	INTENANCE PO	SIVIONS	
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PERSONAL REFERENCES:		low Al	,	TEL 621-8095
NAME MIKE CrAWFOR	ADDRESS C	(City & Sta	ate)	<del>-</del>
NAME TOO MUCILLY	ADDRESS 314	5. W 46	77	TEL 634 5965
10x11 30C 1110CO110		(City & Sta	ate)	
NAME GrEG MAYO	ADDRESS 210	8 PAYNE (City & Sta	ate)	TEL 20171414
	(Applicant: Pleas			
	(THIS SECTION I	FOR AGENCY U	SE ONLY)	
	INTERVIEWER			
APPEARANCE		PERS	YTLIANO	
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## EMPLOYEE CHANGE OF NAME OR ADDRESS FORM

Name: Paul A. Styles	
Social Security Number (Last 4 digits):	
Department: Police & Security	
New Name:(Please attach appropria	ate documentation)
New Address:  Stree	
City/State/Zi	ip Code
Telephone Number:	
Effective Date:09AUG17	
Employee Signature	24AuG17 Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

**CMHA** 

**Attention: Human Resources Department** 

8120 Kinsman Road Cleveland, Ohio 44104 Fax: (216) 348-8236

08/24/2017 16:09 Serial No. A79KO11003554 TC: 58963

Addressee	Start_Time	Time	Prints	Result	Note	
HR	08-24 16:08	00:00:14	001/001	OK		

Note

rms:Timer TX, POL:Polling, ORG:Original Size Setting, FME:Frame Erase TX, DPG:Page Separation TX, Alx:Mixed Original TX, CALL!Manual TX, CSRC:CSRC, -Wy:Forward, PC:PC-FAX, BND:Double-Sided Binding Direction, Sp:Special Original, -CODE:F-code, RTX:Re-TX, RLY:Relay, MBX:Confidential, BUL:Bulletin, Sip:SIP Fax, LPADR:IP Address Fax, I-FAX:Internet Fax.

Result OK: Communication OK. S-OK: Stop Communication, PW-OFF: Power Switch OFF, TEL: RX from TEL, NG: Other Error. Cont: Continue. No Ans: No Answer. Refuse: Receipt Refused. Busy: Busy, M-Full: Memory Full. LOUR: Receiving length Over. POWR: Receiving page Over. FIL: File Error. DC: Decode Error. MDN: MDN Response Error. PRINT: Compulsory Memory Document Print; DEL: Compulsory Memory Document Send.



#### EMPLOYEE CHANGE OF NAME OR ADDRESS FORM

Name: Paul A. Styles
Social Security Number (Last 4 digits):
Department: Police & Security
New Name:(Please attach appropriate documentation)
New Address: Street
City/State/Zip Code
Telephone Number:
Effective Date:09AUG17
Poul A. Ttyt  Employee Signature  Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

**CMHA** 

**Attention: Human Resources Department** 

8120 Kinsman Road Cleveland, Ohio 44104 Fax: (216) 348-8236



## Cuyahoga Metropolitan Housing Authority

1241 West 25th Street • Clevelana, Ohio 24113 Phone: 216/348-5000 • Fax: 216/396-0336

#### CHANGE OF ADDRESS FORM

EMPLOYEE NAME: PAUL STYLES	
SOCIAL SECURITY #:	
NEW ADDRESS: SAME	
STREET	CITY/STATE/ZIP CODE
TELEPHONE NUMBER:	
ži iš iš	Paul Styles
	EMPLOYEE SIGNATURE
	7-5-95 DATE

CC's Scheaby



Court From a Charksman - Faren Coart (18-2) assimption of the From per - Or Consule a Sousa - Focen Toursena on the Colombia Coart (18-2)





## EMPLOYEE CHANGE OF NAME OR ADDRESS FORM

Name: JAUL STYLES
Social Security Number (Last 4 digits):
Department: Police
New Name: (Please attach appropriate documentation)
New Address:  Street
City/State/Zip Code
Telephone Number:
Effective Date: 03 NOVY
Employee Signature Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

**CMHA** 

**Attention: Human Resources Department** 

8120 Kinsman Road Cleveland, Ohio 44104 Fax: (216) 348-8236 - CMHA -

## Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cieveland, Ohio 44113 Phone: 216/348-5000 • Fax 216/696-0636

#### CHANGE OF ADDRESS FORM

EMPLOYEE NAME: Paul 4.	STYLES
SOCIAL SECURITY #:	
NEW ADDRESS:	
TELEPHONE NUMBER: V/A	CITY/STATE/ZIP CODE
	Sal 4. Styles
	EMPLOYEE SIGNATURE
8	1-21-96 DATE



## REQUEST FOR INFORMATION

\_\_\_ RE: \_\_\_\_\_

You are hereby authorized to release and give to the Cuyahoga Metropolitan Housing Authority any and all information in your possession.
I hereby waive any privilege I may have to said information and to said Cuyahoga Metropolitan Housing Authority.
NO U. 30 1992 * Part A- Styles
HAVE YOU EVER SERVED IN THE MILITARY? YESNO
DATE: FROM N/A TO N/A
HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO
CIRCUMSTANCES:

### N O T I C E

THIS COMPANY COMPLIES WITH THE IMMIGRATION REFORM & CONTROL ACT OF 1986.

APPLICANTS WHO ARE OFFERED EMPLOYMENT WILL BE REQUIRED TO PRESENT CERTAIN DOCUMENTS ESTABLISHING THEIR IDENTITY AND ELIGIBILITY TO WORK IN THE UNITED STATES OF AMERICA.

- 1. YOUR SOCIAL SECURITY CARD OR BIRTH CERTIFICATE AND A VALID STATE ISSUED DRIVER'S LICENSE OR OTHER STATE ISSUED I.D. CARD WILL SUFFICE.
- 2. IF THE ABOVE DOCUMENTS ARE NOT AVAILABLE, IT IS POSSIBLE TO SATISFY THE REQUIREMENTS OF THE LAW WITH OTHER SPECIFIED DOCUMENTS. ASK YOUR EMPLOYMENT INTERVIEWER ABOUT THESE OTHER DOCUMENTS IF YOU DO NOT HAVE THOSE LISTED IN #1 ABOVE.

WE WILL MAKE A RECORD OF THE DOCUMENTS YOU PROVIDE AND MAINTAIN COPIES OF SUCH RECORDS IN OUR FILES. IN ADDITION, THE IMMIGRATION AND NATURALIZATION SERVICE (INS) REQUIRES YOU TO COMPLETE INS FORM I-9, ATTESTING UNDER PENALTY OF PERJURY THAT THE DOCUMENTS YOU SUBMIT ARE GENUINE.

By Authority of the Board of Education of the City of Cleveland, Ohio

## John Kay Kigh School

has awarded this

## Middle

Paul A. Styles

who has satisfactorily completed the requirements prescribed for graduation from the Public High Schools of the City of Cleveland, Ohio
June 18th. 1982

Superintendent of Schools

Referred

Trincipal

Alva Bourd of Education
Paul Yarolian
Trensurer



Exchand Security Institu This 240 Hour Certificate is Awarded to

Paul Styles

For Satisfactory Completion of Private Security Officer Training

This 04 Day of December 19 in Cleveland, Ohio

Jess of Ghason President

000053746

## Safeguard Security Institute

"Professional Private Security Training"

Date 12/14/98

To::Whom it may concern

Re: Private Security

This letter will serve to introduce <u>fact Styles</u> as a graduate of Safeguard Security Institutes 120 hour Ohio Peace Officers Training Council course.

This graduate also completed all of the training, exams, and qualifications for fire/arms.

This letter will be in effect until said graduate has received his/her certificatifs from the Ohio Peace Officers Training Council in London Ohio.

Respectfully,

Sandee K. Gleason Program Director

P.S. Transcripts available upon request.

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AGILITY

TEST

SCORESHEET

1/10:	A
DATED:	
TIME: 12:8m	
NAME OF APPLICANT:	PAUL STYLES
SIGNATURE OF APPLICANT:	Taul Styles
SSN:	DOB: 7/5/13

1.	TIMED	ON	-	MILE	RUN
----	-------	----	---	------	-----

- THREE FLIGHT STAIRCLIME 2.
- SEDAN PUSH
- DUMMY EXTRACTION, CARRY

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FAIL

MILE RUN, LAP TIMES

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- 3. 5:46
- 4. 7:41

TESTING OFFICER NAME AND BADGE #.

WINTESSED BY: 7 40 mm/f 622

CC: PERSONNEL DEPT. DIVISION FILES

DATE:

9 January 1993

TO:

PROSPECTIVE EMPLOYEE

FROM:

James E. Tufts, Lieutenant

Police Division

SUBJECT:

PHYSICAL AGILITY TEST

I understand that I must report to Cuyahoga Metropolitan Housing Authority Police Headquarters on the date specified if I wish to be considered for Employment by the Police Division of the Cuyahoga Metropolitan Housing Authority.

I have been informed that the date that I must take the Physical Agility Test is Saturday, January 9, 1993 at 1200 hours (noon).

Wear the appropriate clothing as the test will be held outside regardless of the weather and consists of (but is not limited to):

- 1. A timed One (1) Mile Run (13 Minutes Maximum).
- A timed Stair Climb (45 Seconds, 3 Flights of Stairs, Up/Down).
- 3. A Vehicle Push.
- 4. A Dummy Extraction and Carry.

About 1 1/2 hours of time is expected to be required for the testing.

Signature

Date/Time

f. 4

Witnessed by

JET: jh

Please read the following before signing:

## AUTHORIZATION TO DO BACKGROUND CHECK, FOR RELEASE OF CONFIDENTIAL INFORMATION AND WAIVER OF PRIVACY RIGHTS

nd its agents or employees to conduct a background check on me and authorize the release of pertinent information oncerning me from any source, including, but not limited to, past employers.

he undersigned applicant, in granting this application, hereby specifically WAIVES any right to PERSONAL PRIVACY e or she might have in the above information and RELEASES the City of Cleveland and any person or agency from NY LIABILITY WHATSOEVER resulting from the release of such information.

NOTE: Public Law 91-508 requires that we advise you that a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. ROUTINE INQUIRIES MAY INCLUDE PERSONAL INTERVIEWS WITH FRIENDS, NEIGHBORS, REFERENCES AND PAST EMPLOYERS. Upon written request, additional information as to the nature and scope of a resulting report, if one is made, will be provided.

y signature below certifies that my responses on the Application for Employment are true and complete to the best of y knowledge. I understand that employment is based on completion of all pre-employment requirements and procedures hich may include:

- 1. Interviews
- 2. Urine drug screen
- 3. Provision of proof of identify and employment eligibility for work in the U.S.
- 4. Educational and reference checking
- 5. Testing (if applicable to the position for which you are applying).

addition, I understand that any offer of employment will be contingent upon the results of a physical examination by uthorized medical personnel of or for the City of Cleveland.

understand and agree that any falsification or omission, either on this form or in response to questions asked during y interview or examination process or on employment forms I subsequently complete, including I-9 forms, shall be grounds r immediate termination, no matter when the falsification or omission is discovered.

4-19-96

Date

Signature

Eligibility Cist 4 I	LI e	YMBNT AD	· Date	11 P
LOCATION:	2685 E79	t h	E 5	
NAME OF EMPLOYER:	C.M. H. H.	Police Dept.		#
NAME OF APPLICANT:	Paul A. S.	tyles		
DATE OF BIRTH: 7	-5-63	s.s.number:		
CURRENT EMPLOYMENT:	( ) DATE HIRED:	POSI	TION: Police Office	en
PRIOR EMPLOYMENT:	(K) FROM: 1-9	3то:	3-96	
PRIOR EMPLOYMENT:  SUPERVISOR: L4. D	aukins 1567	Matax		<del></del>
	/ ====================================	<i>V</i>		===
ADDRESS OF RECORD AT I	PLACE OF EMPLOY	MENT.	Dalice MECEN	
DATE OF EMPLOYMENT:	01-115/93	POSITION HELD:	PONCE UPACCE	T
TERMINATED ON: 03 29	90 REASON FOR	TERMINATION:	1407	GE
	(1944 - 1944)			
ELIGIBLE FOR REHIRE:	TO SECOND		•	
REHIRE DATE:	POSITION HI	ELD:		
HOURLY RATE:	SALARY:			
QUALITY OF WORK:		24	•	
	ė			
DEPENDABILITY:	<i>*</i>	<u></u>		
(FAS) Days Missed:				107
Tardiness:	2			
(REMARKS: HARD WORKER			L WITH OTHERS	Y
VERY DETICATED				
		= 5.		
		1,1	D.M.	100
INTERVIEWED:		POSITION OR DE	// PT:/	
		Investigator:	agx	23-43-43-43
		ident. Number:_	424	1,-2417





#### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY

POLICE DIVISION - OFFICE OF THE PATROL COMMANDER

2685 E. 79th St.

Cleveland, Ohio 44104 (216) 361-3709

Secured FAX: (216) 361-2392

FAX TRANSMITTAL FORM TYPE:

Keith Lauerhaus, Lieutenant, Cleveland Police Department TO:

3rd District Detective Bureau O.I.C.

FROM: Stanley C. Murrey, Patrol Commander

DATE: 18 MAR 99

SUBJECT: CMHA Police Report re: Arrest of Jermaine D. Davis

NUMBER OF PAGES INCLUDED IN THIS FACSIMILE:

Lt. Lauerhaus:

The following is the report regarding the arrest of Jermaine D. Davis. Also, confirmation records of two FAXES to the Cleveland Police Department to lines 5705 and 5355 on 18 MAR 99 at 0946 hrs.

The newly promoted supervisor merely overlooked faxing the material due to the amount of work he was doing at the time. However, he does understand the importance of faxing the reports as soon as possible in the future.

As a result of your complaint, I have discovered that the report was sent to the 3rd District Strike Force (5705) instead of the 3rd District Detective Bureau (5315).

Should you have a future problem receiving reports, contact me so that I can take the necessary steps to prevent re-occurrences.



## Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cleverand, Ohio 44113
Phone: 216/348-5000 • Far 216/696-0636
POLICE DIVISION
2685 E. 79th Street, Cleveland, OH 44104

	has applied for the position of
within this D	epartment and has given your name as a
former employer. We would	appreciate your cooperation in completing the
questionnaire on the backsi	de of this letter.
Your reply will assist us i	n determining the applicant's suitability for
employment and will impose	no responsibility on you.
All responses will remain s	trictly confidential and will not be shared with
the applicant.	
91	
	Sincerely,
	Darlice S. Ogletree
~	Chief of Police
	Miles T. Cobbs
	Deputy Chief of Police
	bepaty thie, of Police
- AUTHORIZATION	FOR RELEASE OF CONFIDENTIAL INFORMATION
I hereby authorize the recip	pient of this letter to release and provide
any and all pertinent inform	mation regarding my employment history to the
Cuyahoge Metropolitan Housi	ng Authority Police Department.
Date: 12/4/92	Signature of Applicant: Mul A. Stylos

#### Board of Commissioners

Louise Harris, Chairwoman • Karen Coats, Vice-Chairwoman

Dwayne Browder • Dr. Consuela Sousa • Robert Townsend, II

Claire E. Freeman, Executive Director



DATES EMPLOYED:	DATE SEPARATED:	
	REASON FOR LEAVING:	
WOULD YOU REHIRE? YES NO		
IF NO, PLEASE STATE REASONS:		
	MANCE APPRAISAL  EXCELLENT GOOD FAIR POOR	
QUALITY OF WORK		
QUANITY OF WORK		
LEARNING ABILITY		
COOPERATION WITH SUPERVISORS		
COOPERATION WITH FELLOW EMPLOYEES		
INITIATIVE		
ATTENDANCE		
PUNCTUALITY		
ABILITY TO WORK WITHOUT CLOSE SUPERVISION		
ADDITIONAL COMMENTS:		
DATE:	SIGNATURE:	
	TITLE:	

ALL INFORMATION PROVIDED IS STRICTLY

\*\*\*\*\*C O N F I D E N T I A L\*\*\*\*\*



## Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cleverand, Ohio 44113

Phone: 216/348-5000 • Faz 216/696-0636

POLICE DIVISION

2685 F 79th Street Cleveland OH 4410

2685 E. 79th Street, Cleveland, OH 44104

Dear Sirs:

has applied for the position of
within this Department and has given your name as a
former employer. We would appreciate your cooperation in completing the
questionnaire on the backside of this letter.
Your reply will assist us in determining the applicant's suitability for
employment and will impose no responsibility on you.
All responses will remain strictly confidential and will not be shared with
the applicant.
Sincerely,
· ·
Darlice S. Ogletree
Chief of Police
Miles T. Colles
Miles T. Cobbs
Deputy Chief of Police
AUT.
AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION
I hereby authorize the recipient of this letter to release and provide
any and all pertinent information regarding my employment history to the
Cuyahoga Metropolitan Housing Authority Police Department.
Date: 12/9/92 Signature of Applicant: Naul A. Stufe
Date: 1-9-93 Witness to signature: 5/1/

#### **Board of Commissioners**

Louise Harris, Chairwoman • Karen Coats, Vice-Chairwoman

Dwayne Browder • Dr. Consuela Sousa • Robert Townsend, II

Claire E. Freeman, Executive Director



DATES EMPLOYED:	DATE SEPARATED:				
	REASON FOR LEAVING:				
WOULD YOU REHIRE? YES NO					
IF NO, PLEASE STATE REASONS:					_
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PUNCTUALITY					
ABILITY TO WORK WITHOUT CLOSE SUPERVISION					
ADDITIONAL COMMENTS:					
					_
DATE:	SIGNATURE:				-
	TITLE:				_

ALL INFORMATION PROVIDED IS STRICTLY

\*\*\*\*\*C O N F I D E N T I A L\*\*\*\*\*

#### APPLICANT STATUS SHEET

NAME: SAULA. STYLES

ITEM	DATE COMPLETED
1. APPLICATION PACKET	12 4.92 xh
2. INTERVIÉW	1-8-93
3. PSYCHOLOGICAL TESTING	1-8-93
4. PHYSICAL EXAMINATION	1-8-93
5. PHYSICAL AGILITY TEST 1-9-93	
6. BACKGROUND INVESTIGATION	
7. COMMITTEE RECOMMENDATION	
FORWARDED FOR HIRE	
REJECTED/LETTER SENT	

COMMITTEE CHAIRMAN SIGNATURE

SEB:cg

103090cg

ow hold rend of theaver traffic word cleaved Warys 8-43

DATE	

## BACKGROUND AND RECORDS RELEASE STATEMENT

and all agencies having inform the undersigned to furnish ful duly authorized representative Housing Authority who presents authorization specifically inc examination and reproduction p specifically includes the requ agency, doctors, hospitals wit furnish their records, evaluat This authorization is valid for aforementioned is under the emp Housing Authority.	this authorization. This ludes authority to release for ertinent records and reports, and est that any law enforcement h knowledge of my background freely ions and/or opinions.
NICKNAME:	MAIDEN NAME:
DOB: 1/5/62 SSN	EYES: BYOWN HAIR: BLACK
HGT: 5 FT WGHT: 8"	EYES: Brown HAIR: BLACK
Sworn to and subscribed before of, 19	me, a Notary Public, thisday
58 28 77	NOTARY PUBLIC - SIGNATURE

SEAL MUST BE AFFIXED

BIOGRAPHICAL INFORMATION NAME: PRESENT ADDRESS: FORMER ADDRESS: MARITAL STATUS: SPOUSE'S NAME: SPOUSE'S SS#: DATE OF BIRTH: SPOUSE'S EMPLOYMENT: NUMBER OF DEPENDENTS: DEPENDENT'S NAME/DATE OF BIRTH: LIST YOUR MOST SIGNIFICANT ACCOMPLISHMENTS DURING THE PAST FIVE (5) YEARS: BACK TO school EDUCATION. DRIVER'S LICENSE NUMBER: HAVE YOU RESIDED IN THE STATE OF OHIO FOR AT LEAST 12 MONTHS? YES\_\_\_\_\_\_\_ IF NO, WHERE? I certify to the best of my knowledge the above statements concerning my biographical background are true.

#### POLYGRAPH (LIE DETECTOR) EXAMINATION RELEASE

In consideration of my being considered for employment by the Cuyahoga Metropolitan Housing Authority, I hereby agree to take any pre-employment polygraph and/or lie detector examination required by the Authority and to take such additional polygraph and/or lie detector examination as may be required by the Authority at any time.

I further agree that my refusal to take any such examination when requested by the Authority will constitute grounds for my dismissal.

DATE: 12/4/92

Signature

Witness

State of Ohio	)	ş			
County of Cuyahoga	)		-	8	
P	HYSICAL AG RELI	ILITY EXA EASE FORE			
I certify that I had aggravated by my pa Examination.	ve no medio rticipatio	cal probon in the	lems which C.M.H.A. F	would be Physical Ag	ility
I further certify t	hat I am p	resently	in good he	ealth.	
I hereby release C. resulting from my p	M.H.A. from articipati	m any cl on in th	aims of per e Agility (	rsonal inju Examination	ry •
		Stgna	ful A. ture	Styles	2/4/ Date
Sworn to and subscr	ibed befor	е те, а	Notary Pub	lic, this_	
day of	, 19	•	,	·	
	A				
		Nota	ry Public	<del>-</del>	
			ommission	Expires	

(SEAL MUST BE AFFIXED)

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DEPARTMENT OF SAFETY and SECURITY

HAVE YOU EVER SERVED IN THE M	ILITARY?	- · · YES-:	- NO: 0 - 10	
DATE: FROM	TO			9 0
HONORABLE DISCHARG				
STILL ACTIVE:				
OTHER:			• • • •	
HAVE YOU EVER BEEN ARRESTED?		YES:	No :	
CIRCUMSTANCES:	· · · · · · · · · · · · · · · · · · ·	<del></del>		·
·	_ <del></del>		·	
		·		3.6
		•	(44)	-
HAVE YOU EVER BEEN CONVICTED?_		YES :	NO:	
CIRCUMSTANCES:			Ð	13
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		<u> </u>	•	
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CMHAPD:11 February 1980 Revised

DSO:JER:jh

## FOR USE by CMHA ONLY!

APPLICANT PROCESSING (OFFICE USE ONLY)

NAME	/ 7 .				
ALL FORMS COMPLETED	Yes		_	10	
ritten Examination S	core:_	14			
Sychological Examina	tion So	ore: _			
Physical Agility:	P	assed		Faile	d
Instruction Cover (ST	OP)	4		*	
l. Selection Process			Yes		No
<ol> <li>Application for E</li> <li>Binding Contract</li> </ol>			ed: Yes		No
4. Military Informat	ion Si	aned:	Yes Yes		No No
5. Biographical Info	rmatio	Signed	: res		
5. Pre-Employment Ph	ysical	Signed:	Yes		No No
<ol> <li>Polygraph Waiver</li> <li>City of Cleve. P.</li> </ol>	Signed:	: asa Sia	Yes		No
9. Background/Record	s Relei	ase Sian	ed: Yes		No No No No
<ol><li>Physical Agility</li></ol>	Release	e Signed	: Yes		No
l. Copy of Position	Descri	o. Signe	d: Yes		No
<ol> <li>History of C.M.H.</li> <li>Pay &amp; Fringe Info</li> </ol>	A. 5191	red:	Yes_		No
3. Pay & Fringe Info	rmatio	i Signea	: Yes		No
HECKED BY:				DATE:	
EVIEWED BY:				DATE:	
JALIFIED:			UAL IF IEI		
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OMMENTS:					
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#### STOP

Do not fill out this application until you have <u>completely</u> read these instructions.

