



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



2019-3029

Officer-Involved Critical Incident – Unidentified Victim (V)

Investigative Activity: Document Review
Involves: Mark Dwayne Cooper (O)
Date of Activity: 11/27/2019
Activity Location: BCI Richfield Northeast Regional Office – 4055 Highlander Parkway, Richfield, OH 44286, Ohio County
Author: SA Eric Lehnhart, #84

Narrative:

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

The provided personnel file of Corrections Officer Mark Cooper contained 164 total pages.

Performance Evaluations

The Richland County Sheriff's Office's employee performance evaluation assigns points to the employee as follows; Above +2, Meets +1, and Does not meet +0. Throughout all of Cooper's evaluations he was rated as all 'Above +2' and 'Meets +1.'

Discipline

Cooper has a few documented instruction and cautioning reports, and one (1) disciplinary agreement contained in his file.

Commendations

Cooper's personnel file does contain one (1) certificate of appreciation from the Richland County Sheriff's Office.

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

Attachments:

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

Attachment # 01:2019-11-27 Mark Cooper Redacted from RCSO

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

19-99

RICHLAND COUNTY SHERIFF'S OFFICE INSTRUCTION & CAUTIONING

Employee's Name: Mark Cooper Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 6-25-19

VIOLATION

Date Violation Occurred: May 26, 2019 Personnel Complaint Number: 2019-099

Location Where Violation Occurred: Richland County Jail

Type of Violation Policy Group I Number 17

Description of Violation:

That on the date listed, you exhibited unsatisfactory work and failed to maintain a required standard of performance when you failed to properly conduct personal observation checks on inmates in the jail as required. This is your 1st Group I # 17 violation.

(Attach Additional sheets if necessary)

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

Capt. [Signature]
Signature of Person Issuing Reprimand

Jail Administrator
Title

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

[Signature]
Employee's Signature

6/25/19
Date

This is an untruthful statement.

I DID perform P.O.C's as required. Due to a typo by myself, it was logged incorrectly.

cc: Employee
Appointing Authority

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

Name: Mark Cofer Review Period: 10-4-18 to 4-4-19
Unit #: 7053 Review Deadline Date: 3-26-19
Rater Name: Sgt. Collier Bi-Annual Review

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cofer is good at addressing any security concerns.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cofer maintains clear boundaries with inmates*

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper is very credible with inmates.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper is very clear about facility rules to inmates.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

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

7. Consistently follows ~~post~~ orders, policies and procedures.

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

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

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

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

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

Officer Cofer is very timely with his paperwork.

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

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

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

OVERALL EVALUATION

Total Points: 15

Rater: [Signature] Date: 3-19-19
Comments:

Lieutenant: [Signature] Date: 4-25-19
Comments:

Staff Lieutenant: [Signature] Date: 4-2-19
Comments:

Jail Administrator: [Signature] Date: 4/1/19
Comments:

Chief Deputy: [Signature] Date: 4/5/19
Comments:

Sheriff: [Signature] Date: 4/07/19
Comments:

Employee Signature: [Signature] Date: 5/8/19
Comments:

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

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

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

My signature may not indicate agreement with the ratings.

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

Name: Mark Cofer Review Period: 4-5-18 to 10-4-18
Unit #: 7c53 Review Deadline Date: 10-5-18
Rater Name: [Signature] Bi-Annual Review

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cofer Notifies me of Security Problems in a timely manner*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

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

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

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

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

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

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

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

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

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

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

7. Consistently follows past orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper has used a bit of sick time, But he is doing excellent considering his condition.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER

OVERALL EVALUATION

Total Points: 12

Rater: [Signature] Date: 10-2-18
Comments:

Lieutenant: [Signature] Date: 10-4-18
Comments:

Staff Lieutenant: [Signature] Date: 10-11-18
Comments:

Jail Administrator: [Signature] Date: 10/17/18
Comments:

Chief Deputy: [Signature] Date: 10/25/18
Comments:

Sheriff: [Signature] Date: 10/29/18
Comments:

Employee Signature: [Signature] Date: 11/28/18
Comments:

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

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

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

My signature may not indicate agreement with the ratings.

18-149

RICHLAND COUNTY SHERIFF'S OFFICE INSTRUCTION & CAUTIONING

Employee's Name: Mark Cooper Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 10-31-18 0120

VIOLATION

Date Violation Occurred: September 8, 2018 Personnel Complaint Number: 2018-149

Location Where Violation Occurred: Richland County Jail

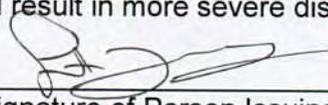
Type of Violation Policy Group I Number 17

Description of Violation:

That on the date listed, you exhibited unsatisfactory work and failed to maintain a required standard of performance by failing to properly conduct personal observation checks on inmates at the jail as required.. This is your 1st Group I # 17 violation.

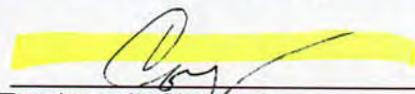
(Attach Additional sheets if necessary)

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


Signature of Person Issuing Reprimand

Lieutenant
Title

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


Employee's Signature

10/31/18
Date

I was talked to Lt. [redacted] about this date in question last week. He stated that he watched video and he observed me doing the P.O.C. I simply forgot to log it. His statement is false because he stated that I did not perform the P.O.C.

cc: Employee
Appointing Authority

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

Name: Mark Cooper

Review Period: 10-5-17 to 4-4-18

Unit #: 7c53

Review Deadline Date: 4-6-18

Rater Name: CY. [REDACTED]

Bi-Annual Review

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper sets a fine example addressing and identifying safety and security problems. He gives correct pass-on to supervision and to officers.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper does a routine job communicating rules and expectations to the inmates. He also ensures that they have proper grievance forms to address ~~unresolved~~ ^{unresolved} issues.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

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

7. Consistently follows post orders, policies and procedures.

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

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0
Explain: *Officer Cooper sets a fine example completing all required documentation. He is very thorough and accurate. He paperwork is always completed in a timely fashion.*

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

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

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

OVERALL EVALUATION

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

Total Points: 13

Rater: Lt. [REDACTED] Date: 4-1-18

Comments: Officer Cooper is very security minded and has a lot of experience. He really has a good grasp of corrections and is an asset to our facility.

Lieutenant: _____ Date: _____

Comments:

Staff Lieutenant: [Signature] Date: 4-9-18

Comments:

Jail Administrator: [Signature] Date: 4/3/18

Comments:

Keep up the good work!

Chief Deputy: [Signature] Date: 4/18/18

Comments:

Sheriff: [Signature] Date: 4/25/18

Comments:

Employee Signature: [Signature] Date: 5/7/18

Comments:

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

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

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

My signature may not indicate agreement with the ratings.

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

Name: Mark Cooper

Review Period: 04-06-17 to 10-04-17

Unit #: 7c53

Review Deadline Date: 11-5-17

Rater Name: U. [REDACTED]

Bi-Annual Review

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper sets a consistent standard for safety. He is very good in relaying security related concerns to supervisors, and gives good pass-on to officers.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

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

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0
Explain: *Officer Cooper clearly and consistently communicates jail rules to inmates and makes sure they have access to forms and the Inmate kite system.*

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

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

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

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

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

7. Consistently follows post orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper shows an outstanding knowledge of jail policy and consistently follows them.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper consistently completes reports in a timely fashion. They are very detailed and accurate.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

OVERALL EVALUATION

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTIONS DIVISION
PERFORMANCE EVALUATION
OFFICER**

Total Points: 14

Rater: Lt.  Date: 11-3-17

Comments: Officer Cooper is a very solid and experienced officer. He provides very valuable insight that is helpful for jail supervision to consider.