#### READ AND SIGN BELOW

This application packet is to be completed at this time.

This application and all parts thereof must be printed or typed in black ink, except the signatures that also must be in black ink.

All sections must be completed.

All documents that are to be notarized must be notarized.

Addresses for all <u>PAST EMPLOYERS</u> and <u>PERSONAL REFERENCES</u> must include <u>CITY and ZIP CODE</u>.

Prior to your application being processed, you must submit photocopies of:

- a. High School Diploma or Equivalent
- b. Basic Police Training Certificate
- c. Valid Ohio Drivers License

Finally, I attest that all the facts set forth-in this application for employment are true and complete.

Further, I understand that any missing items, false statement or deliberate misleading information may cause this application to be rejected or not processed at all. I also understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant

Date

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE AND SECURITY

#### SELECTION PROCESS

#### 1. APPLICATION:

An application shall be required to complete an application packet of forms provided by C.M.H.A. Such application packet shall be retained by C.M.H.A. in the applicant's personnel file should he/she become an employee of C.M.H.A. If an applicant has not been hired by C.M.H.A. within six (6) months of the submission date of his/her written application, the application shall be deemed null and void and shall be discarded. Such applicants may reapply at anytime.

At no time shall application packets be issued until after advertisement in the local major newspaper of Cuyahoga County, and only for one (1) week subsequent to the date of the advertisement.

#### 2. SCREENING:

- A. Upon receipt of the application packets, they shall be screened by a committee, appointd by the Deputy Chief, for completeness and possession of the minimum qualifications.
- B. Those applicants passing Section A shall then be scheduled for an interview and applicants shall be informed to bring verification of Educational and Training possessed. Any unverified item will be omitted and may result in a candidate failing to meet the minimum requirements.
- C. Next shall be the Physical Agility Test consisting of the following events:
  - Weigh In (Weight must be in proportion to height, overweight shall result in disqualification).
  - Sign a Release in order to participate in excercise portion. (Failure to sign shall result in disqualification).
  - 3. Report to the Test Site, upon notification, and pass the following Agility Tests:
    - a. 1 Mile Run 13 minute maximum
    - b. Stair Climb, up and down, three (3) flights of stairs.

- c. Vehicle Push, 100' distance.
- d. Extract a 100 lb. Dummy from front passenger seat of a vehicle, carry dummy 100 ft., without dropping same.
- D. Applicants passing Section C shall then be scheduled for a written examination, consisting of a General Aptitude Appraisal, conducted by an outside contractor.
  - 1. Individuals passing the written examination shall be placed on an eligibility list consisting of a ranking by test score.
  - 2. Such list shall be held valid for a period of twelve (12) months.
  - 3. For every position to be filled, the top five (5) names shall be drawn from the list, and notified as to continued interest. For every declination, one (1) additional name shall be drawn from the list.
  - 4. A complete investigation into the background and family life of each individual drawn from the list shall be instituted; i.e., Arrest, School, Health and Financial Records.
- E. Applicants from the eligibility list shall again be scheduled for the Physical Agility Examination as outlined in Section C, if more than sixty (60) days has elapsed since initial testing.
- F. All applicants must pass a Physical Examination by a C.M.H.A. Physician prior to appointment.

G. Applicants passing all phases of the screening process shall then receive a probationary appointment.

Abolicant Signature

Date



## EMPLOYEE CHANGE OF NAME OR ADDRESS FORM

Name:	Paul Styles	
Social Security	Number (Last 4 digits):	<u></u>
Department:	Police	
New Name:	N/A (Please attach approp	riate documentation)
New Address:		
	City/State/	
Telephone Nur	•	Zip Code
Effective Date:	_19JUL18	
Employee Sign	nture	19 Jul 18 Date Completed

The completed form with the appropriate documentation attached may be faxed or mailed to:

**CMHA** 

Attention: Human Resources Department

8120 Kinsman Road Cleveland, Ohio 44104 Fax: (216) 348-8236



#### **Employee Acknowledgement**

Non-Exempt Employee (paid hourly, eligible for overtime):

Timekeeping Policy-

I acknowledge that I have received a copy of and read the Timekeeping Policy. I understand the Timekeeping Policy and agree to comply with its requirements.

As a non-exempt employee I understand that I cannot work off-the-clock. I understand that it is my responsibility to report all hours that I actually worked and to seek pre-approval of any anticipated overtime, report any missed swipes, and report any additional hours worked using the procedures and forms described in the Timekeeping Policy.

I understand that failure to accurately report all time worked or asking another employee to work "off the clock" is a violation of CMHA policy. I understand that if anyone tells me to report less than all of my working time, or if I become aware of other employees who are told not to report or who do not report all of their working time for any reason, I am required to report this violation of CMHA policy to Human Resources immediately.

If I forget to properly report my working time, I will immediately inform my supervisor, complete the required forms, and submit them to payroll or human resources.

I understand that failure to comply with this Timekeeping Policy may result in disciplinary action.

Exempt Employee (paid salary, NOT eligible for overtime):

Pay Deductions for Partial Day Absences Policy-

I acknowledge that I have received a copy of and read the Pay Deductions for Partial Day Absences Policy. I understand the Pay Deductions for Partial Day Absences Policy and agree to comply with its requirements.

As an exempt employee I understand that it is CMHA's policy that when a salaried employee is absent from work for less than one work day and the employee does not use accrued leave for such absence, a deduction from compensation will be made or the employee will be placed on leave without pay for a period of time which is equal to the employee's absence from the employee's regularly scheduled hours of work on that day.

I understand that it is my responsibility to report all use of accrued paid leave on my timecard. I understand that failure to accurately report my time is a violation of CMHA policy. If an employee believes that an improper deduction has been made, the employee should immediately report this information to the Human Resources Department for investigation. If it is determined that an improper deductions has been made, the employee will be promptly reimbursed for any such improper deduction.

I understand that failure to comply with this Pay Deductions for Partial Day Absences Policy may result in disciplinary action.

Full Name (please print):	y( 577/e)	Date: 17 – 1 – 1 5
Signature:	'. Sty	1000
Department: Police	Job title:	rgest

## HazCom Employee Training Quiz

lame:	: PAINC 577(Q) Date: 12-1-15	SN: <u>&gt;</u>
1)	How many pictograms are recognized by the Globally Harmonized System?	
(	(, a) 8	
01	9	
_	of 12	
	d) 16	
2)	The "Exclamation Mark" pictogram describes:	
iC	(a), Irritant to skin and eyes; skin sensitizer; and, narcotic effects	
y >	(b) Carcinogens; respiratory sensitizers; and, target organ toxicity	
	c) Explosives; self-reactives; and, organic peroxides	
	d) Oxidizers	
3)	The only two (2) signal words found on a label are:	
	a) Danger and Hazard	
	b) Hazard and Warning	
	c) Danger and Warning	
	d) Toxic and Harmful	
4)	Which of the following statements is a good example of a Precautionary Stateme	nt?
	a) Keep container tightly closed	
	b) Wear splash protection for face	
	c) Wash hands after handling	
(	d) All of the above	
5)	How many sections are found in a Safety Data Sheet?	
	a) 8	
	b) 9	
	c) 12	
	(d) 16	
6)	Section 4 of a Safety Data Sheet is reserved for:	
	a) Hazard Identification	
	b) Handling and Storage	
	c) Fire Fighting Measures	
	d) First Aid Measures	

7) Section 1 of a Safety Data Sheet is reserved for:

b) Composition/Information on Ingredients

c) Accidental Release Measures

a) Identification

d) Other Information

#### **CUYAHOGA METROPOLITAN HOUSING AUTHORITY**

#### **ACKNOWLEDGMENT FORM**

I acknowledge receipt of the following Cuyahoga Metropolitan Housing Authority Policy from the Administrative Order 11, section B-VI. The Policy was approved August 5, 2009 and replaces the former section B-VI, Electronic Mail and Internet Access.

Computer Usage Policy

Employee Name (Please Print)

Employée Signature

Date

06 De ( 6 9

Original: Personnel File

#### RECEIPT OF CMHA EMPLOYEE MANUAL

I have received a copy of the CMHA Employee Manual. I understand that the Manual is intended to be informative only, and that the policies, procedures, and benefits that affect my employment.

I further understand that CMHA's policies, procedures and benefits may be changed, disregarded, or terminated by CMHA in its discretion, at any time and with or without notice, except in areas specifically addressed in the collective bargaining agreement.

I agree that I have the responsibility to read and understand the Manual, including CMHA's policies regarding General Harassment and Sexual Harassment. I understand that this Manual supersedes all other employee manuals.

Last 4 digits of SS#

#### Cuyahoga Metropolitan Housing Authority

#### ACKNOWLEDGEMENT OF

### PARTICIPATION IN ANTI-HARASSMENT SUPERVISORY TRAINING

by sigi	ning this lotti	in the space p	provided below y	ou are ackr	iowieaging th	at you
have	participated	in Cuyahog	ga Metropolitar	n Housing	Authority's	Anti-
Harass	sment Super	visory Trainin	ıg, on <u>5/9</u>		, 2003.	The
training	g covered top	oics including h	narassment, sex	ual harassm	ent and work	cplace
violend	ce policies, pr	ocedures, and	law.			
,	1				, ,	
11	20 / 17	to la		5	10/03	

Date

Signature of Employee

## EMPLOYEE NOTIFICATION: REVISED AGENCY POLICIES PER VOLUNTARY COMPLIANCE AGREEMENT

#### **ACKNOWLEDGEMENT FORM**

I, PAUL A. STYLES, have received a copy of the letter dated April 13, 2009 (print name)
describing the following revised policies/forms and how CMHA will implement these revised
policies/forms: Preliminary Housing Application, Reasonable Accommodation Policy/Procedures,
Admission and Transfer Policy/Procedures, Lease Addendum, Effective Communication Policy, and Pet
Policy. I understand that I can review a copy of these policies on CMHA's Intranet. I further understand
this acknowledgment form will remain in my personnel file for the remainder of the Voluntary Compliance
Agreement.

(Employee Signature)

(Last 4 digns or social security number)

19ABro y
(Date)

# VOLUNTARY COMPLIANCE AGREEMENT LETTER ACKNOWLEDGEMENT FORM

I, <u>(AyL</u> <u>STYLES</u> , (print name)	have received a copy of the letter dated August 14, 2008
,	

describing the terms of the Voluntary Compliance Agreement between the Cuyahoga Metropolitan Housing Authority and the U.S. Department of Housing and Urban Development. I understand this acknowledgment form will remain in my personnel file for the remainder of the Voluntary Compliance Agreement.

(Employee Signature)

22 144 UV (Date)

(Last 4 digits of social security number)

### RECEIPT OF CMHA EMPLOYEE MANUAL

I have received a copy of the CMHA Employee Manual. I understand that the Manual is intended to be informative and explain policies, procedures, and benefits that effect my employment.

I further understand that CMHA's policies, procedures, and benefits may be changed, disregarded, or terminated by CMHA in its discretion, at any time and with or without notice, except in areas specifically addressed in the collective bargaining agreement.

I agree that I have the responsibility to read and understand the Manual, including CMHA's policies regarding General Harassment and Sexual Harassment. I understand that this Manual supersedes all other employee manuals.

Employee Name (Print)

## -CMHA

Inter Office Memorandum

# CHANGE OF NAME OR ADDRESS

EMPLOYEE NAME: PAUL A. S	TYLES
SOCIAL SECURITY #:	
NEW NAME:	
(PLEASE ATTACH APPROPRIATE DO	CUMENTATION)
NEW ADDRESS:_	
STRE	ET
1 / 6 0.0	
CITY/STATE	ZZIP CODE
1, 0	
TELEPHONE NUMBER:	
•	GMA
2	2 2 2 2002
Starles	FEB 2 2 2002
100 A /	preservit De
EMPLOYEE SIGNATURE	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY

### CONFLICT OF INTEREST STATEMENT

I have read the attached Conflicts of Interest summary (as extracted from Adminstrative Order #11.11). I have no financial interests nor have I participated in any such activities; and to the best of my knowledge and belief, same is true of all of my close relatives. (Mark either statement [A] or [B], but not both.)

[ A ]	The	foregoing	statement	is	true,	without	exception.	[A]

The foregoing statement is true, the situations described in full	[B]
accompanying letter.	

I understand that if, at any time hereafter, there is any change in my circumstances which would make the foregoing statement incorrect, I will make a full report describing such change to the Chief of Personnel.

Please return this form to:

CMHA-Personnel Department Attn: Chief of Personnel 1441 West 25th Street Cleveland, Ohio 44113

022691.2

**CMHA** 

# Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cleveland Ohio 44113 Phone 216/348-5000 • Fax 216/696-0636

### CHANGE OF ADDRESS FORM

EMPLOYEE NAME: Pour	A. STYLES
SOCIAL SECURITY #:	
NEW ADDRESS:	CITY/STATE/ZIP CODE
TELEPHONE NUMBER: V/4	
	EMPLOYEE SIGNATURE  1-26-96  DATE





# ECMHA ==

# Cuyahoga Metropolitan Housing Authority

1241 West 25th Street • Clevelana Ohio 14113 Phone: 216/348-5000 • Fax: 215/096-2036

FILE COPY

## CHANGE OF ADDRESS FORM

EMPLOYEE NAME: PAUL	STYLES	
SOCIAL SECURITY #:	.25	
NEW ADDRESS:	AME CIMY (CHAMP) (RID CODE	
STREET	CITY/STATE/ZIP CODE	ı
TELEPHONE NUMBER:		
	Paul Stexes	
	EMPLOYEE SIGNATURE	
	7-5-95	
	DATE	

eci Sheeby



Lou de Harris (Charwaman 🕠 Katen Caats - del Charwaman Diwaw e Brawder 🕠 Or Consue a Sousa 🕠 Roben (Cartsena Diare B. Preeman Breautie Chestar



## 1993 CMHA POLICE DIVISION

1993 CMHA POLICE DIVISION
PAY OPTION
NAME STyles Paul 254 (PRINT) LAST FIRST BADGE #
TODAYS DATE 1/22/93
PURSUANT TO THE OPTIONS AFFORDED ME BY THE AGREEMENT BETWEEN CMHA
AND THE OHIO PATROLMEN'S BENEVOLENT ASSOCIATION, I MAKE THE
FOLLOWING SELECTIONS FOR 1993.
OVERTIME
OVERTIME PAY Styles 254 COMPENSATORY TIME
RANGE/COURT TIME
STRAIGHT PAY STRAIGHT PAY STRAIGHT PAY STRAIGHT PAY
SIGNATURE Vaul A. Styles#254
cc: Personnel Payroll O.P.B.A.

## **CUYAHOGA METROPOLITAN HOUSING AUTHORITY**

## ACKNOWLEDGMENT FORM

I acknowledge receipt of the new employee orientation material including the following Cuyahoga Metropolitan Housing Authority Polices:

- Administrative Order 11 (Parts I and II)
- Exempt and Non-Exempt Policy
- Family and Medical Leave Policy
- Sexual Harassment Policy
- Education Assistance Policy

Paul. STILES	,
Employee Name (Please print)	
Went Styles	4-2-01
Employee Signature	Date
Si Si	
Rugo MeBar	4-2-01
Witness Signature	Date

Original:

Personnel File

Copy:

**Employee** 



## Interoffice Memorandum

MAR 0 2 2001

STANLEY C. MURREY DEPUTY CHIEF

DATE: March 2, 2001		CMHA	-4, 0,
TO:	LENA HAYES	MAR 02 2001	
	PAYROLL MANAGER	PERSONNEL DEPT.	
FROM	1: POLICE DIVISION		
	Lt. Ronald J. Morenz		
	(PRINT: SHIFT SUPER\	/ISOR NAME)	
	ECT: PAYROLL DISCREPA	ANCIES	
	RE: Paul A. Styles (PRINT: EMPLOYEE	S NAME)	
000	) )	•	
SOC. S	EMPLOYEE'S SOC.	SEC. #	
DID NO	T RECEIVE THE FOLLOWING:	E PAY PERIOD ENDING: 3-2-01  He was paid through the end of the called off the remaining 3 days in the	
		2	
	(S	UPERVISOR'S SIGNATURE)	
A COPY	OF THE TIME CARD AND PAY	STUB MUST BE ATTACHED.	
CC: PAYR	OLL THE FOUNDS TO	Payroll + H.R.	
CC: FILES		Mulu	O UIAN I

Bracy Lewis, Chairman \* Dwayne Browder, Vice-Chairman Louise Harris \* Mae Stewart \* Robert C. Townsend II Terri Hamilton Brown, Executive Director

Board of Commissioners

משווע במדובה מהדד איי בהמסטעותה

### CONFIRMATION REPORT - MEMORY SEND

: JAN-25-01 13:44

Fax number: 2163488236

: CMHA HUMAN RESOURCES Name

Job

: 466

Date

: JAN-25 13:39

Τa

: 93488239

Doc. pages

: 01

Start time

: JAN-25 13:39

End time

: JAN-25 13:44

Pages sent

: 01

Job:466

\*\*\* SEND SUCCESSFUL \*\*\*

01/19/01 11:24 PAX 218 361 2392

CMHA POLICE DEPT ... PERSONNEL

FILE COPY

002



# RESERVED IN THE OPPOS CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT

To: Ronald J. Morenz.
Lieutenant- Third Platoon Watch Commander

From: Paul A. Styles Sergeant-Third Platoon

Deter January 18, 2001

Subject: Request to use accumulated time in lieu of sick time

I am aware that my sick time balance is at or near zero. As a result, I respectfully request and authorize CMHA to use any and all of my accumulated time, as necessary in lieu of sick time, to cover days or hours that I may take off sick. When I report off sick, I request that the necessary accumulated time be taken in the following order: Sick Time: Personal Days: Annual Time.

This will be in effect for the pay periods ending January 19

JAN 1 9 2001

TO JAN'01

LT. MORENZ

I faced this to H.R. for the Poyending 19 7 8 The will have to submit. that is needed in the fatin

1. Maly

torigon in 13:10, S



# CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY

POLICE DEPARTMENT

JAN I 9 2001
STANLEY C. MURREY
N

To: Ronald J. Morenz

Lieutenant-Third Platoon Watch Commander

From: Paul A. Styles

Sergeant-Third Platoon

Date: January 18, 2001

Subject: Request to use accumulated time in lieu of sick time

Sir,

I am aware that my sick time balance is at or near zero. As a result, I respectfully request and authorize CMHA to use any and all of my accumulated time, as necessary in lieu of sick time, to cover days or hours that I may take off sick. When I report off sick, I request that the necessary accumulated time be taken in the following order: Sick Time; Personal Days; Annual Time.

This will be in effect for the pay periods ending January 19

Office Respectfully Submitted

Respectfully Submitted,

Styles, Sergeant

Real A. Styles, Sergeant

10 JAN 01

LT. MORENZ

I faced this to H.R. for the Payending 19 JAN 01 He will have to submit a report for each pay period. That is needed in the future.

1. Waly

# **CUYAHOGA METROPOLITAN HOUSING AUTHORITY** POLICE DEPARTMENT



2685 East 79th Street \* Cleveland, Ohio 44104 Phone: (216) 361-3700 \*Fax: (216) 361-3728



# FACSIMILE DOCUMENT TRANSMITTAL COVER

TO: Human Resources	DATE: 19 JAN 01
FAX #: 348-8236	PAGES: 6 Including this cover sheet.
FROM: Police Division	
SUBJECT: Leave Donation & Benefit Time usage	

## COMMENTS:

The attached Leave Donation Forms are being forwarded for Processing, along with the attached request from Sgt. Paul Styles #656 to use any available benefit time to cover his injury leave.

WARNING
"The document(s) accompanying this facsimile transmission contains information that may be confidential or privileged. This information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that law prohibits any disclosure, copying, distribution or use of the contents of this facsimile transmission. If you have received this facsimile transmission in error, please notify us by telephone immediately, so that we can arrange for the retrieval of the original document(s) at no cost to you.