Lieutenant:  Date: 12-24-17

Comments:

Staff Lieutenant:  Date: 11-6-17

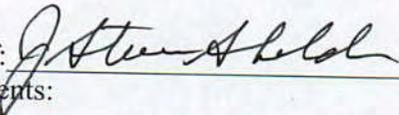
Comments:

Jail Administrator: Capt. C. Blue Date: 11/7/17

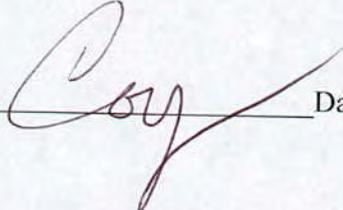
Comments: Great work! Keep it going!

Chief Deputy: Myra MBS Date: 11/21/17

Comments:

Sheriff:  Date: 12/11/17

Comments:

Employee Signature:  Date: 12/24/17

Comments:

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

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

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

My signature may not indicate agreement with the ratings.

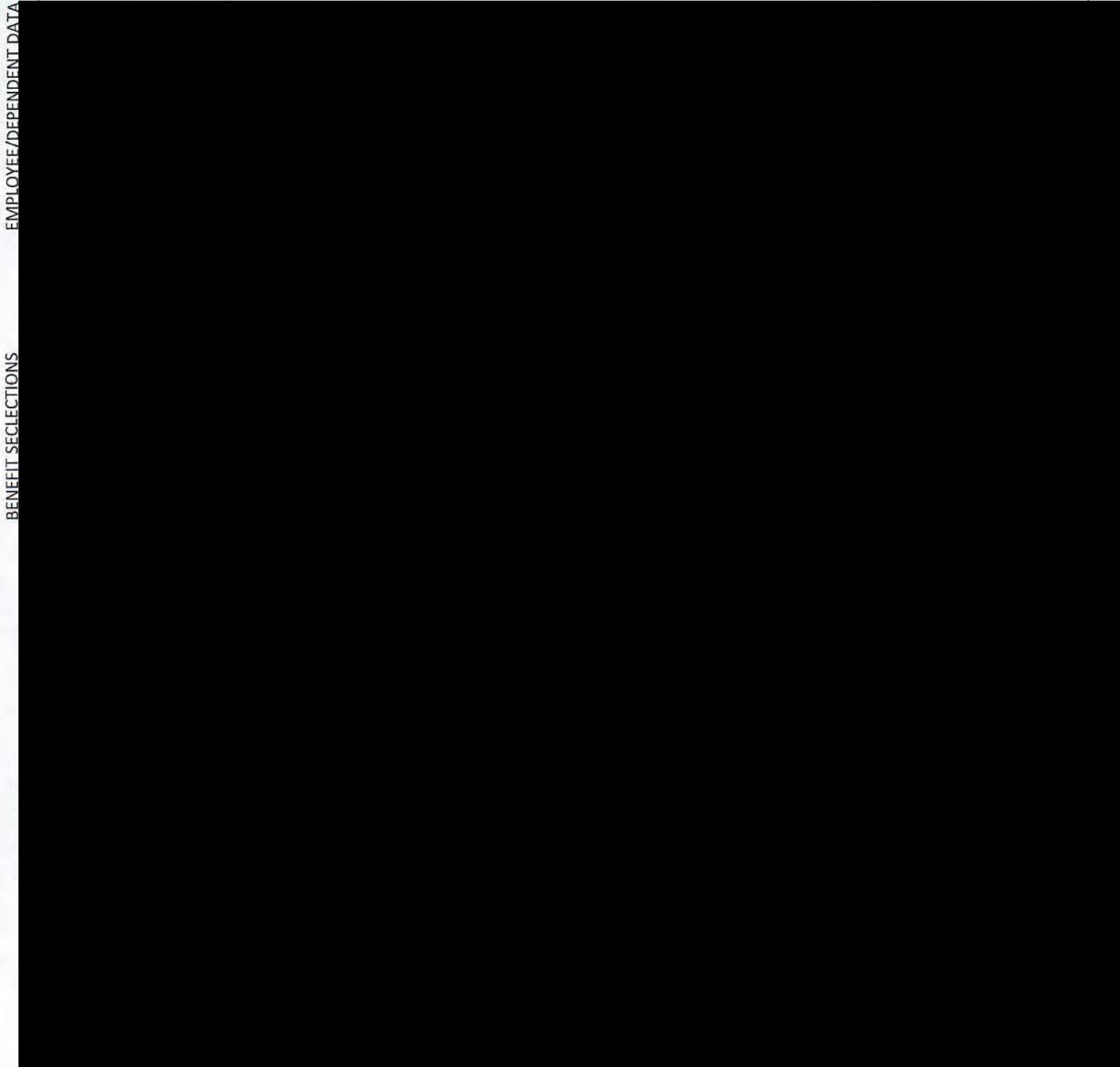


RICHLAND COUNTY
Enrollment/Change Form

Department Name: Jail
Employee Number: [REDACTED]

CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE		Date of Change: 01/01/2017	Date of Hire: 10/16/2003	Effective Date: 01/01/2017
OTHER CHANGES	CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			
	<input type="checkbox"/> ADD/CANCEL DEPENDENT(S):			
	<input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order <input type="checkbox"/> Divorce *if marriage, state previous name			
	<input type="checkbox"/> CHANGE NAME/ADDRESS, state previous			
<input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status <input type="checkbox"/> Other (explain)				

NAME OF EMPLOYEE:	First: mark	Middle: dwayne	Last: cooper	Social Security #: [REDACTED]
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EMPLOYEE/DEPENDENT DATA

BENEFIT SELECTIONS

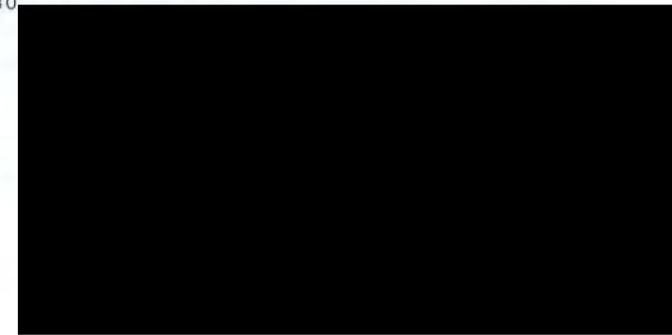
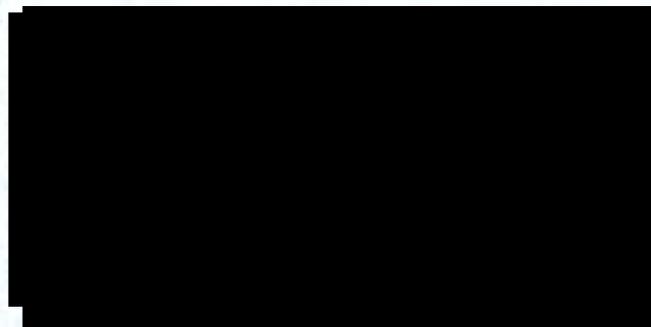
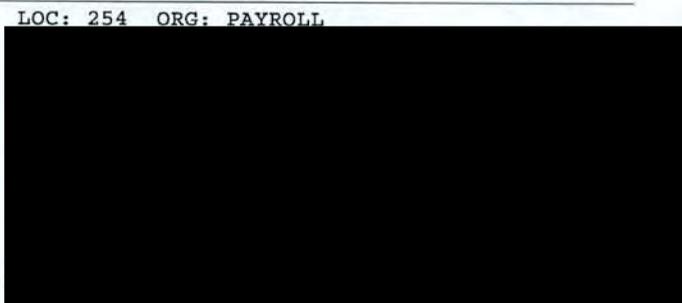
04/26/2017 14:16
ESPICER