# Cuyahoga Metropolitan Housing Authority

1441 West 25th Street • Cleveland, Ohio 44113 Phone: 216/348-5000 • Fax: 216/696-0636

DATE:

MAY 10, 1995

TO:

THE PERSONNEL FILE

As of this date, May 10, 11, 12, 1995 (Circle One), I acknowledge receipt of the

## **Following Documents:**

- 1. Sexual Harassment Policy
- 2. Drug Abuse Policy
- 3. Work Place Tips. (Yellow)
- 4. Tips on What You should Know if injured on the job. (White)
- 5. Vacation accrual Reminder. (Blue)
- 6. Pre Tax Health Benefit Information (Flex Pro) (Pink)

Print Name

Signature

### **Board of Commissioners**

Karen H. Coats, Chairwoman • Dwayne Browder, Vice-Chairman Louise Harris • Dr. Consuelo Sousa • Robert C. Townsend II Claire E. Freeman, Chief Executive Officer





100	. \
1 4	S
	4/

(1) NAME	Name/Address/Position Class/Hir	re Information/Dept/Emp #
First name PAU	Middle name	Last name
Address line 1:		
Address line 2:		
City, State:	Zip code:	Pay loc:
· ·Home phone numb.	Unlisted? Y-Rat	red? \times(CMHA Resident? \bullet
Date of birth Z	5/63 Work Schedule	Position class
EEOC function	Retirement date	
Ethnic group Se.		Position cntrl
Employee number _		Salary step
Part time %	Lve abs rtn date	Pay period
Current status	Accrue/benefits?	Department
Current hire dt	Termination date	Vac Accrual date
Probation date	Termination code	Anniversary date
(15	5) TAX Federal and State Tax Inform	nation
Sta	ate marital status	*
Sta	ate regular allowances	
	ate itemized deductions	
Sta	ate of taxation	
Sta	ate filing status	
	ederal marital status	
Fe	deral regular allowances	

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY

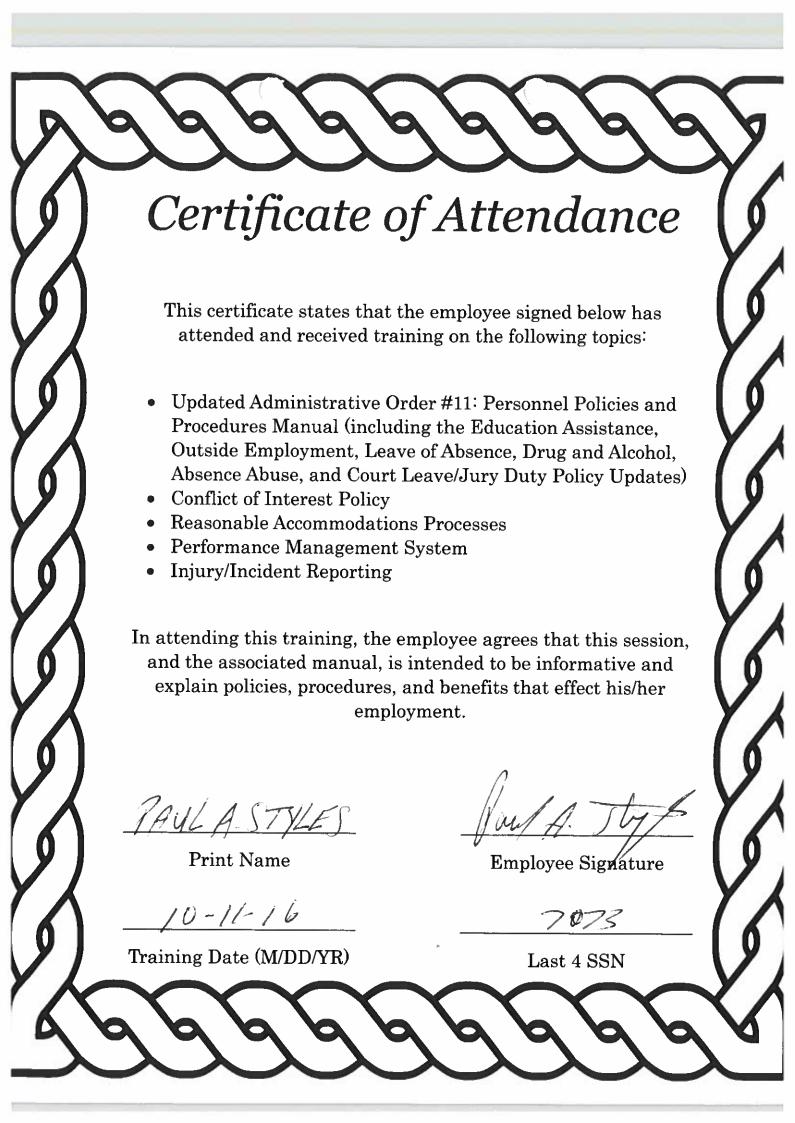


Board of Commissioners
Louise Harris, Chairwoman
Karen Coats, Vice-Chairwoman
Dwayne Browder
Dr. Consuela Sousa
Robert Townsend, II
Claire E. Freeman, Executive Director

1441 West 25th Street Cleveland, Ohio 44113 216-348-5000

EMPLOYEE PERSONAL DATA PROFILE (PLEASE PRINT CLEARLY)

NAME STYLES QAUI A Last First Mi	race $B$ male $\checkmark$ fema	LE
Last First Mi ADDRESS	PHONE WORK #	3
soc. sec. no.	DATE OF BIRTH $\frac{7/5}{}$	163
FAMILY I	DATA	
MARITAL STATUS	MAIDEN NAME	
FULL NAME OF DEPENDENTS RELATION	NSHIP DATE OF BIRTH SOC.	SEC.NO
1. PAUL ANTHONY STYLES JR		-64-70
2.		<u> </u>
3.		
4.		
5		
6		
7	N	<del></del> -
8		
NAME THE MA WILSON ADDRESS  PHONE NUMBER  ARE YOU A CMHA RESIDENT? YES	relation Mother	



# Certificate of Training Completion Gans, Gans & Associates

is hereby granted to:

PAU A STYLES

(Print Name)

to certify satisfactory completion of

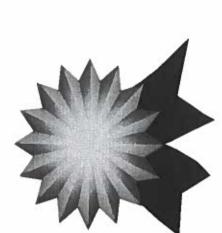
CMHA Harassment-Free Workplace Training

Sugmarure 1

Ly / colos Date

Department

Last 4 digits of SS#



# Completion

The undersigned has successfully completed

Word Advanced Training

March 16, 2006

# Paul Styles

Judi Dougherty

Judi Dougherty

Computer Information System Trainer

Certified By Microsoft

Master Instructor, Microsoft Office User Specialist

CMHA

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

L.h. A 24. 1. h. Als.

4

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CERTIFICATE OF

# Completion

The undersigned has successfully completed

Excel Intermediate Training

March 9, 2006

A.k.

k k k



A la

Lh.

Judi Dougherty

Computer Information System Trainer Certified By Microsoft

Master Instructor, Microsoft Office User Specialist

A.L.

**CUYAHOGA METROPOLITAN** HOUSING AUTHORITY

# ompletion

The undersigned has successfully completed

Word Intermediate Training

A

ke Alie Alie

March 9, 2006



Judi Dougherty

Computer Information System Trainer Certified By Microsoft

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Master Instructor, Microsoft Office User Specialist

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

# Completion The undersigned has successfully completed

Word Basic Training
February 9, 2006

# Paul Styles

Judi Dougherty

Computer Information System Trainer
Certified By Microsoft

Master Instructor, Microsoft Office User Specialist

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

# Completion

The undersigned has successfully completed

Excel Basic Training

February 9, 2006

Paul Styles

L. Yougherly

Judi Dougkerty
Computer Information System Trainer

Computer Information System Trainer
Certified By Microsoft

Master Instructor, Microsoft Office User Specialist

CMHA

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

# Tity of Eleveland

# Police



To all who shall see these presents, greeting: This is to certify that

S.P.O. PAUL STYLES

# HAS COMPLETED A COURSE OF INSTRUCTION IN

HUMAN RELATIONS TRAINING PROGRAM

February 16 - 18, 1993

Dough Brook Brown COMMANDING OFFICER COURSE COORDINATOR

# LAY-OFF CHECK LIST

Pour staf	ka	3-28-76 Date		
I <u>Paul</u> 57)	have received	d all of the above materials.		
<del></del>	UNEMPLOYMENT SUMN	MARY (		
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## RECEIPT

## Cuyahoga Metropolitan Housing Authority Police

Received 28 Day Of	MARCH 1996 From Paul Styles
	X= RECEIVED
1). BREAST BADGE	_ (\forall )
2). HAT BADGE	<u>(X)</u>
3). PHOTO IDENTIFICATION	_ (X)
4). SWIPE CARD	— (X )
5). DOOR KEY # 215	— ( <i>K</i> )
6). RADIO CASE	$-\stackrel{(\times)}{(\times)}$
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Signature Of Receipient

O. K

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Current Attendance Points:

Current Attendance Point Status:

Safe

Current Event Status: Safe Abuse Points Calculated Range: N/A

Date Comment. Date 1/7/2014 2/5/2014 4/2/2014 9/8/2014 9/29/2014 10/13/2014 11/17/2014 **HR Training** Approved by 640 Approved by 640 PELC Week one VCA Training 0700-1000

PELC Week 2

PELC

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Current Attendance Points: 0
Current Attendance Point Status: Safe

Current Sick Abuse Events: 0
Current Event Status: Safe
Abuse Points Calculated Range: N/A

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## CUY ... JGA METROPOLITAN HOUSING AU.

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Office of Safety Management 5715 Woodland Ave. Cleveland, Ohio 44104 Vox: 426-7765 Fax: 426-7766

	Y 0X. 420-7703	Pax. 420-7700	
DATE:	October 1, 2002	<u>X-02-0109</u>	FIFE
то:	Stanley Murray Police Department		Plan Pr
ATTN:	Sgt. Paul Styles		
FROM:	Anthony Jackson, Chief Division of Police and Security		
	Robert L. Kucery Chief Safety Officer McChief		
SUBJECT:	Motor Vehicle Accident Determination		
Based on the facts 17, 2002, the follo	presented concerning the motor vehicle accide wing determination has been made:	nt involving, Sgt. Paul Styles which	occurred on <u>September</u>
	THIS MOTOR VEHICLE ACCIDENT WAS	DETERMINED TO BE PREVENTABL	Е.
mechationami drivis	Pehicle Operations Manual and Administrating status for 12 months from the date of the acting period may result in the suspension or revoc	cident. Further Preventable motor ve	Wick accidents on ing and
[]	First Preventable Motor Vehicle Accident -		
[X]	Second Preventable Motor Vehicle Acc temporary suspension of Vehicle Operato You may not operate an CMHA vehicle suspension period.	r's Permit and an additional 12 mon	th probationary period. II
[]	Third Preventable Motor Vehicle Accident of Vehicle Operators Permit. You may not obusiness.	within the 24 month probationary Perio operate any CMHA vehicle or privately	od: permanent suspension owned vehicle on CMHA
OPER ATIONS M	X IS CHECKED, THE ACCIDENT REPO ANUAL WERE NOT FOLLOWED, CONSEQ IDER THIS ACCIDENT PREVENTABLE.	RTING PROCEDURES AS OUTLI UENTLY, SAFETY MANAGEMENT	NED IN THE VEHICLE HAS NO ALTERNATIVE
If you wish to appeal	this determination, you may do so through the Person	nnel or Legal Departments. EDGMENT	
I,	, acknow	ledgment receipt of this determination	
Employee Signati	nre:	Date:	
SUPERVISOR S	IGNATURE:	DATE:	
WITNESS SIGNA	ATURE:	DATE:	
	REIMBURSEME	NT AGREEMENT	
Payroll Deduction	, agree to reimburse CMHA cident. Repayment will be made through Cash (Minimum of \$25.00 per pay, to be paid with	\$125.00 or the cost of repair, whicheven Payment (Checks made out to CMHA in 6 months of accident). I select the f	Accounts Payable) or
payment:	Employee Signature:		per pay.
	Supervisor's Signature:		and the second staff that we see I describe the second to the second to the second to the second to the second
	Witness Signa	ture:	CARA

SUPERVISOR MUST RETURN A SIGNED COPY OF THIS DOCUMENT TO SAFETY MANAGEMENT WITHIN 5 DAYS OF RECEIPT. PERSONNEL DEFI.

Personnel/Legal Dep't.

CC: Transportation Dep't.

Risk Management

Area Manager 0 4 2002

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# PUBLIC EMPLOYEES RETIREMENT SYSTEM OF OHIO 277 East Town Street Columbus, Ohio 43215-4642

## PERSONAL HISTORY RECORD

All sections of this Form must be completed in full including the certification by your payroll officer and the affidavit. All statements are to be made under oath and may require substantiating proof. Proof of date of birth will be required to obtain retirement and other benefits. Be accurate when entering your Social retirement allowances, disability benefits, or survivor benefits may only be paid if this Form is properly completed.

0_0110111	PERSONAL INFORMATION					
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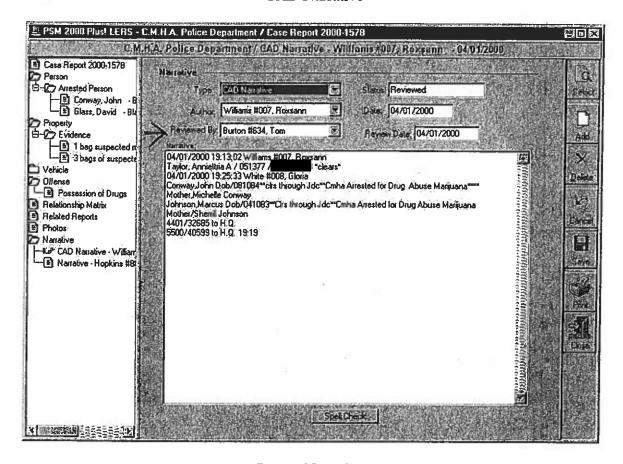
# PUBLIC EMPLOYEES RETIREMENT SYSTEM OF OHIO 277 East Town Street Columbus, Ohio 43215-4642

## **PERSONAL HISTORY RECORD**

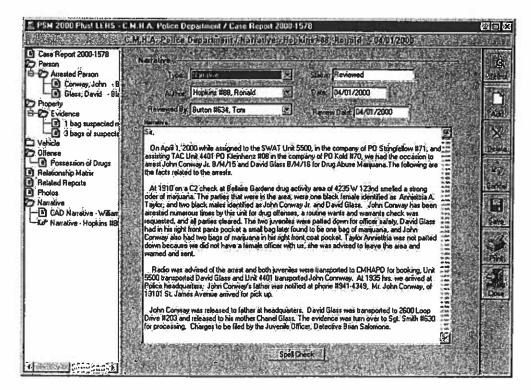
All sections of this Form must be completed in full including the certification by your payroll officer and the alfidavit. All statements are to be made under oath and may require substantiating proof. Proof of date of birth will be required to obtain retirement and other benefits. Be accurate when entering your Social Security number; copy it from your card. All signatures must be in ink; other entries may be typewritten or printed clearly. A refund of accumulated contributions, retirement allowances, disability benefits, or survivor benefits may only be paid if this Form is properly completed.

SECTION I	PERSONAL INFORMATION	15	<del>/</del> ,	~ n/	
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### CAD Narrative



## Report Narrative





# \*\*\*FOR TRAINING USE ONLY\*\*\* CMHA

# CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

John Law, Lieutenant #621, Watch Commander

3<sup>rd</sup> Platoon

FROM:

Sam Sneed, Sergeant #699, 3rd Platoon supervisor

PAGE	SUBJECT	DATE
	Assignment from the Complaint	į
1 of 5	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

### [Part 1-INTRODUCTION]

On 01JAN03 at 0200 hrs., while assigned to car 555 supervising 3<sup>rd</sup> platoon sector 1 personnel, I received this assignment via land line from (Sergeant Joe Dokes of the Complaint Investigation Unit)

### [Part 2-SYNOPSIS]

The assignment alleged that Sgt. Dokes' reliable informant advised him that one of the patrol officers assigned to the  $3^{\rm rd}$  platoon was intoxicated and asleep in a zone car in the rear of 1441 W.  $25^{\rm th}$  Street.

### [Part 3-INVESTIGATION]

I arrived at the location at 0215 hours and observed zone car 299A parked in the rear of 1441 W. 25<sup>th</sup> Street at the extreme southern part of the lot. Being that the area was dimly lit, I was unable to see any occupant in the zone car from my vehicle. I exited and approached zone car 299A finding P.O. Majors apparently asleep slumped in the driver's seat. I observed an open partially empty 40 oz. bottle of Iron City Beer between P.O. Majors legs. In the passenger seat I observed a full, unopened 40 oz. bottle of Iron City beer. I opened the passenger door of the zone car, removed the two bottles of beer, then attempted to wake P.O. Majors. After three tries P.O. Majors awoke and was ordered out of the vehicle. P.O. Majors eyes were dilated, speech slurred and staggered as he walked.

# \*\*\*FOR TRAINING USE ONLY\*\*\* \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
<u> </u>	Assignment from the Complaint	
2 of 5	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

He surrendered his weapon and cigarettes to me, then got into my vehicle as ordered. I advised RCC to send car 399 to assist me and requested the Watch Commander be notified to call me on the Departmental cell phone assigned to me.

P.O. John Smith #2 and P.O. Jane Doe #3 on car 399 arrived at 0235 hrs. I instructed them to inventory car 299A for unauthorized property and damage then drive it back to HQ. I also advised them to remove P.O. Majors personal property and secure it at HQ.

After conferring with Lt. Law by cell phone, I conveyed P.O. Majors to St. Vincent Charity Hospital(SVCH), arriving at 0240 hrs. At my instruction Mary Jones, R.N. administered a B.A.T. and urinalysis to P.O. Majors at 0255 hrs. The B.A.T. results were .20%. Urinalysis results pending. I conferred with Lt. Law via land line at SVCH and advised him of the B.A.T. results. He ordered that I convey P.O. Majors back to HQ for a conference with him.

Upon arrival at HQ at 0330 hrs., I attended the conference with Lt. Law and P.O. Majors. Lt. Law then ordered that P.O. Majors be relieved from duty pursuant to G.P.O. 01-001, Emergency Relief from Duty at 0350 hrs. Lt. Law then conferred with John Wayne, Patrol Commander, who set a Hearing date of 04JAN03 at 0900 hrs., in his office. P.O. Majors was verbally notified of the Hearing date and time. At the order of Lt. Law I conveyed P.O. Majors to his place of residence. P.O. Majors' personal vehicle was secured at HQ.

I placed the two 40 oz. bottles of beer confiscated into evidence as per procedures. I turned over the CMHA P.D. Glock Model 21 bearing serial #111111, assigned to P.O. Majors, to Lt. Law in HQ at 0345 hrs.

### [Part 4-SUMMARY]

This investigation determined that P.O. Majors was intoxicated while armed and on duty thereby creating a hazardous condition endangering himself and others.

### \*\*\*FOR TRAINING USE ONLY\*\*\* \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
	Assignment from the Complaint	
3 of 5	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

### [Part 5-CONCLUSION]

As a result, P.O. Majors was in violation the Manual of Rules and Regulations and Policy and Procedures of the Department as well as the Administrative Orders of CMHA. I respectfully request preference of the following Departmental Charges against P.O. Majors:

**RULE:** The 1<sup>st</sup> rule violation listed would not be necessarily the most important violation, but the one that actually defines the particular primary violation. In this case, for example, it might be:

RULE: 1.2.1.04-Drink alcoholic beverages while on duty or in uniform.

**SPECIFICATION:** On 01JAN03 at 0215 hrs., while in the rear parking lot at 1441 W. 25<sup>th</sup>, in zone car 299A, was intoxicated and sleeping while on duty.

RULE: Now you would list the appropriate supporting charges in <u>numerical</u> order, for example: 1.1.2 Gross neglect of duty; 1.1.5 Failure to obey...; 1.1.6 Conduct unbecoming...; 1.1.8 Any other reasonable...; 1.1.9 This section incorporates...; etc.

NOTE: Once all of the Police Department Rules, Regulations, Policy and Procedure violations have been listed, then list the A.O. 11 violations. Usually A.O. 11.10.03 (violate any CMHA rules) will cover most of the situations encountered.

NOTE: When completing the "specification" section for each Rule violation, in most cases it is permissible to use the phrase, "as stated in above specification". However, if the next Rule violation you cite is not explained or related to the preceding specification, you will need a new explanation in the specifications. For Example: if you cite Rule 1.1.2, you need to explain how his action caused him to grossly neglect his duty.

### \*\*\*FOR TRAINING USE ONLY\*\*\*

### \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
1	Assignment from the Complaint	
4 of 5	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

You may state, while P.O. Majors was intoxicated and asleep on duty and in his vehicle, he grossly neglected his sworn duties to protect the lives of CMHA residents and its property. He elected to be intoxicated thereby rendering him incapable of making life and death decisions.

When citing the Rule about sleeping on duty you may state, while P.O. Majors was asleep on duty and in his vehicle, he was incapable of responding timely to any threat or immediate necessary action that police officers encounter constantly.

In another Rule or Policy you may show that what the officer did not only endangered the officer, but the residents, the public in general and police officers.

The above format continues until all charges are listed and specified. In this situation you would also need to address the violation of law. For example:

Further, it appears that P.O. Majors may be in violation of ORC2923.15-Using weapons while intoxicated. I request that the Internal Affairs Unit investigate the possible violation of law. Lt. Law was notified of this request.

NOTE: It is important that when you request another unit to investigate or perform some act, they must be notified. Usually, for example, in a LERS report you would send a copy of that report to the Detective Bureau O.I.C. when you're requesting the detectives to follow-up on the initial incident. Otherwise the report remains dormant without any follow-up. The same holds true for an investigation when you request follow-up.

### \*\*\*FOR TRAINING USE ONLY\*\*\*

### \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
	Assignment from the Complaint	<u> </u>
5 of 5	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

[Part 6-ATTACHMENTS]

### Attachments:

- 1-CMHAPD94-001 Dated 01JAN03 from P.O. Smith #2
- 2-CMHAPD94-001 Dated 01JAN03 from P.O. Doe #3
- 3-CMHAPD94-016 Notification of urine test dated 01JAN03

Respectfully,

Sam Sneed, Sergeant

### **DISCUSSION QUESTION:**

Are there points that would be important to this investigation that were left out? If so, what would they be?

### \*\*\*FOR TRAINING USE ONLY\*\*\* \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
1	Assignment from the Complaint	
1 of 1	Investigation Unit: Regarding activities of	01JAN03
	P.O. Lee Majors #1	

**DISCUSSION QUESTION:** 

[For supervisors' investigation]

I purposely left out some points that would be important to this investigation. What would they be?

- 1. "and request for preference of Departmental Charges" in subject box.
- 2. Was the officer interviewed? If not, explain why.
- 3. During the officer's interview, one of the 1<sup>st</sup> questions would be is he a diabetic.
- 4. Was there an odor of alcohol on his breath?
- 5. Were there any other persons on the scene?
- 6. If so, did you interview them? If not, explain why.
- 7. Did you contact the CIU OIC to advise what happened and if there was anymore information regarding the incident and obtain an investigation number?
- 8. What about ammunition, badge and identification swipe card. Were they also confiscated? If not explain why?
- 9. A report from members of car 399 as to what they did and observed while involved in the assignment.



### \*\*\*FOR TRAINING USE ONLY\*\*\* CMHA

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Sam Sneed, Sergeant #699, 3rd Platoon supervisor

FROM:

John Smith, Patrol Officer #2

PAGE	SUBJECT	DATE
1 of 2	Activities in c/w assignment at 1441 W. 25 <sup>th</sup>	01JAN03

### [Part 1-INTRODUCTION]

On 01JAN03 at 0400 hrs., I was ordered by Sgt. Sam Sneed to make a report on activities regarding an assignment handled at 1441 W.  $25^{\rm th}$  St.

### [Part 2-SYNOPSIS]

On 01JAN03 at 0225 hrs., while assigned to car 399, in company with P.O. Jane Doe #3, we received an assignment from RCC to assist car 699 in the rear of 1441 W. 25<sup>th</sup>. Upon arrival at 0235 hrs., we conferred with Sgt. Sam Sneed, who instructed us to record our observations, inventory car 299A for unauthorized property and damage then drive it back to HQ. Further, we were instructed to remove P.O. Majors personal property and secure it at HQ.

### [Part 3-INVESTIGATION]

We inventoried car 299A on the scene, with the following results:

### Contraband seized-

- 1) Three(3) 40oz. bottles of Iron City beer on the floor of the rear seat area behind the driver under a bullet proof vest;
- 2) Two(2) marijuana cigarettes (roaches) in the front ashtray; and,
- 3) One(1) case of 24, 12 oz. bottle of Iron City beer in the trunk.

### \*\*\*FOR TRAINING USE ONLY\*\*\*

### \*\*\*FOR TRAINING USE ONLY\*\*\*

PAGE	SUBJECT	DATE
2 of 2	Activities in c/w assignment at 1441 W. 25 <sup>th</sup>	01JAN03

### Personal property removed for safe keeping-

- One(1) Armour Brand bullet proof vest bearing serial # 2222222 on the front panel and #2222223 on the rear panel. An identification tag on the inside front panel contained P.O. Majors' name and badge number. This was located on the floor in the rear seat compartment behind the driver.
- 2) One(1) brown 1'x 2' brief case (no brand name or serial number) found in the trunk. It only contained miscellaneous departmental forms. The identification card contained P.O. Majors' name.

Upon inventory, I did not view any interior or exterior damage to Car 299A. It was driven back to HQ by P.O. Doe #3 and secured in the police lot at 0345 hrs. P.O. Majors' personal vehicle, is a 1999 Ford Explorer, blue in color, bearing Ohio License #LM 1. I observed his vehicle was locked and secured in the HQ Police Lot.

The contraband and P.O. Majors' personal property was conveyed by us to HQ. There the contraband was tagged and entered into the property book and placed into the evidence safe by P.O. Doe #3. I secured P.O. Majors' personal property into his personal locker.