Richland County - LIVE
DETAIL CHECK HISTORY

P 2
prhisrpt

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

ORG	OBJ	PROJ	LOC	JOB	CHECK	PAY TYPE	HOURS	AMOUNT	DED	TYPE	EMPLOYEE	EMPLOYER
	COOPER, MARK											
			254		000043466							
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27525500	533530		254		000043466							
27525500	536300		254		000043466							
27525500	536400		254		000043466							
27525500	536500		254		000043466							
			CHECK 02/05/2016 TOTALS:		NET:		939.42	85.33			1,537	
	Check Date: 02/19/2016											
27525500	510200		254	2030	000044675	216 OT BLD	8.00				256.20	
27525500	510200		254	2030	000044675	887 SB .80	16.00				341.60	
27525500	510200		254	2030	000044675	887 SB .80	48.00				1,024.80	
27525500	510200		254	2030	000044675	887 SB .80	16.00				341.60	
			254		000044675							
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			254		000044675							
			254		000044675							
27525500	533530		254		000044675							
27525500	536300		254		000044675							
27525500	536400		254		000044675							
27525500	536500		254		000044675							
			CHECK 02/19/2016 TOTALS:		NET:		1,221.67	88.00			1,964.20	
	Check Date: 03/04/2016											
27525500	510200		254	2030	000045893	405 SICKSD	8.00				170.80	
27525500	510200		254	2030	000045893	887 SB .80	32.00				683.20	
27525500	510200		254	2030	000045893	887 SB .80	32.00				683.20	
27525500	510200		254	2030	000045893	887 SB .80	8.00				170.80	
			254		000045893							
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			254		000045893							
			254		000045893							
27525500	533530		254		000045893							
27525500	536300		254		000045893							
27525500	536400		254		000045893							
27525500	536500		254		000045893							



REQUEST FOR CHANGE OF ASSIGNMENT

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

Name: Cooper MARK
Last First Middle

Present Rank/Classification C.O.

Request for Shift Preference:

First Choice: C-Watch

Second Choice: A-Watch

Third Choice: B-Watch

Request for Rotation Preference:

A Watch: 1st: MIDDLE 2nd: Bottom 3rd: TOP

B Watch: 1st: _____ 2nd: _____ 3rd: _____

C Watch: 1st: MIDDLE 2nd: Bottom 3rd: TOP

[Signature]
Officers Signature

9/12/17
Date

Name: Mark Cooper
Unit #: 7c53

Review Period: Oct 16' to April 17'
Review Deadline Date: _____

Bi-Annual Review

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION**

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper serves as a model for thinking in the interests of safety and security. He regularly presents concerns to supervision so that these interests can be addressed when needed.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

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

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

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

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

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

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

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

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

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

7. Consistently follows post orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain: Officer Cooper has a tremendous knowledge and concern for policy and carries out activities to demonstrate this.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: Officer Cooper does an outstanding job making sure appropriate paperwork is completed and turned in to supervision accurately and in a timely fashion.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

OVERALL EVALUATION

Total Points: 13

Rater: [Redacted] Date: 3-14-17 Comments:

Officer Cooper is very safety and security minded, with extensive knowledge of policy and procedure. He is a very valuable asset when it comes to searching inmates for contraband and making sure arresting agencies communicate proper information to corrections staff regarding arrestees.

Lieutenant/Staff Lieutenant: [Signature] Date: 3-17-17 Comments:

Jail Administrator: [Signature] Date: 3/29/17 Comments:

Great job! Keep up the great work!

Employee Signature: [Signature] Date: 3/31/17 Comments:

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

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



J. Steve Sheldon, Sheriff

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

CERTIFICATE OF APPRECIATION

CORRECTION OFFICER MARK COOPER,

IT IS MY PLEASURE TO INFORM YOU ON BEHALF OF THE SHERIFF'S OFFICE THAT YOU HAVE BEEN AWARDED A CERTIFICATE OF APPRECIATION FOR EXCEPTIONAL PERFORMANCE OF DUTY.