### [Part 4-SUMMARY]

Upon completion of this assignment at 0430 hrs., we reported to Sgt. Sneed for further instructions. He advised us to return to our regularly assigned duties. RCC notified at 0435 hrs.

[Part 5-CONCLUSION]

If applicable

[Part 6-ATTACHMENTS]

If applicable

Respectfully,

John Smith, P.O.

### **DISCUSSION QUESTION:**

Are there points that you would want the officer to put in, or that should be in the report? If so, what would they be?

### \*\*\*FOR TRAINING USE ONLY\*\*\*

### \*\*\*FOR TRAINING USE ONLY\*\*\*

DISCUSSION QUESTION: [For subordinates' report]

Are there points that you would want the officer to put in, or should be in the report? If so, what would they be?

- 1. Was there an odor of alcohol and/or marijuana in car 299A?
- 2. The report from members of car 399 did not contain what they observed while involved in the assignment, in relation to seeing P.O. Majors on scene.
- 3. "I secured P.O. Majors' personal property into his personal locker." Is there a problem with that?

\*\*\*FOR TRAINING USE ONLY\*\*\*



### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Gregory Drew, Police Officer #04 – SWAT

FROM:

disciplinary hearing.

Melvin I. Guinn, Sergeant #624 – SWAT OIC

PAGE 1 of 1	Step One Grievance Response	04AUG04
On 28JUL	04 I convened a Step One grievance hearing with you regarding a Written	Reprimand that you
were issu	ed on 20JUL04. The reprimand resulted from Departmental Charge	s that Sgt. Paul J.
Shaughnes	ssy #654 forwarded against you for an incident regarding improper p	procedures during a
prisoner tr	ansport on 13MAR04. You stated that you wished to have the reprimand	removed from your
file becau	se PO Eric Rives #86 was the senior officer and was operating the v	ehicle, you already

received a shift counseling from Sgt. Shaughnessy on 13MAR04, and you were never given a Pre-

This grievance cannot be resolved at this level.

Melvin I. Guinn, Sergeant

I have received a copy	y of this Step One Grievance.
Signed	Date



### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TO:

Eric Rives, Police Officer #86 – Third Platoon

FROM:

Thomas Imes, Lieutenant #628 - Third Platoon Watch Commander

PAGE	SUBJECT	DATE
1 of 2	Step One Grievance	04AUG04

On 31JUL04 I conducted a Step One grievance hearing with you regarding a Written Reprimand that you received on 20JUL04 as a result of Departmental Charges that were levied against you by Sgt. Paul J. Shaughnessy #654 (ref X04-023). You stated that you wished to have the reprimand dismissed and removed from your file based on the following grounds:

- 1. You received a verbal shift counseling for the infraction on 13MAR04
- 2. You were verbally threatened, harassed, and intimidated on the same date
- 3. On 16MAR04 Sgt. Shaughnessy ordered you to write a report regarding the incident after he became aware that you forwarded a written complaint against him (ref X04-022) and the Written Reprimand was retaliation against you.
- 4. The offense was your first and a Written Reprimand was not progressive discipline based on Rules and Regulations (RR) Section 11.1.5.02B.
- 5. The Written Reprimand that you received was not the preferred method of discipline under *RR* 11.1.7.01
- 6. The violation was a minor infraction and did not fall under RR 11.1.3.01

It was your contention that the verbal shift counseling that you stated received on 13MAR04 and the Written Reprimand that you received on 20JUL04 constituted "double discipline" for the same infraction.

Upon my review, this grievance cannot be resolved at this level.

### Attachments to this report:

- CMHA PD 94-001 report from PO Eric Rives #86 dated 28JUL04
- CMHA PD Manual of Rules and Regulation Section 11.1.3.01; 11.1.5.02B
- CMHA PD Manual of Rules and Regulation Section 11.1.7.01

Thomas Imes, Lieutenant

PAGE SUBJECT	· · · · · · · · · · · · · · · · · · ·	DATE
2 of 2	Step One Grievance	04AUG04

I have received a co	py of this Step One Grievance.	
Signed	Date	

Academy / Accreditation
Training Manual
Ref: Accreditation Chapter 33



### TRAINING DOCUMENTATION

**Notification Protocols** 

This is to certify that I have received a copy of and training on the following topic:

CMHA Police Department Manual of Rules and Regulations ref: Notification Protocols

SUPPLEMENTAL TRAINING ACKNOWLEDGEMENT			
NAME/BADGE #	SIGNATURE	DATE	
Paul A. STyles	SGT. Poul A. Steps	03 m us 05	

Supervisor Issuing:

MAY 0 8 2006

COMDOC

The CMHA Police Department is a nationally accredited agency as a result of demonstrating professional excellence through a national law enforcement credentialing program by the Commission on Accreditation for Law Enforcement Agencies. Accreditation is a coveted award that symbolizes professionalism, excellence, and competence. The accreditation award proves that the agency is committed to maintaining compliance with a broad-based set of internationally accepted professional standards that provide a proven management system of written directives, sound training, clearly defined lines of authority and routine reports that support decision making and resource allocation for the agency. The CMHA Police Department maintains a state of the art Radio Communications Control that is equipped with the latest innovation sin communications technology. This allows for quick, efficient dissemination of up to date information to Command Staff and Outside Agencies as needed. Field Supervisors are connected with the RCC via cellular telephone as well as radio to allow them to provide RCC with first hand information for quick dissemination. All Command Staff members are issued Cellular telephone, Alpha-numeric pagers, and other wireless communications devices that allow them to receive information regardless of their locations. Supervisors are trained and provided with guidelines to assist them in determining when Command Staff members need to be notified of specific events and provided with information. This allows them to make decisions at the Command level on issues that require immediate attention.



Academy / Accreditation
Training Manual
Ref: Accreditation Chapter 33

### TRAINING DOCUMENTATION

**Supplemental Training** 

This is to certify that I have received a copy of and training on the following topic:

<u>Departmental Notice #04-043 ref:</u>
<u>Procedures for Filing Charges with the City of Cleveland Prosecutor's Office</u>

SUPPLEMENTA	L TRAINING ACKNOWLEDGEM	ENT
NAME/BADGE #	SIGNATURE	DATE
Sgt. Paul Styles #656	SET. 5tyles # 6,56	02SEP04

Supervisor Issuing: 24 hujy

COMDOC COMDOC

PAGE	SUBJECT	DATE
1 of 1	Supplemental Training- Procedures for Filing Charges with the	02SEP04
	City of Cleveland Prosecutor's Office	002101

The Department has instituted procedures for the timely filing of criminal charges for those arrested for "fresh" charges. In order to insure that no one is taxed with additional work, everyone involved in the process must follow the procedures. If anyone fails to complete their responsibilities, someone else must complete the work before the criminal charges are filed. The officer completing the report must get it approved by a supervisor prior to compiling the court package. Once the report is approved, the officer generating the report must print copies of the LERS Case and Arrest reports, and attach it to a completed Statement of Facts sheet. The officer is then required to submit the entire package to the Watch Commander or Unit OIC. The Watch Commander or Unit OIC is to insure the package is complete, then place it in the box marked "Charges to be Filed." A detective will be assigned to file the charges with the City of Cleveland's Prosecutor's Office. If everyone involved in the process completes his or her responsibilities, the process will work smoothly. Failure to follow these procedures could delay the filing of charges, which could lead to legal difficulties for the individual officer, as well as the department.

The Department is confident that his training will help its Officers to better understand the reasons for Departmental Rules, Regulations, Policies and Procedures, and General Police Orders, and prevent further incidents from occurring in the future.

No reports submitted in reference to the arrests of Jamaal Belser and Kelvin Whitaker. LERS Case Report 2004-4675 and Arrest Report 2004-950 should have been submitted. There was no Statement of Fact sheet submitted for the arrest of Kelvin Whitaker.



### CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DIVISION



TO:

All members of the Division of Police

FROM:

Anthony H. Jackson, Chief of Police

DATE:

May 26, 2004

Page 1 of 2	Procedures for Filing Charges with the	DN #04-043
	City of Cleveland Prosecutor's Office	

### I. Purpose

The purpose of this policy is to establish departmental procedures for personnel filing charges with the City of Cleveland Prosecutor's Office in an efficient and timely manner. Implementation of this procedure reduces agency liability and decreases potential negative and/or harmful repercussions to the Authority. For the purpose of this departmental notice, a court package is specifically defined as the following documentation which has been attached together: 1) a supervisor approved LERS Case Report, 2) An Arrest Report, and 3) a completed Statement of Fact sheet.

### II. Policy

It is the policy of the Cuyahoga Metropolitan Housing Authority Police Department to revise and/or update current procedures to maximize available resources as needed.

### III. Procedures for Filing Charges with the City of Cleveland Prosecutor's Office

- A. Officers shall make every attempt to file charges with the City of Cleveland Prosecutor's Office during their regularly scheduled shift when an arrest is made.
- B. In the event an officer is unable to file criminal charges during his/her regularly scheduled shift, the following procedures shall be implemented:

### 1. Responsibilities of the Arresting Officer:

- a. Prior to reporting off duty, the arresting officer shall submit a completed court package to the On-Duty Watch Commander.
- b. The court package shall contain an approved copy of the corresponding LERS Case and Arrest reports, and a completed statement of fact sheet.
- c. After submitting a completed court package to the On-Duty Watch Commander and pursuant to procedures, the arresting officer shall cease any further action related to filing charges with the Prosecutor's Office and shall <u>NOT</u> appear in court to file charges with the prosecutor regarding the arrested person.

Page 2 of 2 Procedures for Filing Charges with the City of Cleveland Prosecutor's Office	DN #04-043
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### 2. Responsibilities of the On-Duty Watch Commander:

- a. Prior to the Arresting Officer reporting off-duty, the On-Duty Watch Commander shall inspect the court package to insure and verify the documentation has been completed accurately and properly.
- b. After reviewing the court package for completeness, the On-Duty Watch Commander shall immediately place the completed court package in the box visibly marked "Charges to be Filed". The "Charges to be Filed" box shall be located and remain in the Sergeants Office.

### 3. Responsibilities of the General Investigations Unit:

- a. A Detective shall be assigned by the Special Operations Unit OIC to handle the timely filing of any and all charges contained in the court package(s) with the City of Cleveland Prosecutor's Office.
- b. The assigned Detective shall file the appropriate charges with the first available City of Cleveland Prosecutor in accordance with established procedures.
- c. The assigned Detective shall complete a supplement to the original LERS Case and Arrest reports. The supplement shall provide documentation on whether charges were or were not issued and filed by the prosecutor. This shall include a listing of all charges that were filed.

This procedure shall become effective on Tuesday, June 1, 2004.

By order of,

Anthony H. Jackson,

Jackson

Chief of Police

### CLEVELAND MUNICIPAL COURT STATEMENT OF FACTS

STATE OF OHIO CITY OF CLEVELAND

CMHAPD94-031

CASE NO.

PLAINTIFF	(	HARGE	Criminal Trespassing
VS.			
Jamaal Belser 18/b/m/s DEFENDANT	<u>PRC</u>	BABLE C	AUSE DETERMINATION
STATE OF OHIO/COUNTY OF CUYAHOGA CITY OF CLEVELAND	SS:		
PO Neal #35	being fire	st duly swo	rn according to law, depose
and says that the probable cause that defendant committee	the offense set forth in the cor	nplaint is as	s follows:
On 251AUG04 in the City of Cleveland, Belser did knowingly	remain on the property of anoth	er CMHA P	Property with out permission.
		<u> </u>	
The basis for this complaint is in whole or in part based upon the	e following evidentiary sources ar	d informatio	n: Additional Page(s) Attached
	·		
CMHA Case Report 2004-4675			
PO Neal #35 34			
Detective / Officer / Withess			Assistant Prosecutor
Sworn to and signed			
Date Earle B. Turner,	hve		
Cleveland Municipal Clerk of Courts			Deputy Clerk
I,	above statement and its evider tion to be credible and believe t an offense or offenses of ORI	tiary suppo that there C/MC	rt thereof and find that there is a factual basis for the
	has committed by:		
Earle B. Turner,	-7.	Deputy Clerk	
Cleveland Municipal Clerk of Courts			
JUDICIAL REV	IEW OF INFORMATION	10 _ No	
Upon review of the Statement of Facts and/or the complaint,	I find that there:		
ls probable cause at this time and t	he defendant is to remain in cu	stody.	
Is NOT probable cause at this time	and the defendant is to be rele	ased from o	custody.
		_	
JUDGE	DATE		TIME

### CLEVELAND MUNICIPAL COURT STATEMENT OF FACTS

STATE OF OHIO CITY OF CLEVELAND PLAINTIFF

CMHAPD94-031

CASE NO.

CHARGE

Criminal Trespassing/AGG DC/ Resisting/ Giving GFaklse Falso

VS.	
Jamaal Belser 18/b/m/s	PROBABLE CAUSE DETERMINATION
DEFENDANT	
STATE OF OHIO/COUNTY OF CUYAHOGA CITY OF CLEVELAND	SS:
PO Neal #35	, being first duly sworn according to law, depose
and says that the probable cause that defendant commit	ited the offense set forth in the complaint is as follows:
On 251AUG04 in the City of Cleveland, Whitaker did kno	owingly remain on the property of another CMHA Property with out
permission. Whitaker also engaged in a manner that caused	an alarm and hazardous condition to the public and officers. While gather
information Whitaker advised his name was Stephen Talley	upon further investigation his real name was identified as Kelvin Whitaker.
While trying to place Whitaker under arrest he interferred w	vith the lawful arrest of himself.
The basis for this complaint is in whole or in part based upon	n the following evidentiary sources and information:Additional Page(s) Attached
CMHA Case Report 2004-4675	
DON-1475 P.C. 1/2-	
PO Neal #35 Pec	Assistant Prosecutor
	, 100 State 1 100 State 1
Sworn to and signed	
Earle B. Turner,	by:
Cleveland Municipal Clerk of Courts	Deputy Clerk
funicipal Clerk Of Courts, have independantly examined to a substantial basis for believing the source of the infor	or the Cleveland Municipal Court, on behalf of Earl B. Turner, Cleveland the above statement and its evidentiary support thereof and find that there rmation to be credible and believe that there is a factual basis for the
nformation furnished, providing probable cause to believe	
as or have been committed and that	<del></del>
Earle B. Turner,	by: Deputy Clerk
Cleveland Municipal Clerk of Courts	Deputy Clerk
	Date
JUDICIAL F	REVIEW OF INFORMATION
Upon review of the Statement of Facts and/or the compla	aint, I find that there:
Is probable cause at this time a	and the defendant is to remain in custody.
Is NOT probable cause at this	time and the defendant is to be released from custody.
JUDGE	DATE TIME



# OHIO PEACE OFFICER TRAINING COMMISSION

## THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

### Paul A. Styles

has successfully completed the advanced training course

05-060-06-03: Defensive Tactics Instructor

at the Ohio Peace Officer Training Academy given

September 18 - 22, 2006

Jin Petro

Attorney General

Jany O. Hallow

Vernon P. Stanforth, Chairperson

Ohio Peace Officer Training Commission

Ohio Peace Officer Training Commission Steven W. Schierholt, Executive Director Steven M. Schiebote



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CERTIFICATE OF

### Completion

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The undersigned has successfully completed

Excel Intermediate Training

March 9, 2006

Judi Dougherty
Computer Information System Trainer
Certified By Microsoft
Master Instructor, Microsoft Office User Specialist

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CUYAHOGA METROPOLITAN HOUSING AUTHORITY

CERTIFICATE OF

### Completion

The undersigned has successfully completed

Excel Intermediate Training

March 9, 2006

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CMHA

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

Judi Dougherty
Computer Information System Trainer
Certified By Microsoft
Master Instructor, Microsoft Office User Specialist

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CERTIFICATE OF

### Completion

The undersigned has successfully completed

Word Advanced Training

March 16, 2006

## Paul Styles

CMHA

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

Judi Dougherty
Computer Information System Trainer
Certified By Microsoft
Master Instructor, Microsoft Office User Specialist

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### Completion

The undersigned has successfully completed

Word Intermediate Training

4

March 9, 2006

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CUYAHOGA METROPOLITAN HOUSING AUTHORITY

Master Instructor, Microsoft Office User Specialist

Computer Information System Trainer Certified By Microsoft

Judi Dougherty

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CERTIFICATE OF

### Completion

The undersigned has successfully completed

### Excel Basic Training

February 9, 2006

## Paul Styles

CMH

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

JE JE JE JE JE JE JE JE JE

Judi Dougherty
Computer Information System Trainer
Certified By Microsoft
Master Instructor, Microsoft Office User Specialist

CERTIFICATE OF

### Completion

The undersigned has successfully completed

### Word Basic Training

February 9, 2006

### Paul Styles

CMIE

CUYAHOGA METROPOLITAN HOUSING AUTHORITY

Judi Dougherty
Computer Information System Trainer
Certified By Microsoft
Master Instructor, Microsoft Office User Specialist



### OHLEG Request for Access to Investigative Tools

Requestor Name	or for freeess to investigative 1 0015
First: PayL	Middle: ANThow Y Last: STYLE3
Agency Address:	City:
Email: PSTYLES@ C M	Hapo. of G State: Ohio Zip Code:
Date of Birth: 7-5-/963	Non-Sworn: Sworn:
SSN:	,
*Notification of activation will be sent via email.	If email is unavailable, please note fax number: 216432-5956
Requesting Agency: Cuyaho	ga Metropolitan Housing Authority
ORI Number: OH0186	
Agency Phone Number: (216)	126-7760
disclosed to individuals or agencies except in	then purposes ONLY. Any dissemination to the public is strictly prohibited. The Social and solely for the purpose of maintaining user authentication. SSN's will not be accordance with state and federal law, and policy of the Attorney General of the State or an authorizing signature will not be processed.
	Requestor's Signature
For Office Use Only	Date A. Styles
Director Approval:	20Jan 06
Date:	
Entered By:	Chief / Sheriff or Designee Printed Name
Date.	ANTHONY H. JACKSON
	Chief / Sheriff or Designee Signature
	Date Culting fred four, thief
	1-31-06



Ohio Law Enforcement Gateway

Telephone: (866) 406-4534, or (866) 40-OHLEG

Facsimile: (740) 845-2021 www.ag.state.oh.us

### **Emergency Management Institute**



This Certificate of Achievement is to acknowledge that

PAUL A. STYLES

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00700 National Incident Management System (NIMS) an Introduction

Issued this 01st Day of September, 2005

0.3 CEU

Stephen G. Sharro
Director, Training Division

From:

INDEPENDENT STUDY <INDEPENDENT.Study@dhs.gov>

To:

"rmorenz@cmhapd.org" <rmorenz@cmhapd.org>

Date:

9/1/2005 12:54:46 PM

Subject:

Independent Study Course Information

### Dear Paul Styles:

Congratulations! You have successfully passed the Independent Study Course "IS-00700" entitled "National Incident Management System (NIMS) an Introduction".

Due to the thousands of people completing independent study courses, we estimate it will take approximately eight weeks to issue your completion certificate. Please retain a copy of this email as proof of your completion until your certificate is received. We appreciate your patience.

Independent Study Program Office Emergency Management Institute National Emergency Training Center 16825 S. Seton Ave Emmitsburg, MD 21727

On the Web: www.training.fema.gov/emiweb/is

Phone: (301) 447-1200 FAX: (301) 447-1201 Paul A. STYLES

### National Incident Management System (NIMS), An Introduction (IS-700) Posttest

1	. 0	ne of the chief benefits of NIMS is that it is:
	(b)	Accompanied by Federal funding. Applicable across jurisdictions and functions. Based on an entirely new concept of response.
2.	N] m	MS provides a framework that applies to all phases of incident anagement regardless of cause, size, location, or complexity.
		Rigid Complicated Straightforward Flexible
3.	Th ba	e Incident Command System (ICS) is a proven incident management system that is sed on organizational:
	b.	Best practices. Strengths. Structures.
4.	Sp	an of control may vary from
	ь. (с.)	Two to eight Four to nine Three to seven Five to ten
5.	The bet	e use of common terminology for ICS position titles helps to reduce confusion ween a person's position on an incident and his/her:
į	Б. с.	Day-to-day position. Level of authority. Chain of command. On-scene responsibilities.
6.	Inc tac	ident Action Plans (IAPs) depend on to accomplish response tics.
	ь. Э	Integrated communications Organizational resources Management by objectives Common terminology

NIMS: POSTTEST

**APRIL 2004** 

PAGE 1

<ol> <li>A hazardous materials spill in which more than one agency has responsibility for the response is a good use for a(n):</li> </ol>
<ul> <li>a. Emergency Operations Center (EOC).</li> <li>b. Area Command.</li> <li>c. Multiagency Coordination System.</li> <li>d) Unified Command.</li> </ul>
8. Public health emergencies that are not site specific are a good use for a(n):
<ul> <li>a. Emergency Operations Center (EOC).</li> <li>b. Area Command.</li> <li>c. Multiagency Coordination System.</li> <li>d. Unified Command.</li> </ul>
9. An Area Command organization does not include an Operations Section because:
<ul> <li>Operations are conducted on-scene.</li> <li>Area Commands are not really commands.</li> <li>Its authority is limited to obtaining resources.</li> <li>The Planning Section handles operations in an Area Command.</li> </ul>
10. One key responsibility of Multiagency Coordination Systems is to:
<ul> <li>a. Direct tactical operations for the incident.</li> <li>b. Make resource allocation decisions based on incident priorities.</li> <li>c. Control large-scale incidents from a common location.</li> <li>d. Facilitate operations at incidents where there is no incident site.</li> </ul>
11 may support multiagency coordination and joint information activities.
a. Incident Command structures b. Area Commands c. Unified Commands Emergency Operations Centers
12. Public Information Officers operate within the parameters of a(n), which establishes policies, procedures, and protocols for gathering and disseminating information.
a. Multiagency Coordination System b. Incident Command structure c) Joint Information System d. Emergency Operations Center
13. When a Joint Information Center is established as part of a Unified Command, agencies or organizations contributing to joint public information management:
<ul> <li>a. Work independently.</li> <li>b. Clear all information with the Incident Commander.</li> <li>c. Retain their organizational independence.</li> <li>d. Report to the chief elected official.</li> </ul>

- 14. When multiple JICs are established, all JICs must communicate and coordinate with each other on an ongoing basis using:
  Joint Information System protocols.
  Agency protocols.
  Area Command protocols.
  Multiagency Coordination System protocols.
  15. National-level preparedness standards related to NIMS will be maintained and managed through the NIMS:
  - a. Integration Center. b. Policy document.
  - c. Homeland Security Presidential Directive.
  - d. Presidential Decision Directive.
- 16. One responsibility of preparedness organizations at all levels is to:
  - a. Specify response requirements for every type of incident.
  - b. Determine the role and responsibilities of Incident Commanders.
  - c. Delegate preparedness to responsible agencies.
  - Establish guidelines and protocols for resource management.
- 17. A plan based on lessons learned from actual incidents is a(n):
  - a. Recovery Plan.
  - (b) Corrective Action Plan.
  - c. Procedure.
  - d. Emergency Operations Plan.
- 18. One area of focus for the NIMS Integration Center is to:
  - a. Track all resources on a regional basis.
  - b. Ensure compliance with all NIMS requirements.
  - Facilitate the definition of general training requirements and approved courses.
  - d. Maintain a database of personnel meeting credentialing requirements.
- 19. To help ensure that equipment performs to certain standards and is interoperable with equipment used by other jurisdictions, the NIMS Integration Center will:
  - Review and approve lists of equipment meeting national standards.
  - Require jurisdictions to purchase equipment only if it meets established specifications.
  - c. Work directly with equipment suppliers to ensure interoperability.
  - d. Prescribe that all response equipment be interoperable.

20. Mutual aid agreements and Emergency Management Assistance Compacts help to:
<ul> <li>a. Spread the costs of emergency response.</li> <li>b. Facilitate the timely delivery of assistance during incidents.</li> <li>c. Coordinate full documentation of incidents.</li> <li>d. Establish the command structure for incidents.</li> </ul>
21. Resource typing involves the categorizing of resources based on:
a. Availability. b. Cost. c. Performance. d. Kind.
22. NIMS ensures that all personnel possess a minimum level of training, experience, fitness, capability, and currency by:
Maintaining a database of personnel who have been trained for specific positions. b. Providing training to personnel who will be assigned to Command Staff positions. c. Overseeing a national training and exercise program. d. Establishing certification and credentialing standards for key personnel.
23. Requests for items that the Incident Commander cannot obtain locally must be submitted through the:
Multiagency Coordination Entity. b. Area Commander. c. NIMS Integration Center. d. Department of Homeland Security.
24. Resource managers use established procedures to track resources continuously from through demobilization.
Mobilization b. Recovery c. Typing d. Purchase
25. NIMS standards for communications and information management are based on the principle that a common operating picture is required to:
<ul> <li>a. Avoid duplication of effort.</li> <li>b. Document the response fully.</li> <li>c. Maintain the command structure.</li> <li>d. Ensure consistency among all who respond.</li> </ul>

### **Emergency Management Institute**



This Certificate of Achievement is to acknowledge that

### PAUL A. STYLES

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

Introduction to the Incident Command System, (ICS 100)

Issued this 15th Day of August, 2005

0.3 CEU

Stephen G. Sharro

Director, Training Division

From:

INDEPENDENT STUDY <INDEPENDENT.Study@dhs.gov>

To:

""rmorenz@cmhapd.org" <rmorenz@cmhapd.org>

Date:

8/16/2005 1:52:59 PM

Subject:

Independent Study Course Information

### Dear Paul Styles:

Congratulations! You have successfully passed the Independent Study Course "IS-00100" entitled "Introduction to the Incident Command System, (ICS 100)".

Due to the thousands of people completing independent study courses, we estimate it will take approximately eight weeks to issue your completion certificate. Please retain a copy of this email as proof of your completion until your certificate is received. We appreciate your patience.

Independent Study Program Office Emergency Management Institute National Emergency Training Center 16825 S. Seton Ave Emmitsburg, MD 21727

On the Web: www.training.fema.gov/emiweb/is

Phone: (301) 447-1200 FAX: (301) 447-1201 - Paul A. STYLES

## Posttest – Introduction to ICS (ICS-100) (Total of 25 questions)

- 1. A basic ICS operating guideline is that the person at the top of the ICS organization is responsible until the:
  - a. Event or incident has demobilized.
  - Next operational period has begun.
  - Five management functions are activated.
  - d.) Authority is delegated to another person.
- Expansion of incidents may require the delegation of authority for the performance of Operations, Planning, Logistics, and Finance/Administration functions. The people who perform these four management functions are designated as the:
  - a. Deputy Staff.
  - b. Director Staff.
  - c. Command Staff.
  - d. General Staff.
- 3. At which Incident Facility are primary service and support activities, such as feeding and resupply, performed?
  - (a) Base
    - b. Camp
    - c. Incident Command Post
    - d. Staging Area
- 4. Which position is the only one that is always staffed in ICS applications?
  - a. Operations Section Chief
  - (b) Incident Commander
  - c. Information Officer
  - d. Branch Director
- 5. ICS has been used to manage incidents such as fires, earthquakes, hurricanes, and acts of terrorism. Which of the following situations represents another viable application for the use of ICS?
  - Central City is planning for their annual Labor Day celebration, including a parade and fair.
  - b. Mrs. Butler's 10<sup>th</sup> grade Biology class is preparing a lab experience involving the dissection of frogs.
  - c. Sam Brown, the office manager for a busy neurology practice, is planning to transfer the office records to a new computer database system.
  - d. The Brownsville library is planning to establish a volunteer program involving local high school students reading to children one to two afternoons a week.

- 6. Depending upon the size and type of incident or event, it may be necessary for the Incident Commander to designate personnel to provide information, safety, and liaison services for the entire organization. In ICS, these personnel make up the: a. Deputy Staff.
  - b. Director Staff.
  - (O) Command Staff.
  - d. General Staff.
- Every incident must have a verbal or written Incident Action Plan (IAP). The purpose 7. of the IAP is to provide all incident supervisory personnel with direction for:
  - a) b. Actions to be implemented during the operational period identified in the plan.
  - Maintaining documentation and tracking resources assigned to the incident.
  - Monitoring the number of resources that report to any one supervisor. C.
  - Obtaining and maintaining essential personnel, equipment, and supplies. d.
- The ability to communicate within ICS is absolutely critical. To ensure efficient, clear 8. communication, ICS requires the use of:
  - Agency-specific codes. a.
  - **(D)** Common terminology.
  - C. Radio codes.
  - d. Technical language.
- 9. There is no correlation between the ICS organization and the administrative structure of any single agency or jurisdiction. This is deliberate because:
  - Every incident or event requires that certain management functions be a. performed.
  - On small incidents and events, one person, the Incident Commander, may b. accomplish all five management functions.
  - In ICS, the person at the top of the organization is responsible until the c. authority is delegated to another person.
  - (d) Confusion over different position titles and organizational structures has been a significant stumbling block to effective incident management in the past.
- Which General Staff position conducts tactical operations, develops the tactical 10. objectives and organization, and directs all tactical resources?
  - Finance/Administration
  - Logistics
  - Operations
  - Planning

- Which Command Staff position serves as the conduit for information to internal and 11. external stakeholders, including the media, or other organizations seeking information directly from the incident or event? Information Officer b. Liaison Officer c. Resource Officer d. Safety Officer At each level of the ICS organization, individuals with primary responsibility positions 12. have distinct titles. Using specific ICS position titles serves three important purposes: The use of distinct titles allows for filling ICS positions with the most qualified individuals rather than by rank. Standardized position titles are useful when requesting qualified personnel.
  - a. Titles provide a common standard across responders.
  - b. Distinct titles help clarify the activities undertaken by specific personnel.
  - Position titles help to maintain the normal lines of authority within agencies and jurisdictions.
  - Titles establish the rank, grade, and seniority used to select the Incident Commander.
- 13. Which General Staff position develops the Incident Action Plan, collects and evaluates information, maintains resource status, and maintains documentation for incident records?
  - a. Finance/Administration
  - b. Logistics
  - c. Operations
  - (d) Planning
- 14. Another basic operating guideline concerns the supervisory structure of the organization and pertains to the number of individuals or resources one supervisor can manage effectively on emergency response incidents. This operating guideline is referred to as:
  - a. Delegation of authority.
  - (b) Span of control.
  - c. Form follows function.
  - d. Unity of command.

Which General Staff position provides support, resources, and all other service needed to meet the operational objectives?				
	a. Finance/Administration b. Logistics c. Operations d. Planning			
16.	Which Command Staff position monitors safety conditions and develops measures for assuring the safety of all assigned personnel?	۶r		
	a. Information Officer b. Liaison Officer c. Resource Officer d. Safety Officer			
17.	Incident Action Plans include the measurable tactical operations to be achieved and are prepared around a timeframe called $a(n)$ :			
	a. Incident Phase. b. Event Stage. C Operational Period. d. Tactical Interval.			
18.	Which Incident Facility is a temporary location at an incident where personnel and equipment are kept while waiting for tactical assignments?			
	a. Base b. Camp G. Incident Command Post d. Staging Area			
19.	Which General Staff position monitors costs related to the incident, and provides accounting, procurement, time recording, and cost analyses?			
	a) Finance/Administration b. Logistics c. Operations d. Planning			
20.	Which Incident Facility is positioned outside of the present and potential hazard zone, but close enough to the incident to maintain command?			
	a. Base b. Camp c. Incident Command Post d. Staging Area			

- Check-in officially logs you in at the incident. The check-in process and information 21. helps to: Ensure personnel accountability. Track resources. Prepare personnel for assignments and reassignments. Organize the demobilization process. Determine communications procedures for contacting your headquarters or a.
  - home office.
  - b. Identify purchasing authority and procedures.
  - Determine how food and lodging will be provided. Locate personnel in case of an emergency.
- Which Command Staff position serves as the primary contact for supporting agencies 22. assigned to an incident?
  - Information Officer Liaison Officer
  - <u>Б</u> Resource Officer
  - Safety Officer
- 23. After check-in, you should:
  - Locate your incident supervisor and obtain your initial briefing. (a.)
  - b. Determine your return mode of transportation.
  - Arrange personal items needed for your estimated length of stay. c.
  - Establish a clear understanding of your decisionmaking authority. d.
- Designers of the Incident Command System recognized early that ICS must be 24. interdisciplinary and organizationally flexible to:
  - Meet the needs of incidents of any kind or size.
  - Allow personnel from a variety of agencies to meld rapidly into a common management structure.
  - Be cost effective by avoiding duplication of efforts.
  - Allow for a preset organizational structure to be put in place for personnel who perform administrative and logistics functions in an emergency.
  - Alleviate the management challenges faced by overloaded Incident b. Commanders.
  - Be usable for routine events such as conferences, as well as large and complex c. emergency incidents.
  - Compensate for incident response failures likely to result from a lack of d. resources.

At which Incident Facility are resources kept to support incident operations if a Base is not accessible to all resources? 25.

Base

Camp Helibase Staging Area



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



This is to certify that

## Paul Styles

Has Completed an Intensified Course of Training in

## Emergency Vehicle Operations

Consisting of 16-Hours of Instruction On this 8th Day of October in the Year 2004.

ANTHONY H. JACKSON CHIEF OF POLICE

GEORGE A. PHILLIPS SAFETY DIRECTOR Le fant In 626



## CMHA

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



## **EMERGENCY VEHICLE OPERATIONS**

## **Student Test**

NAME:	Paul	STYLES	SCORE:	60%
DATE: 07	OCTOY			
Directions:	Choose the best	answer to each question	n and circle the letter.	
A "pro	eventable crash"	is defined as?		
b. Э	An accident cat An accident in the done.	river shouldn't have go used by the forces of na which a driver failed to	iture	uld reasonably
d.	A and C above.			

2. "Defensive driving" is defined as?

e. A, B, and C above.

- a. Driving quickly through traffic
- (b. Driving to prevent crashes from occurring in spite of the actions of others or the presence of adverse driving conditions.
- c. Driving to prevent crashes by traveling 5 mph under the posted speed limit.
- d. A and B above.
- e. A, B, and C above.

- 7. 4 factors to consider when initiating a pursuit are?
  - a. Nature and seriousness of the offense; location of the offense; roadway and traffic conditions; amount of time before your lunch break.

Nature and seriousness of the offense; weather conditions; time of day and geographic location; availability of assistance.

- c. Time left on your shift; type and condition of the police and suspect vehicle; rate of speed and evasive tactics of the vehicle's driver.
- d. Location of the offense; gender of the driver; weather conditions; time of day.
- e. None of the above.
- 8. Choose 2 of the 4 factors that must be considered when deciding to terminate a pursuit.
  - a. The officer is a better driver than the suspect; weather/road conditions.
  - b. A supervisor terminates it; hazards are exposing the officer and the public to unwarranted risks.
    - c. The officer is closing ground on the suspect; time of day.
    - d. The officer really wants to apprehend the suspect; weather/road conditions.
    - e. None of the above.

The difference between the ORC requirements and Departmental Rules and Regulations regarding traveling through an intersection is?

- a. According to the ORC you are not required to slow down.
- b. Neither the ORC or Departmental Rules and Regulations require the use of overhead lights and siren.
- c. Departmental Rules and Regulations require you to come to a complete stop prior to entering an intersection against a red light.
- d. According to the ORC any police vehicle can be involved in a pursuit.
- e. None of the above.

The primary Officer involved in a pursuit must complete how many LERS Case Reports?

- a)
- b. 2
- c. 3
- d. 4
- e. None of the above.



## CMHA

## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



## **EMERGENCY VEHICLE OPERATIONS**

## **Student Test**

NAME:	STYLES	SCORE:/0	0%
DATE: 07 OCT 04			

Directions: Choose the best answer to each question and circle the letter.

- 1. A "preventable crash" is defined as?
  - a. An accident a driver shouldn't have gotten into.
  - b. An accident caused by the forces of nature.
  - c. An accident in which a driver failed to do everything that could reasonably be done.
  - d.) A and C above.
  - e. A, B, and C above.
- 2. "Defensive driving" is defined as?
  - a. Driving quickly through traffic
  - 6. Driving to prevent crashes from occurring in spite of the actions of others or the presence of adverse driving conditions.
  - c. Driving to prevent crashes by traveling 5 mph under the posted speed limit.
  - d. A and B above.
  - e. A, B, and C above.

7. 4 factors to consider when initiating a pursuit are?

a.

a. Nature and seriousness of the offense; location of the offense; roadway and traffic conditions; amount of time before your lunch break.

Nature and seriousness of the offense; weather conditions; time of day and geographic location; availability of assistance.

- c. Time left on your shift; type and condition of the police and suspect vehicle; rate of speed and evasive tactics of the vehicle's driver.

  Location of the offense; gender of the driver; weather conditions; time of day.
- e. None of the above.
- 8. Choose 2 of the 4 factors that must be considered when deciding to terminate a pursuit.
  - a. The officer is a better driver than the suspect; weather/road conditions.
  - (b) A supervisor terminates it; hazards are exposing the officer and the public to unwarranted risks.
  - c. The officer is closing ground on the suspect; time of day.
  - d. The officer really wants to apprehend the suspect; weather/road conditions.
  - e. None of the above.
- 9. The difference between the ORC requirements and Departmental Rules and Regulations regarding traveling through an intersection is?
  - According to the ORC you are not required to slow down.
  - b. Neither the ORC or Departmental Rules and Regulations require the use of overhead lights and siren.
  - c.) Departmental Rules and Regulations require you to come to a complete stop prior to entering an intersection against a red light.
  - d. According to the ORC any police vehicle can be involved in a pursuit.
  - e. None of the above.
- 10. The primary Officer involved in a pursuit must complete how many LERS Case Reports?
  - a.
  - (b) 2
  - c. 3
  - d. 4
  - e. None of the above.

## CMHA PD DRIVING EVALUATION



STUDENT:

Paul Styles #656

DATE:

October 08, 2004

INSTRUCTOR:

Lt. Morenz #626 Phuse



EVENT	CONES HIT	CONES DOWN	DIRECTION CHANGE	TOTAL PENALTY	REMARKS/ACTUAL TIME	SCORE
STAR (60 Seconds)	1	0	0	5	00:33	95
PARALLEL PARK (LEFT) (30 Seconds)	0	0	0	0	00:19	100
PARALLEL PARK (RIGHT) (30 Seconds)	0	0	0	0	00:20	100
INTERCHANGE OF LANES (60 Seconds)	0	0	0	0	NOT USED FOR THIS CLASS	
LONG INTCHNG ON A CURVE (60 Seconds)	0	0	0	0	00:35	100
SERPENTINE ON A CURVE (70 Seconds)	0	0	0	0	00:63	100
PURSUIT TURNS (45 Seconds)	0	0	0	0	00:39	100
REVERSE CURVE (30 Seconds)	0	0	0	0	00:10	100

Additional Comments:	



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



This is to certify that

## Gaul Styles

Has Completed an Intensified Course of Training in

## OC/Pepper Foam Update

Consisting of 4-Hours of Instruction On this 29th Day of June in the Year 2004.

> ANTHONY H. JACKSON CHIEF OF POLICE

GEORGE A. PHILLIPS
SAFETY DIRECTOR

. Sisteministration of the contraction of the contraction of the contraction of the contraction of the contraction of

W/ (INSTRUCTOR



## CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



This is to certify that

## Saul Styles

Has Completed an Intensified Course of Training in

## Expandable Baton Update

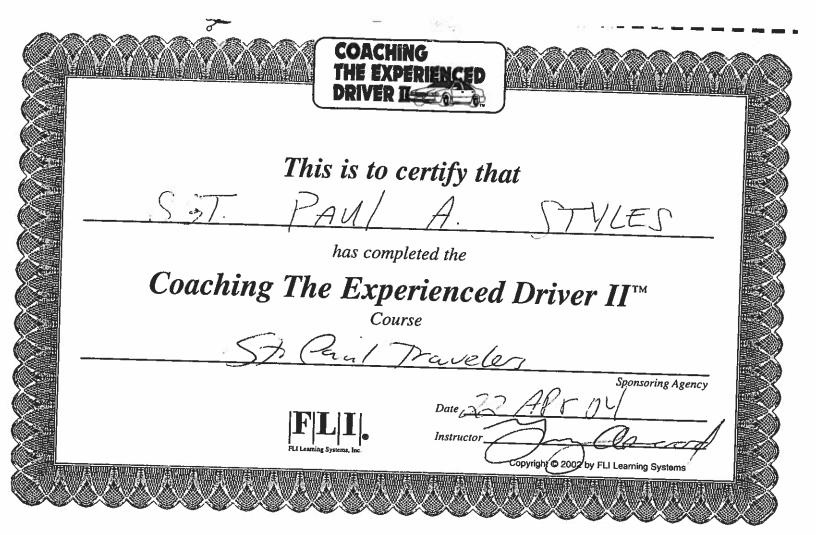
Consisting of 4-Hours of Instruction On this 29th Day of June in the Year 2004.

> ANTHONY H. JACKSON CHIEF OF POLICE

GEORGE A. PHILLIPS
SAFETY DIRECTOR

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INSTRUCTOR



ENTERED

## 25NOV03-SUPERVISORS' TRAINING by 603

(Page 1 of 3 pgs)

- I. HOUSEKEEPING:
- 1. Ensure specific medical information is not contained in other types of reports like MVAs or one officer's injury information being contained into another officer's injury report.
- 2. Send <u>all</u> paperwork forward in envelopes.
- CONCENTRA-treatment v/s Hospital treatment:
   Substance testing at CONCENTRA during open hours (DISCUSSION)
- Supervisors not sending up reports that request Detective or Narcotics Unit follow-up. Also, reports that should state "follow-up requested", are not. Supervisors need to make a determination of follow-up and have an addendum made. (MORENZ)
- 5. PURSUITS- Supervisors need to take control-find out why they are pursuing and "terminate" if appropriate. (policy passout)

## II. INVESTIGATIONS-

- (1) Injuries: Not preventable "because the suspect resisted". This is just one facet of why the injury occurred. What about other officers that are not injured during a resisting? What about preventative measures-distance from suspect (to close). Pepper spray-ASP etc. (Ask the officers why they didn't use other available tools) [DON'T ASSUME]
- (2) INTERVIEWING: In general you want to try to get as much information as possible to negate a 2<sup>nd</sup> or 3<sup>rd</sup> interview. This applies to complainants, victims, witnesses & suspects. If you need another interview: it may be perceived as inexperience; it may be denied; or the person may have moved out of town or to places unknown or, be dead. Always go into an interview with the idea that you may never see that person again.
- (3) COMPLAINANT: when they want to file a complaint, have them identify what actually is their complaint first, then have them relate what happened. This way you wouldn't need to read their statement of "what happened" and make your own conclusions of what is or is not proper, or is or is not offensive. For example: He said raise your hands or I'll blow your f----ing head off. The language may or may not be his complaint. The actual complaint may be that the officer took his money or made him lay down in water and dirtied up his clothes.
- (4) Leave enough time for the interview. You wouldn't want to rush yourself or give the impression you're rushing the interview to the person being interviewed.

## 25NOV03-SUPERVISORS' TRAINING by 603

(Page 2 of 3 pgs)

- (5) YOU wouldn't want to go with a list of questions. It may be perceived as inexperience and also will inhibit your thoughts. Do your homework-know your investigation. This way you would be able to just write down general areas you want to cover. Also, you wouldn't want to let the person see your notes. (People can read upside down)
- (6) Make the person feel at ease-small talk that you're genuinely interested in. In you interview, get to the WWWWW & H the who, what, where, when, why and how.
- (7) When interviewing you wouldn't want to look at each other or change facial expressions when the person answers a question. This telegraphs to a person that what they said was something of importance or of interest to you. If they have something to hide, you have just put them on the defensive. They will then be cautious when answering other questions, or simply shut down and not answer or provide information.
- (8) When corroborating statements, you wouldn't lead the person. For example: Sam's alibi was that he was at the Holiday Inn in Toledo on 01JAN03 with Joe and Mary, so he couldn't have committed the burglary in Cleveland on that date.

Leading Question: Joe, were you with Sam and Mary at the Holiday Inn in Toledo on 01JAN03?

## Some preferable questions to ask:

Joe, where were you on 01JAN03?

How long were you there? (depending on how he answered)...

Where did you sleep?

How do you remember that particular day?

Were you by yourself? (or)

assume he was by himself and ask something like

what did you do in that strange city all by yourself?

(9) Leave with something like: I may need to talk to you in the future about this matter, would that be okay? You're "bonding" with the person, making the closing remarks non-adversarial and this will make it harder for them to deny you another interview. Ex. After the other interview, you said it would be okay for me to talk to you again. This way you could inquire into why the sudden change of heart if they deny the interview.

## 25NOV03-SUPERVISORS' TRAINING by 603

(Page 3 of 3 pgs)

## III. COMPLAINT RESPONSE:

When answering a complaint, you wouldn't want to number or rephrase what the allegation stated. For example: the officer called me a f----ing a-hole. He also forced me to lay on the ground in a puddle of water.

The officer wouldn't want to rewrite by: Question #1: Did I call him a f----ing a-hole? Answer: No.

Question #2: Did I forcibly make him lay on the ground in a puddle of water? Answer: No.

Just ensure that the allegations were addressed in your statement.

I received the above training on 25 Nov 63

aul styles # (Si

(PRINT NAME AND BADGE NUMBER)

PRESENTER'S SIGNATURE)

# Zahoga Metropolitan Housing Authority

Police Department



This is to certify that

# Sergeant Paul Styles #656

Has Successfully Completed An In-Service Course of Training In

## Defensive Driving

(Sixteen Hours of Instruction)

1200212

Date

Andrés González Chief of Police

Sergeant James Neal #668
Certification BAS22614



TASER X26

Paul A. Styles

Certified User

This Certifies that

Paul A. Styles

and has passed the requirements of the Cuyahoga Metropolitan Housing Authority Police Departmnt TASER X26 training is trained in the proper and safe use of the TASER $^{\otimes}$  X26 Electronic Control Device program under the supervision of a Certified Instructor.