ON JULY 14, 2016 FIVE INMATES IN THE JAIL OVERDOSED ON DRUGS AT THE SAME TIME, WHICH RESULTED IN A VERY HIGH STRESS INCIDENT. THE OFFICERS INVOLVED PERFORMED A GREAT JOB IN HANDLING THE SITUATION WHILE MAINTAINING ORDER IN A CHAOTIC SITUATION.

THESE OFFICERS WERE ALSO PIVOTAL IN PROVIDING INFORMATION THAT LED TO A POSITIVE ID OF THE INMATE WHO CONVEYED THE DRUGS INTO THE FACILITY.

OFFICER COOPER, YOUR ABILITY TO WORK AS PART OF A TEAM AND MAINTAIN A SECURE FACILITY ATTESTS TO YOUR EXPERIENCE AS A TRUE PROFESSIONAL. YOUR DEDICATION TO THE RICHLAND COUNTY JAIL IS TRULY APPRECIATED.

PROFESSIONALLY YOURS,

A handwritten signature in cursive script that reads "Sheriff J. Steve Sheldon".

SHERIFF J. STEVE SHELDON
RICHLAND COUNTY, OHIO





Employee Maintenance

(circle one)
ADD **Change**

Name: Mark Cooper
 Address: _____
 City, State, Zip Code: _____
 Telephone: _____
 Birthdate: _____
 Social Security Number: _____
 Marital Status: _____
 Sex: _____
 Race: _____
 Title: _____
 Department Number: 349
 Munis Org: 27525500
 Business Phone Number: _____
 Start Date: _____
 Rehire Date: _____
 Termination Date: _____

Employee# [REDACTED]
 Has this person ever been employed by Richland County in the past? Yes or No
 Class # _____
 Account # [REDACTED]
 Object# 570200

Salary/pay
 Rate/hour 20.55
 Alt Rate/hour _____
 Longevity Payment _____
 Annual Hours _____
 Shift _____
 Full/Part _____
 STRS _____
 PERS _____
 Direct Dep. Route # _____
 Direct Dep. Account # _____

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Status: _____
 Annual Salary: _____

[Signature]
 Signature

12/23/14
 Date

EFFECTIVE 12-18-2014

 Comments

Name: Mark Cooper
Unit #: 7053

Review Period: April 16 to October 16
Review Deadline Date: 9-30-16

Bi-Annual Review

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION**

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper always lets me know when there are any safety or security problems*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper maintains clear boundaries with inmates.*

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper is very credible with inmates. They always know what to expect from him.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper is good at entering inmate rules.*

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

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

7. Consistently follows ~~post~~ orders, policies and procedures.

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

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper is always timely with his paperwork.*

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

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

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

OVERALL EVALUATION

Total Points: 15

Rater: Sgt. Collier Date: _____ Comments:

Lieutenant/Staff Lieutenant: [Signature] Date: 10-9-16 Comments:

Jail Administrator: [Signature] Date: 10/5/16 Comments:

Employee Signature: [Signature] Date: 9/28/16 Comments:

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

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

OFFICIAL USE ONLY

DEDUCTIBLE

Medical Premium Amount Bi-Weekly _____
Dental Premium Amount Bi-Weekly _____

High _____
Low _____



RICHLAND COUNTY
Enrollment/Change Form

Department Name: Jail
Employee Number: [REDACTED]

OTHER CHANGES	CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change: 01/01/16	Date of Hire: 10/16/03	Effective Date: 01/01/16
	CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			
	<input type="checkbox"/> ADD/CANCEL DEPENDENT(S):			
	<input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order <input type="checkbox"/> Divorce *if marriage, state previous name			
	<input type="checkbox"/> CHANGE NAME/ADDRESS, state previous			
	<input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status <input type="checkbox"/> Other (explain)			

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	Mark	Dwayne	Cooper	[REDACTED]