In Witness Whereof, Certified Instructor

Ronald J. Morenz

has certified the successful completion of the training requirements this day:

July 15, 2008

Certified Instructor:

Certified Instructor ID:

040914086011412871346C



## TASER® Non-Lethal Device User Certification Application PRINT LEGIBLY AND CLEARLY PLEASE!

Which device were you certified in (check one or both):   M26 X26
Rank: Sergeant Name: PAUL A. STYLES
Agency: _CMHA Police Department
Phone: _(216) 361-3700 Fax: _(216) 361-3728
Email: PSTYCES Q Cmha Ph. org
Address/State/Zip:5715 Woodland Ave
Cleveland, Ohio 44104
Number of answers correct: 37 out of 39 for X26 only test (80% minimum = 32), or out of 33 for M26 only test (80% minimum = 36)
Instructor to initial that student has successfully completed the following practical application tests:
Demonstration of proper finger positions for aiming and firing.
Polood TASER 1 :
Reload TASER device 5 times in 15 seconds (watch finger position, disqualify for fingers in front of blast doors).
Officer can control unit adequately when commanded "Arm - Spark - Safe" at random.
Officer can remove and reinstall battery correctly.
Draw TASER device (select the unit most likely to be used in the field) hit target at 8 feet, reload, hit 2 <sup>nd</sup> target at 12 feet with laser sight (time limit 10 seconds).
I hereby certify that the above named applicant has successfully completed a minimum of six hours of training, has passed the written test with a score of 80% or better, has passed the above functional tests, has demonstrated proficiency in the function and use of the TASER Electronic Control Device checked above and is hereby certified as a trained user of this system.
Attested by Certifying Instructor: _Lt. Ronald J. Morenz(Print Name)
Date: 7-15-08

Maintain a file copy of this certification in department records.





17800 N 85<sup>th</sup> St., \* Scottsdale, AZ 85255 \* USA \* 800-978-2737 \* Fax 480-905-2034 www.TASER.com

## VERSION 14 TASER® X26 User Certification Test

PRINT LEGIBLY AND CLEARLY PLEASE!				
Name: Pend 57/6 Dept. / Company: CMHA Police Depa	rtment			
Rank: Sirgiant Email: PSTVLES @ Cmm Ps	0.00			
Phone:_(216) 361-3700 Fax: _(216) 361-3728	—— )			
Address:_5715 Woodland Ave. Cleveland, Ohio 44104				
Training Date: <u>/5Jul 68</u> Location: _CMHA Police Department				
<ol> <li>What do the green blast doors indicate on a TASER cartridge?</li> <li>a) 21 ft of line, extended probe needle, regular probe weight</li> <li>b) 25 ft of line, regular probe needle, heavier probe weight</li> <li>©) 25 ft of line, extended probe needle, heavier probe weight</li> <li>d) 21 ft of line, regular probe needle, regular probe weight</li> </ol>	ā			
2. Electricity follows;				
a) The path of most resistance b) From top to bottom following gravity				
(c) The path of least resistance between the probes d) Or flows to any metal in contact				
3. If you see a "P" on the CID of a TASER X26;  a) Immediately pull the DPM out  b) Turn on the device and spark test it  c) Pull DPM out during boot up sequence  (d) Leave it alone until after it has finished the boot up sequence				
4. According to TASER V14, the proper term to describe the TASER Devices is:  a) Propelled Energy Device b) Conducted Energy Weapon C) Electronic Control Device d) Extended Stun Device				

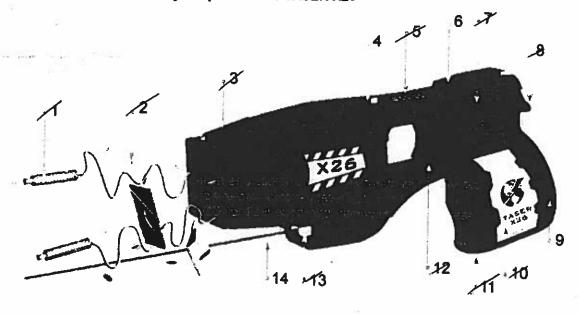
13. Which part of the human nervous system functions as the Command Center? a) Nerve Expressway b) Motor nervous system c) Sensory nervous system d)) Brain and Spinal cord 14. The TASER X26 ECD operates at a peak open gap 50,000 volts. A normal electrical wall outlet in the USA operates at about 110 volts and can be dangerous to a human. What is the main reason the electrical output of the TASER ECD is safer? Because the amps of the ECD are extremely low b) Because the amps are extremely high c) Because the wall outlet is pulsed energy d) Because the joule output of the ECD is 300 times greater 15. While a violent subject is incapacitated by the affects of the TASER ECD and it is reasonably safe to do so, cover officer(s) should attempt to control/cuff the subject under power. Doing so may: a) Reduce the need for additional cycles b) Reduce the likelihood the subject will roll during the cycle c) Reduce the potential of injury to the officer(s) because the subject is incapacitated only during the cycle d) All of the above 16. The probes are propelled from the TASER cartridge by: a) Primer propellant b) Compressed Argon gas c) Compressed Nitrogen d) Compressed blended gas (proprietary secret blend) 17. The TASER X26 high peak arcing voltage of 50,000 volts only occurs when the arc is required to jump a gap such as between the electrodes on the end of the X26, or when a probe lodges in loose clothing and must jump the gap to the body. When traveling across the human body, the peak voltage drops to approximately; a) 20,000 b) 10, 000 5,000 1,200 18. During TASER voluntary exposures which of the following are required safety rules? a) Always use two spotters when volunteer is standing b) Spotters must hold volunteers under the armpit to avoid twisting their shoulder The volunteer may be held up or carefully lowered to the ground All of the above

12. According to the TASER V14 training the term used for describing the incapacitating

affects of the TASER ECD is:

a) Electro-muscular disruption (EMD) b) Electro-muscular incapacitation (EMI) c) Neuro-muscular disruption (NMD) (6) Neuro-muscular incapacitation (NMI)

## TASER® X26 NOMENCLATURE Identify the parts of the TASER X26



A.	Trigger	12
В.	Digital Power Magazine (DPM)	3
C.	TASER Cartridge	3,
D.	Mechanical Sight	4
E.	Safety Switch	7
F.	DPM Release Button	9
G.	Stainless Steel Shock Plate	10
Н.	Built-in Laser (pointing to beam)	14
I.	Central Information Display (CID)	8
J.	Probes	
K.	Low Intensity Lights	_13
L.	Serial Number Plate	_5
М.	Illumination Selector Switch	6
N.	AFID Tags	2



TASER X26

Paul A. Styles

Certified User

This Certifies that

## Paul A. Styles

and has passed the requirements of the Cuyahoga Metropolitan Housing Authority Police Departmnt TASER X26 training is trained in the proper and safe use of the TASER $^{\it o}$  X26 Electronic Control Device program under the supervision of a Certified Instructor.

In Witness Whereof, Certified Instructor

Ronald J. Morenz

has certified the successful completion of the training requirements this day:

July 15, 2008

Certified Instructor:

Certified Instructor ID:

040914086011412871346C

## City of Cleveland



## Police Academy

To all who shall see these presents, greeting: This is to certify that Sgt. Paul A. Styles #656

HAS COMPLETED A COURSE OF INSTRUCTION IN

8 hour Crisis Intervention Training

800E, 9 ylus







# UNITED STATES DEPARTMENT OF TRANSPORTATION

FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
NATIONAL TRAINING CENTER
DRUG INTERDICTION ASSISTANCE PROGRAM





# **Cuyahoga County Sheriff's Department**

Certifies

## Paul A. Styles

Attended and Participated in

# Commercial Motor Vehicle Criminal Interdiction

Rapid Risk Recognition, Assessment, and Response

Cleveland, Ohio ~ June 24 through June 26, 2008

Shannon Chelf /

Federal Motor Carrier Safety Administration Drug Interdiction Assistance Program

Captain Michael Jackson
Cuyahoga County Sheriff's Department
Training Facilitator



## ACTICAL BATON INSTRUCTOR

PAUL STYLES

Awarded in Recognition of technique, ability and knowledge that have been demonstrated and tested in a competency based instructor training program for the ARMAMENI SYSTEMS and PROCEDURES, INC ASP Tactical Police Baton sanctioned by the Training and Certification Section of

Awarded in Cleveland, Ohio

on March 6, 1994

Donald L. Rogner

DONALD L. ROEGNER President

Samuel II the Certified Trainer

**ASP Tactical Baton** 

## 24SEP03-SUPERVISORS' TRAINING by 603 (Page 1 of 2 pgs)

## I. Revised CMHAPD94-016

## II. Investigations:

- 1. Subject bar not containing enough information. In a request for Departmental Charges recently, I had to read (2) full pages before I found out who the supervisor wanted charges against. It should contain information similar to the following:
  - 1) What the investigation is about;
  - 2) Who is the investigation is about;
  - 3) Investigation or LERS number. Examples:
    - (1) Investigation #X00-0000: Request for Departmental Charges against P.O. Joe Smith #00 for conduct unbecoming.
    - (2) Investigation #X01-0000: Improper procedures complaint against P.O. Joe Smith #00
- 2. All reports contained in the investigation must be consistent on major points, especially the subject of the investigation. Examples:
  - 1) Was a key lost or stolen or just not issued;
  - 2) Who took photos or collected the evidence.
- 3. In citizen complaints, officers receive a copy of the written complaint. This written complaint can be a copy from the citizen or one of investigative units in the Department.
  - 1) Supervisors' reports must contain the fact that a copy was given to the officer for review prior to the officer making a report.
  - 2) Supervisors must advise the officers that all allegations on the complaint must be addressed in their report. If not, then the determination of the investigation will be made on the information at hand.
  - 3) Supervisors' reports must bring to the surface what allegations were not answered by the officer..

So basically, if an officer does not deny an allegation, for example, and the investigator cannot bring forth evidence that the allegation is untrue, then the allegation must be true.

- 4. If just reviewing officers 001 reports, it would only be necessary to state, for example,
  - 1) "In review of reports submitted by P.O. Smith, P.O. Jones and P.O. Doe, all are consistent with the fact that P.O. Miller did give Miranda to the suspect."; or
  - 2) "In review of reports submitted by P.O. Smith, P.O. Jones, they are consistent with the fact that P.O. Miller did give Miranda to the suspect. However P.O. Doe stated he did not hear P.O. Miller give Miranda to the suspect. Further investigation reveals that P.O. Doe had went to his patrol car to obtain a camera when Miranda was given to the suspect."
- 5. So you do not have to re-write what each officer stated in his report if consistent. But you must point out discrepancies and attempt to justify them.

## 24SEP03-SUPERVISORS' TRAINING by 603 (Page 2 of 2 pgs)

## III. Complaints of sexual misconduct.

- Notify me immediately and directly. 1.
- 2. If I don't respond in a timely manner (about 15 minutes) then make notification to Commander Barto.
- DO NOT attempt to mediate a sexual misconduct issue. 3.
- If someone reports an incident or conversation that may have a sexual 4. connotation to you, you are to refer to #1, 2 & 3 above.
- Phrases to be cautious of: "off the record" conversation; "just for your 5. information"; "just talk to him because I don't want any trouble", etc.

## Time card and Matrix entries regarding SICK time usage. IV.

- When an officer calls off sick, both the time card and Matrix is marked so even if the officer tells you or you're aware the officer does not have any
- The proper procedure is the CMHAPD94-050 form is submitted either 2. with the time card or forwarded through Official Channels if time cards have already been processed.

I received the above training on 9/24/03

PRESENTER'S SIGNATURE)



Dice Departmen



This is to certify that

# Sergeant Paul Styles #656

Has Successfully Completed An In-Service Course of Training In

# Crisis Intervention | Ethics | Biased Based Policing

(Eight Hours of Instruction)

10/6/2011

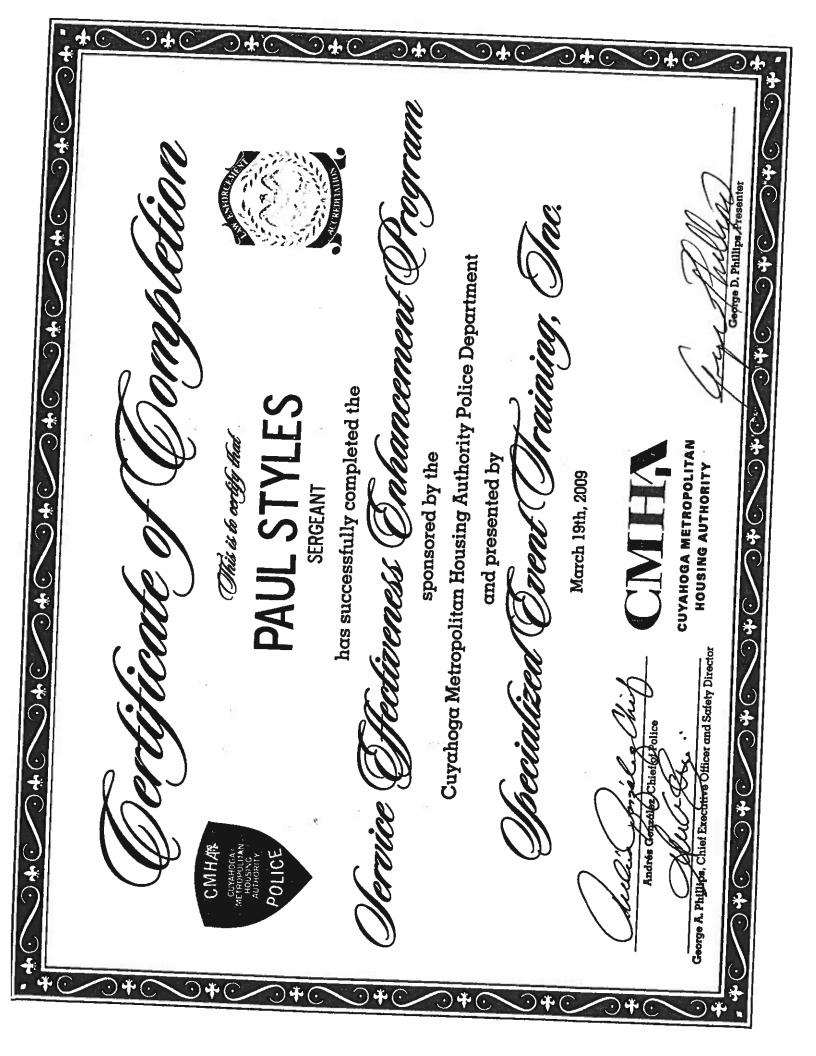
Date

**Andrés González** Chief of Police

17. PC #632

Instructor

Instructor





Crisis Intervention | Ethics | Biased Based Policing Has Successfully Completed An In-Service Course of Training In

(Eight Hours of Instruction)

Date

Andrés González Chief of Police

Instructor

4. R. 4637

Instructor



## American Heart Association

Fighting Heart Disease and Stroke

## Heartsaver CPR

Paul Styles

This card certifies that the above individual has successfully completed the national cognitive and skills evaluations in accordance with the curriculum of the AHA for the Heartsaver CPR Program. Adult CPR / Pediatric CPR

03/26/2003

03/2005

Issue Date

Recommended Renewal Date

## OHIO LEADS

Certifies that

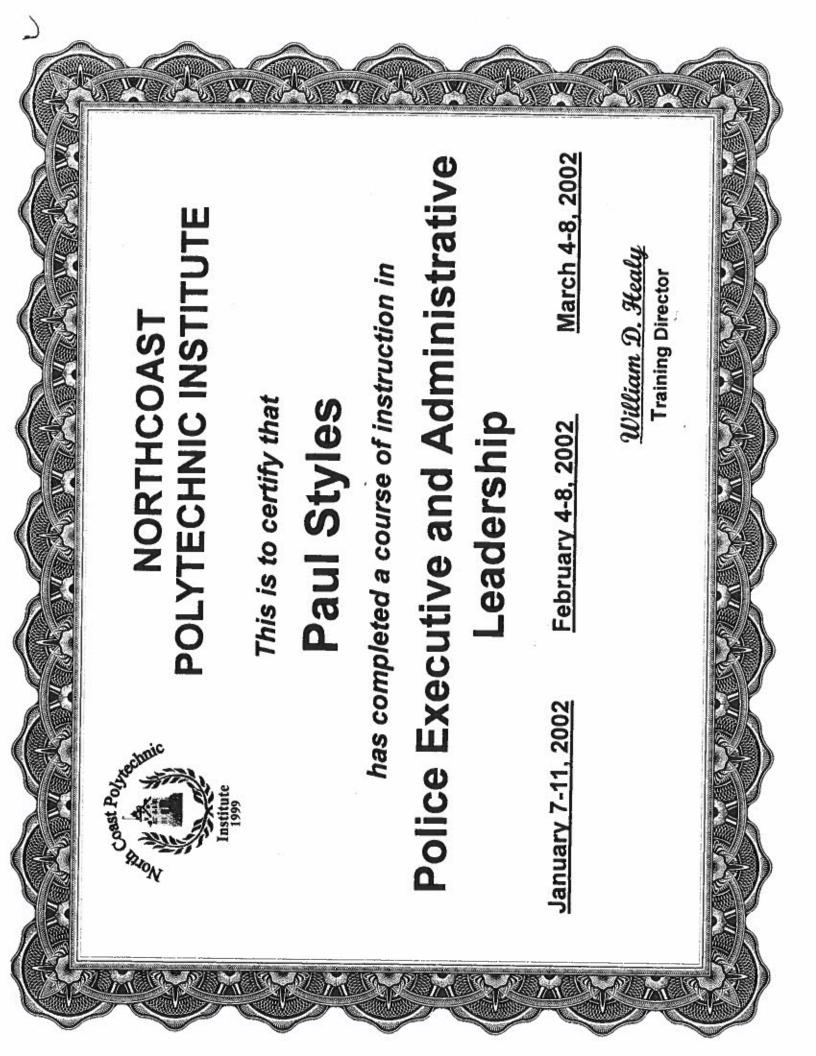
has completed a course of instruction in

by the Ohio Law Enforcement Automated Data System Leads Terminal Operation and Usage as prescribed

Administrative Rule 4301:2-10-03 (G) (H) (I).

OHIS CONTROL TERMINAL OFFICER NOVEMBER







### **AWARDS THIS**

# CERTIFICATE OF TRAINING



IN RECOGNITION OF SATISFACTORY PARTICIPATION IN THE COMMISSION'S COURSE OF INSTRUCTION

Terrorism Overview

PROVIDED AT THE CALEA CONFERENCE IN

Jacksonville, FL ON

March 2002

Sylvester Daughtry, In. EXECUTIVE DIRECTOR

Harold 7. LeMay, In. TRAINING COORDINATOR







### **AWARDS THIS**

# CERTIFICATE OF TRAINING

Paul Styles

IN RECOGNITION OF SATISFACTORY PARTICIPATION IN THE COMMISSION'S COURSE OF INSTRUCTION

PROVIDED AT THE CALEA CONFERENCE IN Racial Profiling

Jacksonville, FL

March 2002

Sylvester Daughtry, In. EXECUTIVE DIRECTOR

Harold 7. LeMay, In. TRAINING COORDINATOR ENTITED



### **AWARDS THIS**

# CERTIFICATE OF TRAINING

Paul Styles



Concerns & Challenges

PROVIDED AT THE CALEA CONFERENCE IN Jacksonville, FL

March 2002

Sylvester Daughtry, Jr. EXECUTIVE DIRECTOR

Harold 7. LeMay, In.

TRAINING COORDINATOR







### **AWARDS THIS**

# CERTIFICATE OF TRAINING

O

Paul Styles

IN RECOGNITION OF SATISFACTORY PARTICIPATION IN THE COMMISSION'S COURSE OF INSTRUCTION

Verbal Judo

PROVIDED AT THE CALEA CONFERENCE IN

Jacksonville, FL ON

March 2002

Sylvester Daughtry, In.
EXECUTIVE DIRECTOR

Harold 7. LeMay, In.

TRAINING COORDINATOR

ENTERED



### **AWARDS THIS**

# CERTIFICATE OF TRAINING



IN RECOGNITION OF SATISFACTORY PARTICIPATION IN THE COMMISSION'S COURSE OF INSTRUCTION Crime Prevention through

Jacksonville, FL

PROVIDED AT THE CALEA CONFERENCE IN

March 2002

Sylvester Daughtry, Jr. EXECUTIVE DIRECTOR

Harold 7. LeMay, In. TRAINING COORDINATOR





## Iraining Commission Ohio Peace Officer

PAUL A. STYLES # 656

has participated in the advanced training course CUYAHOGA METRO HOUSING AUTHORITY P.D. IN-SERVICE

at the Ohio Peace Officer Training Academy.

August 7-9,2000

Betty D. Wortgomen

Betty D. Montgomery
Attorney General

Jeanne A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director Ohio Peace Officer Training Commission



## City of Cleveland

Nolice.



Academy

To all who shall see these presents, greeting: This is to certify that

PATROL OFFICER PAUL STYLES #25
(CMHA)

Flas successfully completed

1995 INSERVICE TRAINING PROGRAM
(40 Hours)

OCTOBER 16-20, 1995

c Jones

The A. Chelland

Commanding Officer



Sir:				
Officer's 1	NameSTYLES	PAUL		Badge:656
	Last	First	M.I.	Dauge
Observation	on Period: from <u>12</u>	2/12 to 12/2	<u>5/</u> 98	
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Include any	L TRAINING REG remedial training to continual remedial	hat was given.	TIONS Especially no	ote when a probationary officer does no
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\$  \$			Hesp Naslau	pectfully;



Sir:				ž.	
Officer's Name	Styles	Paul	A	Badge: 656	1
0.000	Last	First	M.I.	Dauge.	
Observation Per	od: from 12-	12-98 <sub>0</sub> 12-	-25-98		
PROFESSIONAL EQUIPMENT U The time that attitude and He has shown y	entary require aining. This L KNOWLED SAGE. Especial had Sgt. professions	ed concerning should included the should include the should include the should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be shou	g the probate de but is no RANCE, JU traordinary inder my Su ard his ne	ionary officer's overall periot limited to ATTITUDIN DGEMENT, JOB RELATE performance and or noticea pervision he has shown asignment as being a under pressure, also for projects and carries to	AL FACTORS, DSKILLS AND ble deficiencies. a postive a supervisior.
REMEDIAL TR Include any reme respond to contin	dial training tl	nat was given		note when a probationary	officer does not
				- 0	
			R	espectfully;	1 2, #C. 3,



Sir:					
Officer's Name	e <u>Milés</u> Last	<i>FAUL</i> First	<u> </u>	Badge:	Ì
Observation Pe	eriod: from 🎉	13:98 to 12:20	(4)		
PROFESSIONA	mentary requir training. This AL KNOWLEI	ed concerning s should includ DGE, APPEAR	the probationale but is not licance, JUDGI	ary officer's overall perimited to ATTITUDI EMENT, JOB RELAT ormance and or notice of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State	NAL FACTORS, ED SKILLS AND eable, deficiencies.
REMEDIAL TI Include any rem respond to conti	nedial training t	hat was given.		te when a probationar	y officer does not
1.5			Respe	ectfully; <u>Alfrichwike</u> # <u>640</u> D'TRAINING OFFIC	<u>Ø</u>



Sir:				
Officer's Name	Styles	Pau1		Badge:656
	Last	First	M.I.	Baago
Observation Peri	od: from	2/15 to12/	23	
this period of tra PROFESSIONAL	entary require aining. This LKNOWLED	ed concerning should includ OGE, APPEAR	the probation the but is not LANCE, JUD	onary officer's overall performance during t limited to ATTITUDINAL FACTORS OGEMENT, JOB RELATED SKILLS ANI erformance and or noticeable deficiencies
Seargeant	Styles ha	s shown a po	ositive at	titute for learning,
He follows	instructi	ons, and kno	ows his law	erwork and assignments. ws. His apperance is d clean uniforms.
REMEDIAL TRAINCLUDE any remeders respond to contin	dial training t	hat was given.		note when a probationary officer does no
			Res	spectfully;
\$			FIE	Brenning #644 ELD TRAINING OFFICER

## City of Cleveland

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Academy

To all who shall see these presents, greeting: This is to certify that

Sergeant Paul Styles (CMHA)

Has successfully completed POLICE SUPERVISION (40 HOURS)

12-30-98 THROUGH 1-8-99

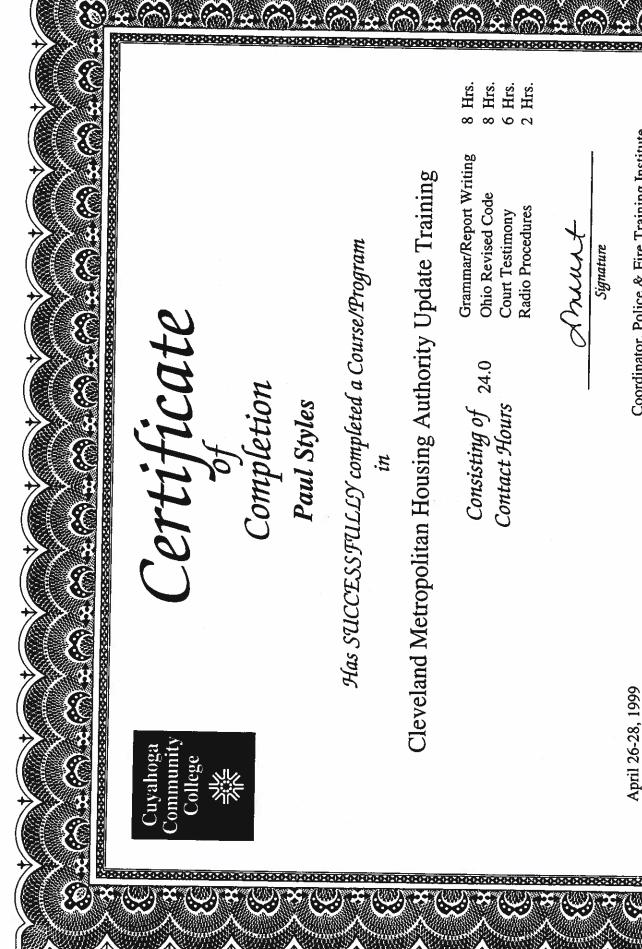
Course Coordinator

Petro OKI, Dani

Commanding Officer

### ATTENTION DODI MOUNT: CCC TEST SCORES FOR SUPERVISORY SCHOOL

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	ELIZABETH	CER CE		
BUTLER	MICHAEL	SERGEANT		P 1 0U-13
DILLIONS	RONALD	SERGEANT	CLEVELANI	D 89-B
DODGE	MICHAEL	SERGEANT	CLEVELANI	
DUNN	BRIAN	SERGEANT	CLEVELANI	87-B
EPPINGER	ANITA	LIEUTENANT	CLEVELAND	
FULTZ	LESTER	SERGEANT	CLEVELAND	91-A
GABA	BENJAMIN	LIEUTENANT	CLEVELAND	83-B
GILL	JOSEPH	SERGEANT	CLEVELAND	93-A
GUINN	MELVIN	SERGEANT	CLEVELAND	78-C
HEWITT		SERGEANT	СМНА	71-C
HILL	DAVID	SERGEANT	CLEVELAND	89-B
JACKSON	DENNIS	SERGEANT	CLEVELAND	
JANUSCZAK	EDDIE	SERGEANT	CLEVELAND	
KETTERER	MICHAEL	SERGEANT	CLEVELAND	<del></del>
KINSINGER	MARK	LIEUTENANT	CLEVELAND	85-B
KUKULA	PATRICIA	SERGEANT	CLEVELAND	87-B
	JOHN	LIEUTENANT	CLEVELAND	78-C
LASKOWSKI	MARGARET	LIEUTENANT	CLEVELAND	92-A
MACKAY	SHARON	LIEUTENANT	CLEVELAND	90-A
MCHUGH	TERENCE	SERGEANT	CLEVELAND	79-C
MEDLEA	HUGHLEAN	SERGEANT	CLEVELAND	91-A
MERRIFIELD	STEPHEN	SERGEANT	CLEVELAND	82-B
MILLER	ROBERT	LIEUTENANT	CLEVELAND	87-B
MITCHELL	THOMAS	SERGEANT	CLEVELAND	79-C
MONE	WILLIAM		CLEVELAND	85-B
MORROW	LEROY	SERGEANT	CLEVELAND	87-B
OBER	WILLIAM	SERGEANT	CLEVELAND	87-B
PERRY	PATRICIA	LIEUTENANT	CLEVELAND	81-B
PETKAC	JOSEPH	SERGEANT	CLEVELAND	71-C.
PLENT	JAMES	LIEUTENANT	CLEVELAND	94-A
PROROCK	LEONARD	SERGEANT	CLEVELAND	85-B
RAYNARD	PAUL	SERGEANT	CLEVELAND	89-B
RICH	ROY	SERGEANT	CLEVELAND	89-B
RICHISSIN		LIEUTENANT	CLEVELAND	88-B
ROWLEY	TIMOTHY	SERGEANT	CLEVELAND	91-A
RYAN	DANIEL	SERGEANT	CLEVELAND	<del></del>
HANK	STEVEN	SERGEANT	CLEVELAND	91-A
HAUGHNESSY	MICHAEL	SERGEANT	СМНА	93-A
HEEHAN	PAUL	SERGEANT	СМНА	82-B
HOULDERS	TIMOTHY	LIEUTENANT	CLEVELAND	82-B
TITT	TERENCE	SERGEANT		71-C
TOKES	ROBERT	SERGEANT	CLEVELAND	82-B
	ANTHONY	T YER YOUR	CLEVELAND	93-A
TYLES	PAUL	OFD OF	CLEVELAND	85-B
HOMAS	WALTER	0000	СМНА	82-B
RAINE		CDD -	CLEVELAND -	84-B
ULETA		OFF	CLEVELAND	93-A
ILSON	) (Dr	SERGEANT	CLEVELAND	87-B



Coordinator, Police & Fire Training Institute



Sir:						
Officer's Name	List List	Paul First	M.I.	Badge: <u>6656</u>	្នំ m	
Observation Pe	riod: from /23	1991 to 2/5/99				
PROFESSIONA EQUIPMENT L  Sergeout  Lis alleted  celiosops Vi  williag K  grod Jana  always read  ley hespelf	rentary required raining. This is a Lind KNOWLED of Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start Start St	GE, APPEARANCE ally note extraorder to learn can	probationary ut is not limi CE, JUDGEM linary perform alway life of a life of a location cofetimes factorize factorize	ENT, JOB RELAMANCE and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and or notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification and notification a	esidetts are onds a good vars dessen	
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!			Araleectly FIELD T	ANIX OFFICE	0 650 CER	
rev 6/95			•	•		



Sir:					
Officer's Nan	ne <u>STyläs</u> Last	Paul First	<u>А.</u> М.І.	Badge: <u>6.56</u>	
Observation F	eriod: from 1/2	3/99 to 1/31	129		
this period of PROFESSION EQUIPMENT	AL KNOWLED	ed concerning should include of the should include of the should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should be should b	the probationale but is not I ANCE, JUDG	ary officer's overall performinited to ATTITUDINAL EMENT, JOB RELATED: formance and or noticeable of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continues of the formance and continue	C FACTORS, SKILLS AND
nclude any ren	RAINING REC nedial training th inual remedial t	iat was given	FIONS Especially no	te when a probationary off	icer does not
			Respe	ctfully;	
!			FIELE	TRAINING OFFICER	



Sir:				
Officer's Name	STyles Last	First	<u>A</u> M.I.	Badge: <u>6.<b>56</b></u>
Observation Per	riod: from //3/	1/99 to 2/6/9	79	
PROFESSIONA EQUIPMENT L  Sigt. Styles C	nentary require raining. This LKNOWLED JSAGE. Espec Entany STENT Cract Torum	ed concerning should include of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning of the concerning o	the probation the but is not ANCE, JUDGaordinary pe	nary officer's overall performance during limited to ATTITUDINAL FACTORS, GEMENT, JOB RELATED SKILLS AND rformance and or noticeable deficiencies.  I LENEY ALL ASPECTO OF MIS APPENRANCE AND AND AND AND AND AND AND AND AND AND
REMEDIAL TR Include any reme respond to contin	dial training tl	nat was given.	TIONS Especially n	ote when a probationary officer does not
	Χ,			
!			Res. FIE	S. Juni Villy;  LE TRAINING OFFICER



Sir:

Officer's Name STYLES PAUL A Badge: 656  Last First M.I.
Observation Period: from 1/23/99 to 1/30/99
F.T.O. OBSERVATIONS AND COMMENTS:  Narrative commentary required concerning the probationary officer's overall performance during this period of training. This should include but is not limited to ATTITUDINAL FACTORS, PROFESSIONAL KNOWLEDGE, APPEARANCE, JUDGEMENT, JOB RELATED SKILLS AND EQUIPMENT USAGE. Especially note extraordinary performance and or noticeable deficiencies.  SET PAUL STYLES FESTE IS VERY GOOD IN THE PROCESSING OF REPORTS.
ANSWER HE WILL ASK THEN GET BACK TO DES TOURS OF
OTHER SUPERVISORS AND LEADERS FOR SUPPORT AND GUIVANCE.
REMEDIAL TRAINING RECOMMENDATIONS Include any remedial training that was given. Especially note when a probationary officer does not respond to continual remedial training.  SET STYLES #656 WAS SHOWN HOW TO PROCESS DAILY ROSTERS AND LEAVE REQUESTS, UNDERSTANDS WHICH BUILDINGS AND ASSIGNMENTS SHOULD BE COVERSO FIRST AND WHY UNDERSTANDS THE PRIORITY OF THIS DEPARTMENT.
Respectfully;  Kincle Mily # # # # # # # # # # # # # # # # # # #



Sir:

Officer's Name	STYLES, A	PAUL	A	Badge: <u>65</u> 6
	Last	First	M.I.	2 a a g o :

Observation Period: from 1/31/99 to 2/5/99

### F.T.O. OBSERVATIONS AND COMMENTS:

Narrative commentary required concerning the probationary officer's overall performance during this period of training. This should include but is not limited to ATTITUDINAL FACTORS, PROFESSIONAL KNOWLEDGE, APPEARANCE, JUDGEMENT, JOB RELATED SKILLS AND EQUIPMENT USAGE. Especially note extraordinary performance and or noticeable deficiencies.

SET PAUL STYLES FEEL HAS A GREAT ATTITUDE TOWARD IS NEW POSITION AND IS VERY WILLING TO ASK QUESTIONS. HE REPRESENTS HIMSELF AND THE DEPARTMENT VERY WELL AND WILL BE A GOOD SUPERVISOR AND LEADER IN TIME.

### REMEDIAL TRAINING RECOMMENDATIONS

Include any remedial training that was given. Especially note when a probationary officer does not respond to continual remedial training.

JET STYLES #656 WAS PROVIDED INSTRUCTION WITH PAYROLL AND THE PROCESSING AND OF TIME CARDS. SGT STYLES #656 SHOWED INTREST AND WAS VERY THROUGH IN THE COMPLETION OF SAME, IN TIME AND WITH PRACTICE WILL COMPLETE THIS TASK WELL HE FURTHER WILL BE AN ASSET TO MY PLATOON ASSIENCE TO

Respectfully;

FIELD TRAINING OFFICER



### **CMHA CUYAHOGA METROPOLITAN HOUSING AUTHORITY** POLICE DIVISION

TYPE:

Inter-Office Correspondence

TO:

Stanley Murrey, Patrol Commander

FROM:

James E. Tufts, Lieutenant, First Platoon

DATE

24 January 99

SUBJECT: Performance Rating /Sgt Paul A. Styles #656

Sir:

I am respectfully requesting an extension for the performance evaluation for Sgt Paul A. Styles until Tuesday 26 January 99.

### - C.M.H.A.P.D. PERFORMANCE RATING CHECKLIST

Paul A. Styles # 656	
EMPLOYEE'S NAME /	BADGE#
1-9-99 Hbes 1-22-49	



			•
RATING PERIOD	/ SUPERVISOR	_	
A numerical value shall b	e placed in the space next to	the item being evaluated as follows	: 1-heino
the lowest, 10-being the l	nighest, 6-being average wi	th 5-just below and 7-just above.	, , , , , , , , ,
QUALITY OF WORK		3	
Accuracy		Accepts Responsibility	8
Judgement	<u>8</u>	Cooperative	6
Knowledge of Duti	es <u>7</u>	Attitude Toward Departm	ent
Thoroughness		Goals & Objectives	5

Knowledge of Duties	7 Attitude Toward Department	
Thoroughness	7 Goals & Objectives	5
Ability to Learn	8 Accepts/Acts on	
Interest in Work	9 Constructive Criticism	7
Ability to Make Reports	b personal relationships	
Proper Care of Equipment	8 Tactful	8
Compliance/Policy-Directives		δ
Court Cases/Preparation		9
& Presentation	Proper Uniform / Dress	9
QUANTITY OF WORK	FOR RATING OF	
Production	7 SUPERVISOR ONLY	
Organization of Time	7 Obtains Desired Work Resul	ts
Industriousness		8
Notice to Violator & Misd.	Explains Well the Work to	
Citations Issued	wif be done	8
Arrest Record	NA Systematically Checks the	
DEPENDABILITY	work of Subordinates	7
Reports for Work on Time	8 Knowledge & Conformity to	
Requires Little Supervision	7 Departmental Directives _	7
Follows Instructions	& Readily Accepts & Assumes	

SUMMARY COMMENTS

Set Parl Styley #654 was assigned to Front Platon For a 2 work Perios of 1.9.99 That is 22.99 For a resolution of Front Supervisor. He HAS a Good work in Knowledge no For as mother decisions on the street, The massing of the focus of the year directed toward the administrative duties. The Focus of the Yearine was on Union Contents, Review and procession of Field Reports, Officer Doty Reports Report writing and I may Credy a Preparedian too Pappell, Six Styles Has Great genterfield for a supervisor, However the Fret that He Has Just been promoted and the Newwork of the Foot that He Has Just been promoted and the Newwork of the Foot We wind to Slow Hown and Review His wick Capabilly and Also in some Administration dutinglace a Little more thanks in this decision making.

De Lame (upp #1013

Responsibility Including

OFFICER SIGNATURE

SUPERVISOR SIGNATURE

### WEEKLY OBSERVATION REPORT FOR PROBATIONARY SUPERVISOR



AUTHORITY
Sir:
Supervisor' Name Styles Paul A Badge: Last First M.I.
Observation Period: from 1-9-89 to 1-22.99
WATCH COMMANDER/UNIT OIC OBSERVATIONS AND COMMENTS:  Narrative commentary required concerning the probationary officer's overall performance durin this period of training. This should include but is not limited to ATTITUDINAL FACTORS PROFESSIONAL KNOWLEDGE, APPEARANCE, JUDGEMENT, JOB RELATED SKILL AND EQUIPMENT USAGE. Especially note extraordinary performance and or noticeable deficiencies.  The first that the found the form of Good attitude founded the Job and A Good work in Knowledge at decision Maximu a person and Roplet weeting a fevire . He Roplet to work on true and is that the found in the Bookseenice.
REMEDIAL TRAINING RECOMMENDATIONS Include any remedial training that was given. Especially note when a probationary supervisor does not respond to continual remedial training.  Take that to be remaded to slow down on some instructory to the property of the property.

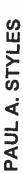
Respectfully;

WATCH COMMANDER/UNIT OIC



## Lertificate of Jury Service

THE JUDGES OF THE COURT OF COMMON PLEAS OF THE COUNTY OF CUYAHOGA EXTEND THEIR GRATITUDE AND APPRECIATION TO



FOR CONSCIENTIOUS, DILIGENT AND MERITORIOUS SERVICE AS A JUROR IN THE COURT OF COMMON PLEAS OF THE COUNTY OF CUYAHOGA

IN WITNESS WEREOF we set our hand and seal this 30TH day of June, 1999



Administrative Judge Richard J. McMonagle

Judge Judith Kilbane-Koch Judge Eilcen A. Gallagher Judge Peggy Foley Jones Judge Lillian J. Greene Judge Nancy A. Fuerst Judge Burt W. Griffin Judge Daniel Gaul Judge Thomas Patrick Curran Judge Carolyn B. Friedland Judge Daniel O. Corrigan Judge Stuart A. Friedland

Judge William J. Coyne

Judge Anthony O. Calabrese Jr.

Judge Janet R. Burnside

Judge Mary J. Boyle

Judge Frank D. Celebrezze Jr.

Judge Patricia A. Cleary

Judge Kenneth R. Callahan

Judge Bridget M. McCafferty Judge Timothy McCormick Judge Nancy R. McDonnell Judge Timothy J. McGinty Judge Ann T. Mannen Judge David T. Matia

Judge Christine T. McMonagle Judge S. Strickland Safford Judge Kathleen Ann Sutula Judge Thomas J. Pokorny Judge José A. Villanueva Judge Nancy M. Russo Judge Ronald Suster

Court Administrator William L. Danko

### FRED PRYOR SEMINARS

THIS IS TO CONFIRM THAT

SGT. PaUL STYLES

COMPLETED THE SEMINAR ONTITUED

Las Olya date August 04, 1999

B.B CONTINUING EDUCATION UNITS

YOUR SIGNATURE VALIDATES THIS CERTIFICATE



Paul A. Styles

has successfully completed the national cognitive and skills evaluations in accordance with the curriculum of the American Heart Association for the BLS for Healthcare Providers Program.

10/19/99

issue Date

10/19/01

Recommended Renewal Date

### C.M.H.A.P.D. PERFORMANCE RATING CHECKLIST

Styles, Paul	# 656				AU
EMPLOYEE'S NAME	/BADGE	_			AU
January 1,1999 to January 2000	0 Vazquez, Anastacio T				
RATING PERIOD	/ SUPERVISOR	<del>`</del>			
A numerical value shall be 10-being the highest 6-be	placed in the space n	evt to th	a itam haina analana 1	6.11	
10-being the highest, 6-be	ing average with 5 is	ust halar	tiem being evaluated as	s tollows; 1-being	the lowest.
QUALITY OF WORK	mig average with 5-j	ust belov	v and /-just above.		
Accuracy		7	A 4 D 21 111		
Judgement		8	Accepts Responsibili	ty	8
Knowledge of Duties		7	_ Cooperative		8
Thoroughness		8 7 7	Attitude Toward Dep	artment	
Ability to Learn		7 -	Goals & Objectives		7
Interest in Work		8	Accepts/Acts on		
Ability to Make Reports		7	Constructive Criticism		7
Proper Care of Equipment		7	PERSONAL RELAT	<b>FIONSHIPS</b>	
Compliance/Policy-Directi	IVeo	7 8	_ Tactful		7
Court Cases/Preparation	1462	8	Courteous		7
& Presentation		~	Proper Appearance		7 7
QUANTITY OF WORK		<u>7</u>	Proper Uniform / Dres		7
Production Production		_	<u>FOR RATING</u>	<u>OF</u>	
Organization of Time		$\frac{7}{7}$	SUPERVISORS (	ONLY	
Industriousness		7	Obtains Desired V	Vork Results	
Notice to Violator & Misd.		7	From Subordinate	S	
Citations Issued		_	Explains Well the	Work to be	
		7	Done		
Arrest Record		7	Systematically Ch	ecks the	
DEPENDABILITY			Work of Subordina	ates	
Reports for Work on Time		8 8	Knowledge & Con		
Requires Little Supervision		8	Departmental Dire	ctives	
Follows Instructions		8	Readily Accepts &	Assumes	
			Responsibility Incl	luding	
CID O A DYL CO			Disciplinary Action	n	
SUMMARY COMMENT	'S				
Sgt. Styles # 656 has shown frunder pressure. He is liked by	om day one that he can	except re	sponsibility, follow instru	ctions and perform	well
under pressure. He is liked by compliments from residents from	everyone he comes in c	ontact an	d in more than one occasion	ons I have received	
improvement in all areas of the his peers and subordinates.	Job. Sgr. Styles was al	exceller	it choice for a supervisor.	Sgt. Styles is respec	ted by
	<del></del>		<del></del>		
		<del></del>			
	0	0.4			
	J'GT. Naul	Jit	W/10 # 656	01.11	i. aa
OFFICER SIGNATURE	SUF	ERVIS	OR SIGNATURE	<i>O                                </i>	7 - 0 0
			O CONTROLL	DAIE	
	///		1/2 -	`	
- Jeaslace	Marque	ノଠ		Truesy 1	2 78N
LIEUTENANT/SUPERVIS	OR REVIEW AND	SIGN	ATURE	DATE	1 perces
			1 /	DANIE	
		•		•	

### Training Commission Ohio Peace Officer

### PAUL A. STYLES

has participated in the advanced training course OHIO TRAFFIC CRASH REPORT, OHI

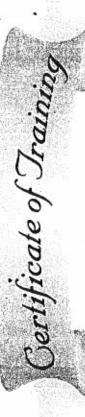
at the Ohio Peace Officer Training Academy. **JANUARY 11, 2000** 

Botter D. Montgomens

Betty D. Montgomery Attorney General

Jefffey M. Merickel, Chairman Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director Ohio Peace Officer Training Commission



Sgt. Paul Styles of the Cuyahoga Metropolitan Housing Authority

is recognized for participation and completion of

Management Skills Development Module I

Managing and Leading Effectively

Training Course

April 27, 2000

Congratulations!

Josie Bell Lindsay

President

Bell & Lindsay, Inc.

### Training Commission Ohio Peace Officer

### PAUL A. STYLES

has participated in the advanced training course CUYAHOGA METRO HOUSING AUTHORITY P.D. IN-SERVICE

at the Ohio Peace Officer Training Academy.