EMPLOYEE/DEPENDENT DATA

BENEFIT SELECTIONS



Name: Mark Cooper
Unit #: 7c53

Review Period: April 2015 to October 2015
Review Deadline Date: 10-5-15

Bi-Annual Review

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION**

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper is exceptionally Security Minded. He has only Professional interactions with inmates also.*

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

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

7. Consistently follows post orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain: *Officer Cooper always completes his paperwork in a timely manner.*

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

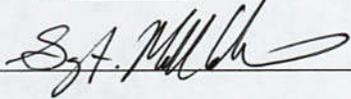
Above + 2 Meets + 1 Does Not Meet + 0

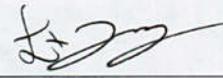
Explain:

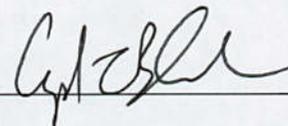
Any additional comments pertaining to GOAL Three (7-10):

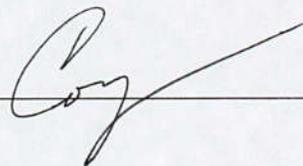
OVERALL EVALUATION

Total Points: 12

Rater:  Date: 10-3-15 Comments:

Lieutenant/Staff Lieutenant:  Date: 10-7-15 Comments:

Jail Administrator:  Date: 10/14/15 Comments:

Employee Signature:  Date: 10/3/15 Comments:

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

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

Name: Cooper
Unit #: 753

Review Period: Oct to April
Review Deadline Date: April

Bi-Annual Review

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION**

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper is very safety & security minded. If there is a situation that needs corrected he does not hesitate to bring it to his supervisors attention as well as the other officers.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Follow the PC policy.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

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

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

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

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

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

*Officer Cooper does not have a
Problem enforcing rules w/ the inmates.
His consistency is perceived as confrontation
with most inmates.*

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

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

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

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

7. Consistently follows post orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper is very dependable. He is always at work and here w/in reasonable time to get pass on. He stays in his assigned posts, and he

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper's work shows little to no errors, is neat, and legible. His reports are completed w/in an acceptable time frame. ^{only use} ~~headings of~~ Sick leave.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper gets along w/ most co-workers and supervisors. He attempts to keep himself at a professional level when dealing with others.

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

OVERALL EVALUATION

Total Points: 12

Rater: [Signature] Date: 3/25/15 Comments:

Great things happen when we distance ourselves from negativity. Negativity only breeds more negativity.

Lieutenant/Staff Lieutenant: [Signature] Date: 4-21-15 Comments:

Jail Administrator: [Signature] Date: 4/22/15 Comments:

Employee Signature: [Signature] Date: 3/25/15 Comments:

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

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

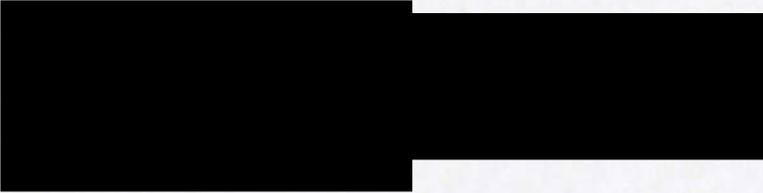


J. Steve Sheldon, Sheriff

*Richland County Sheriff's Office & Civil Division
597 Park Avenue East • 2nd Floor
Mansfield, Ohio 44905
Phone: 419.774.5881 Fax: 419.522.8153
Civil Office: 419.774.3570*

07/15/14

To whom it may concern;



Sincerely;

A handwritten signature in black ink, appearing to read 'Mark Cooper', with a long, sweeping flourish extending to the right.

C.O. Mark Cooper

C-watch
7c53

A handwritten mark or signature in the bottom right corner of the page, consisting of stylized, overlapping letters.