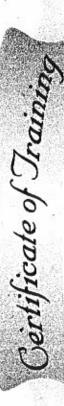
August 7-9,2000

ENTERE

Betty D. Mentgement Betty D. Montgomery Attorney General

John Peace Officer Training Commission

Vernon C. Chenevey, Executive Director Ohio Peace Officer Training Commission



Sgt. Paul Styles of the Cuyahoga Metropolitan Housing Authority is recognized for participation and completion of Management Skills Development Module III

Managing For Desired Results

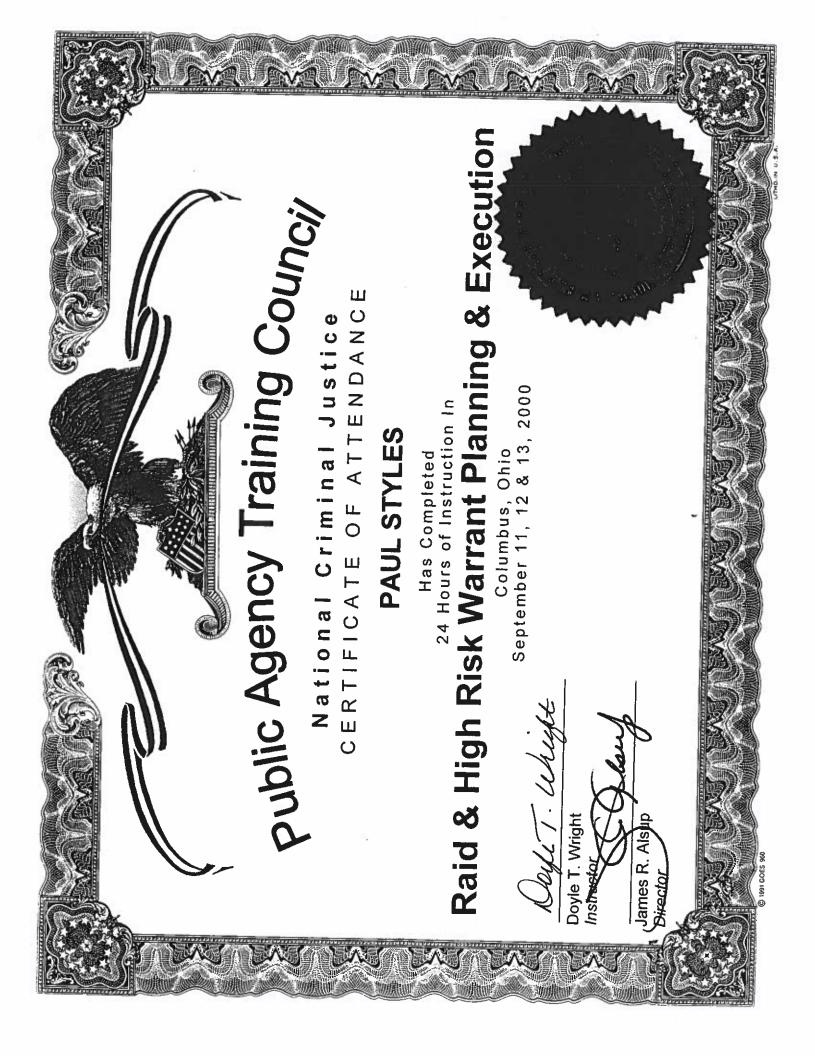
Training Course

June, 2000

Congratulations!

Yore Bell Lindsky President

Bell & Lindsay, Inc.





### C.M.H.A.

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY **DIVISION OF POLICE**



### OC Aerosol Projector End User Test - Page 1 of 2

J 1)	What is the first step in decontaminati	ing a suspect?	
	A. See if he is wearing contact lenses.	B. Reassur	e him that he is all right.
	C. Flush with large amounts of water and expose to fresh air.	D. Have him change his clothes.	
√ 2)	What is the minimum distance between to deploy OC?	en you and the suspect wh	en you are going
	A. 6 Feet B. 1 foot	C <sub>3</sub> Feet	D. 4 feet, 6 inches
<b>/</b> 3)	What is the propellant for Bodyguard OC spray?		
	A Nitrogen B. CO2	C. Alcohol	D. Water
J 4)	If you are justified in using a baton, are	e you justified in using O	C?
	A. YES B. NO	Ţ.	
J 5)	What does a micron measure?	2.5	
	A. 1/60th of an inch.	B. 1/5000 <sup>th</sup>	of an inch.
	C. 1/25000th of an inch.	D. None of	
√ 6)	What is BODYGUARD OC spray?		
	A. Irritant Agent	B Inflamm	atory Agent
	C. Nerve Agent	D. All of th	
√ 7)	You should use first aid cream to stop to A. TRUE B FALSE	he inflammation on the f	ace.
/ 8)	What is the target area for BODYGUA	RD?	
-	FACE		
<b>/</b> 9)	What is the method for firing BODYGU	JARD?	
	A. The Criss-Cross	B. The Serp	entine
	C. The Side-to-Side	D) All of the	

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

5715 Woodland Avenue Cleveland, Ohio 44104

EXERCISE FACILITY DISCLAIMER: THE CUYAHOGA METROPOLITAN HOUSING AUTHORITY (CMHA) AND THE CMHA DIVISION OF POLICE ARE NOT RESPONSIBLE FOR ANY DAMAGE TO THE PERSONAL PROPERTY, OR LOSS OF PROPERTY, OR FOR ANY INJURY TO ANY PERSON SUFFERED WHILE TRAINING, PRACTICING, OR IN ANY OTHER WAY INVOLVED IN THE PHYSICAL TRAINING ACTIVITIES HELD AT THE CMHA DIVISION OF POLICE EXERCISE FACILITY FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF THE CUYAHOGA METROPOLITAN HOUSING AUTHORITY, CMHA DIVISION OF POLICE, ITS AGENTS, OR EMPLOYEES.

In consideration of my participation in a training program or my individual use of the CMHA Division of Police exercise facility, I hereby release and covenant not-to-sue or file any other action against the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police, and any of its employees, instructors, or agents, from any and all present and future claims resulting from ordinary negligence on the part of the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police or others listed for property damage, personal injury, or wrongful death arising as a result of my engaging in any training activity or receiving instruction in physical training activities (e.g., physical conditioning, fitness training and strength training) or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

Further, I am aware that physical training is a vigorous activity involving cardiovascular stress and active physical contact. I understand that physical training involves certain risk of injury, including but not limited to, death, spinal injuries, and injury to bones, joints and muscles. I am voluntarily participating in this training with the knowledge of the risk involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police and others listed for any and all claims arising as a result of my engaging in or receiving instruction in physical training activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of Ohio and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceeding shall be in Ohio. I affirm that I am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police, or any of the parties listed above.

Signature and Badge # of Employee/Participant/User

O3-06-07

Date

### TRAINING CONFIRMATION NOTICE

January 19, 2001

Dear Training Participant:

Sgt. Paul Styles

You have been scheduled to attend the training listed below. Please review this information and mark your calendar accordingly.

Title:

**Performance Appraisal Overview** 

Date:

Tuesday, January 23, 2001

Time:

1:00 p.m. until 3:00 p.m.

Location:

**CMHA** Learning Center

2711 Church Avenue - First Floor

Cleveland, Ohio 44113

Questions? Call Eve Hall-Rice, (216) 348-4960, extension 4080.

### PLEASE BE PROMPT!

**Enjoy Your Learning Experience!** 

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY DIVISION OF POLICE

5715 Woodland Avenue Cleveland, Ohio 44104

EXERCISE FACILITY DISCLAIMER: THE CUYAHOGA METROPOLITAN HOUSING AUTHORITY (CMHA) AND THE CMHA DIVISION OF POLICE ARE NOT RESPONSIBLE FOR ANY DAMAGE TO THE PERSONAL PROPERTY, OR LOSS OF PROPERTY, OR FOR ANY INJURY TO ANY PERSON SUFFERED WHILE TRAINING, PRACTICING, OR IN ANY OTHER WAY INVOLVED IN THE PHYSICAL TRAINING ACTIVITIES HELD AT THE CMHA DIVISION OF POLICE EXERCISE FACILITY FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF THE CUYAHOGA METROPOLITAN HOUSING AUTHORITY, CMHA DIVISION OF POLICE, ITS AGENTS, OR EMPLOYEES.

In consideration of my participation in a training program or my individual use of the CMHA Division of Police exercise facility, I hereby release and covenant not-to-sue or file any other action against the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police, and any of its employees, instructors, or agents, from any and all present and future claims resulting from ordinary negligence on the part of the Cuyahoga Metropolitan Housing Authority, the CMHA Division of Police or others listed for property damage, personal injury, or wrongful death arising as a result of my engaging in any training activity or receiving instruction in physical training activities (e.g., physical conditioning, fitness training and strength training) or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

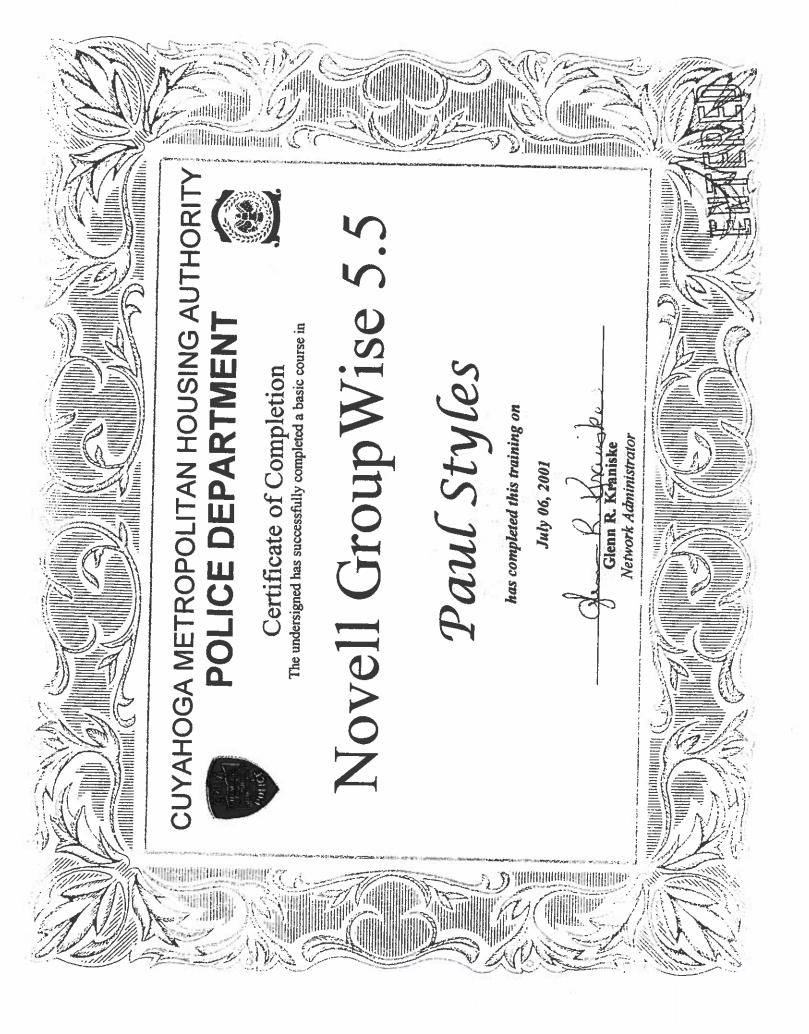
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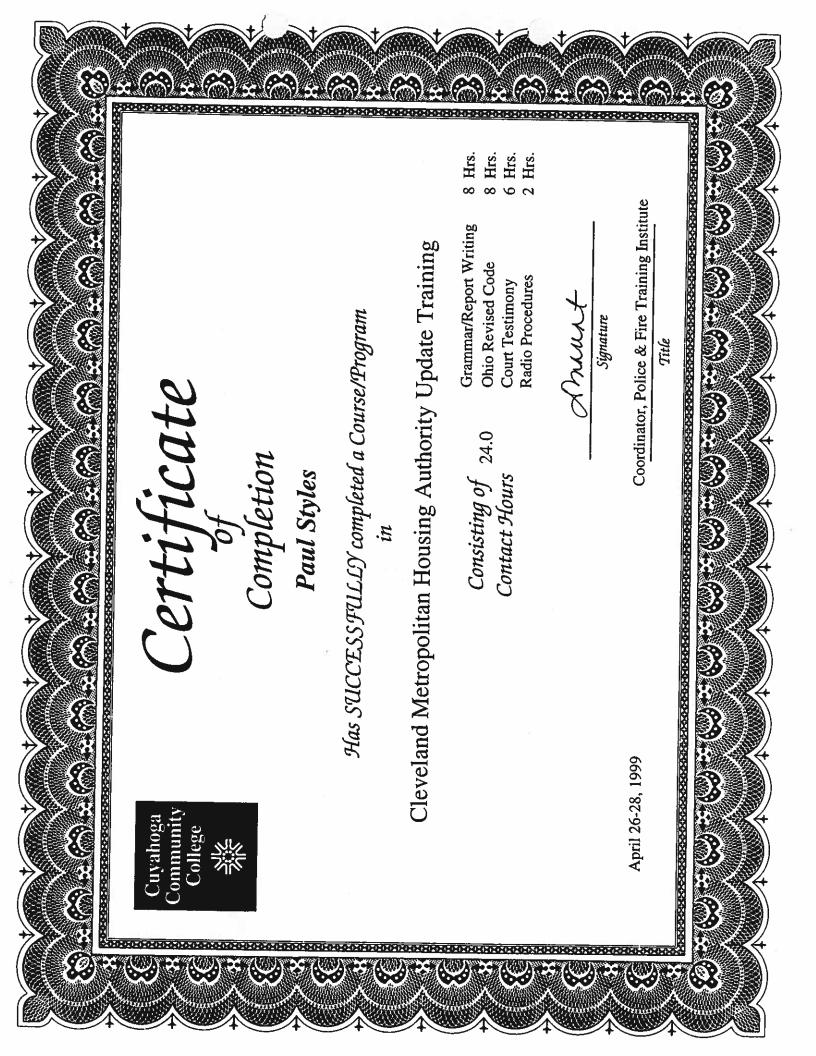
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Signature and Badge # of Employee/Participant/User

3-1-02

Date







### **CMHA**

### CUYAHOGA METROPOLITAN HOUSING AUTHORITY POLICE DEPARTMENT



TYPE: REMEDIAL TRAINING

TO: Paul J. Styles #656 Sergeant- Third Platoon

FROM: Ronald J. Morenz #626

Lieutenant- Third Platoon Watch Commander

**DATE:** August 16, 2001

SUBJECT: Remedial Training of Chapter 21.2.1 of the Policies and Procedures Manual

On this date I received remedial training in the area of Emergency Vehicle Operation, specifically Chapter 21.2.1. I understand that it is more important that I arrive on the scene, as opposed to arriving as quickly as possible. I have reviewed this area of instruction with Lt. Morenz. I am fully aware and familiar with this section of the Policies and Procedure Manuals.

Signature Date/Time

I have read the contents and I have no comments [] the attached comments []

SUPERUISOR (COMPLETING TRAINING) OPOR/TICH

Conde Came

There is a package that the supervisor we to go over with the officers that we involved in 1940, whether or not they are pherentable. The package was, according to 605, can't out to all supervisors. It had information relative to the operation of south vehicles in the Monnal of Rules or Regulations, Policy and Procedures namedy 13011.

That is what must be accomplished with the Hyles. I know that is what printing out the information. My intention is to find a location to make it availably to all supervisors when needed.



### **Northcoast Polytechnic Institute**

Police Executive and Administrative Leadership School "PEALS"

### **FINAL REPORT OF GRADES**

Name:

**Paul Styles** 

Department:

**CMHA PD** 

Exam Week #1:

January 7-11, 2002

80%

Exam Week #2:

February 4-8, 2002

71%

Exam Week #3:

March 4-8, 2002

80%

Project #1:

Instructor: Jim McKean

94%

Project #2:

80%

Instructor: Dick Curtis

Accumulative Grade Average:

80%

William D. Healy, Director

Northcoast Polytechnic Institute

Date

ENTERED

### BENELLI SHOTGUN FAMILIARIZATION TRAINING PRACTICE EXERCISES

OFFICER: Sgt. Paul Styles #656	DATE: 6, 20, 64	
RANGE OFFICER: P. Donaldson & 6412		
SPO #1 FAMILIARIZATION ANI	ID OPERATION	
DID THE OFFICER	YES NO	$\cap$
DEMONSTRATE THEIR KNOWLEDGE OF THE LO SAFETY?	OCATION OF THE	Ĭ
DEMONSTRATE THEIR KNOWLEDGE OF THE LO SLIDE RELEASE?		]_
DEMONSTRATE THEIR KNOWLEDGE OF THE LOCATION TRIGGER GUARD?		
DEMONSTRATE THEIR KNOWLEDGE OF THE LOC TRIGGER?	OCATION OF THE	
SPO #2 LOADING THE MAGAZINE TU	UBE OF A SHOTGUN	
DID THE OFFICER	YEŞ NC	)
POINT THE MUZZLE IN A SAFE DIRECTION?		
ROTATE THE WEAPON SO THAT THE LOADING T THE STUDENT?	THROAT IS FACING	
ASSURE THAT THE ACTION IS CLOSED?		$\sqcap$
EXAMINE SHELLS FOR POSSIBLE DAMAGE AND	CORRECT GAUGE?	
POSITION THE BRASS BASE OF THE SHELL TOWA GUARD?	, <del></del>	
INSERT SHELLS, ONE AT A TIME, FOR A TOTAL O THROUGH THE LOADING MAGAZINE TUBE UN THE SHELL STOP IS HEARD?	OF 4 ROUNDS, NTIL THE CLICK OF	
SPO#3 CHARGING THE CHAMBER O	OF THE SHOTGUN	
DID THE OFFICER	VECNO	
POINT THE MUZZLE IN A SAFE DIRECTION, WITH THE "OFF" POSITION?		
PULL THE SLIDE-ACTION HANDLE/CHARGING HA REAR-MOST POSITION?		-
WITH A SHARP MOTION, PUSH THE SLIDE-ACTION FOREMOST POSITION?	N HANDLE TO THE	-

### SPO#4 UNLOADING PROCEDURES FOR THE SHOTGUN

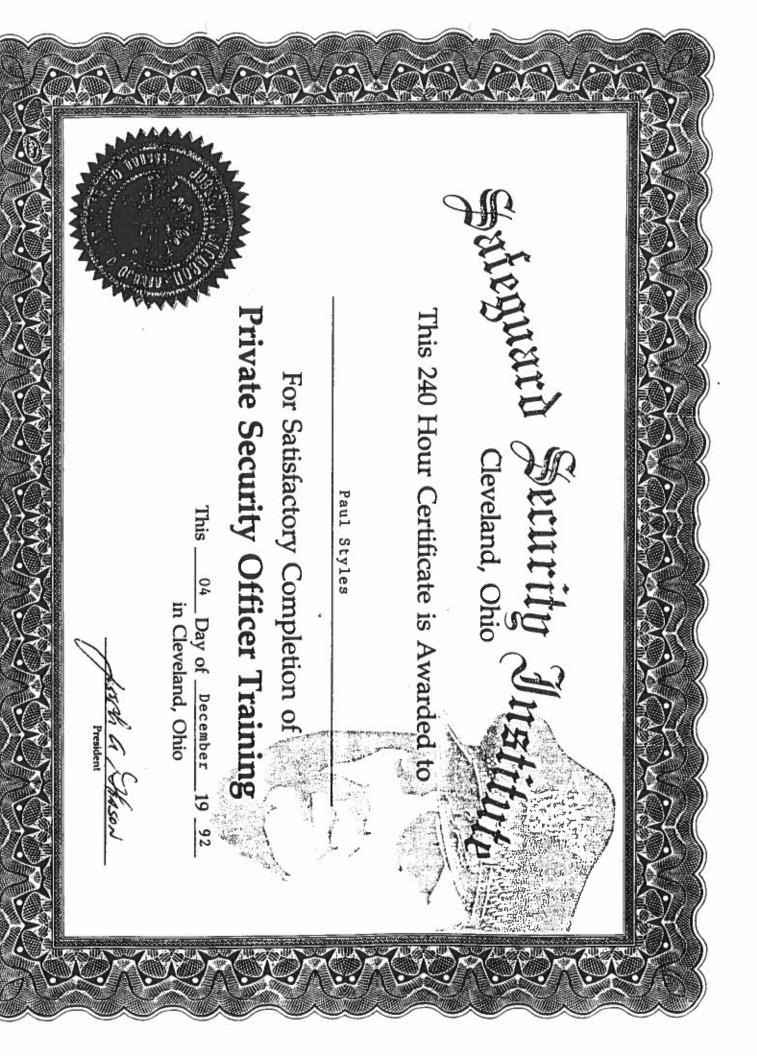
DID THE OFFICER	VEC	NIO
POINT THE MUZZLE IN A SAFE DIRECTION WITH THE SAFETY IN	YES	NO
THE "ON" POSITION?		
REMOVE THE ROUND PROM THE CHAMBER?		
WITH THE RIGHT INDEX FINGER DEPRESS THE ACTION RELEASE		
LEVER (PLIME ACTION) AND WITH THE ACTION RELEASE		
LEVER (PUMP ACTION) AND WITH THE LEFT HAND PULL THE		
ACTION SLOWLY TO THE REAR APPROXIMATELY TWO INCHES	1	
OR UNTIL THE NOSE OF THE ROUND IS CLEAR OF THE CHAMBER?		İ
PUSH UP THE CARRIER?	17	
COVER THE EJECTION PORT WITH THE RIGHT HAND?	++-	╌┢═┥╴╌┤
WILD THE FINGERS CURIED INDEPTIE LOADING TWO OF THE		
I A CAMMANU A CULINEL AT THE ETECTION DON'T DITT TO THE ACCURACE		
	1	]
RUTATE THE WEAPON SO THE LOADING PORT IS EACING THE		
SIODENI!		
DEPRESS THE SHELL STOPS LOCATED INSIDE THE LOADING PORT?		
OUDD THE SHELL FROM THE MACAPINE TUDE OF THE OF THE		
REPEAT THE ABOVE STEPS UNTIL THE MAGAZINE IS EMPERIOR		
INSPECT THE INSIDE OF THE CHAMPED ON THE CARRIED AND THE		
THE MACAZINE TUBE FOR SHELLS REMAINING IN TITE		
SHOTOUN?		
CLOSE THE ACTION BY PUSHING THE ACTION HANDLE FORWARD		
(I DIVIT ACTION)!		
WITH THE MUZZLE POINTED IN A SAFE DIRECTION, PUSH THE	/	
S.M.D.T. OIT;		
PULL THE TRIGGER IN ORDER TO RELEASE THE HAMMER SPRING?	/-	
THE IMMER OF KING!		

I certify that I have received the above training and I feel that I am proficient in the operation of the Benelli shotgun.

SIGNATURE AND BADGE #

I certify that I have given the above listed officer the above training on the Benelli shotgun. They have demonstrated that they are proficient in its operation.

SIGNATURE OF RANGE OFFICER AND BADGE #



### Safeguard Security Institute

"Professional Private Security Training"

Date 12/14/93

To::Whom it may concern

Re: Private Security

This letter will serve to introduce <u>faul Stylos</u> as a graduate of Safeguard Security Institutes 120 hour Ohio Peace Officers Training Council course.

This graduate also completed all of the training, exams, and qualifications for fire/arms.

This letter will be in effect until said graduate has received his/her certificatifs from the Ohio Peace Officers Training Council in London Ohio.

Respectfully,

Sandee K. Gleason Program Director

P.S. Transcripts available upon request.

## fficer Training Co iate of Ohio

教育を記るないないという こ

PAUL STYLES

has completed the

SHOTGUN

REVOLVER

Ofio Peace Officer

rivate Security Training Program

held at

SAFEGUARD SECURITY INSTITUTE

HOMASW, Awarded this 4TH day of DECEMBER

Colonel Thomas W. Rice, Chairman 
Ohio Peace Officer Training Council