Richland County Jail

*73 East Second Street • Mansfield, Ohio 44902
Phone: 419.774.5678 Fax: 419.774.5646*





J. Steve Sheldon, Sheriff

*Richland County Sheriff's Office & Civil Division
597 Park Avenue East • 2nd Floor
Mansfield, Ohio 44905
Phone: 419.774.5881 Fax: 419.522.8153
Civil Office: 419.774.3570*

07/15/14

To whom it may concern;



Sincerely;

A handwritten signature in black ink, appearing to read "Mark Cooper".

C.O. Mark Cooper

C-watch
7c53

Handwritten initials in black ink, possibly "GC".

Richland County Jail

*73 East Second Street • Mansfield, Ohio 44902
Phone: 419.774.5678 Fax: 419.774.5646*



Name: Cooper, Mark
Unit #: 753

Review Period: 10/13 to 3/14
Review Deadline Date: 4/1/14

Bi-Annual Review

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION**

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

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

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

Above +2 Meets +1 Does Not Meet +0

Explain: *The safety and security functions of the jail are very important to Officer Cooper. He does an outstanding job identifying and addressing these issues to supervisors. etc does.*

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

Above +2 Meets +1 Does Not Meet +0

Explain: *Officer Cooper consistently completes POC and documents in a timely fashion. Cooper will also go above and beyond by doing checks before required time.*

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

Above +2 Meets +1 Does Not Meet +0

Explain: *Officer Cooper has great knowledge of boundaries between inmates and C.O.'s. He is very ethical with these boundaries and does an exceptional job treating all inmates the same to the best of his abilities.*

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper always maintains and displays professionalism when dealing with inmates. His interactions are very fair and firm. The inmates may not like it but they know what is expected and this gives great credibility.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper does an excellent job communicating the facility rules and enforcing them. Officer Cooper does a great job of making sure inmates receive grievances and instructs on how to use the Kite system. Officer Cooper is also very ethical in turning these forms in where needed.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper provides great leadership to fellow employees to diffuse problems that arise. His knowledge and experience is invaluable and leads to appropriate action. Especially in dealing with the inmate population and enforcing rules and regulations.

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

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

7. Consistently follows post orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper has excellent knowledge of policies and procedures and consistently demonstrates the ability to perform.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Cooper has a good attendance record always shows up on time ready to work.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper always turns in the required documentation His reports are very detailed and thorough. He does a great job completing assignments and duties.

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

Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper is usually courteous and professional with most officers, supervisors, especially in the presence of inmates. He has earned respect from his co-workers and gives respect as well.

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

OVERALL EVALUATION

Total Points: 18

Rater: Sgt Sam Deane Date: 3/28/14 Comments:

Lieutenant/Staff Lieutenant: [Signature] Date: 3-31-14 Comments:

Jail Administrator: [Signature] Date: 4/2/14 Comments:

Employee Signature: [Signature] Date: 3/27/14 Comments:

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

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

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

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

MARK Cooper
Name printed

Mark Cooper
Name signed

4/3/13
Date

Lt. Chris Blunk
Witness printed

Lt. Blunk
Witness signed

OATH OF OFFICE

STATE OF OHIO
COUNTY OF RICHLAND

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

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

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

MARK Cooper
PRINTED NAME OF MEMBER

Mark Cooper
SIGNATURE OF MEMBER

SWORN TO AND SUBSCRIBED BEFORE ME, A NOTARY PUBLIC, IN AND FOR THE COUNTY OF RICHLAND, THIS 6TH DAY OF FEBRUARY, 2013.

Jale Fortney
NOTARY PUBLIC

MY COMMISSION EXPIRES
08-24-14

SWORN TO AND SUBSCRIBED BEFORE ME, SHERIFF, IN AND FOR THE COUNTY OF RICHLAND, THIS 6TH DAY OF FEBRUARY, 2013.

Steve Sheldon
J. STEVE SHELDON,
SHERIFF, RICHLAND COUNTY

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

**Richland County Sheriff's Office
Job Description**

Job Title: Correction Officer

Division: Corrections

Bargaining Unit: FOP/OLC

Employment Status: Full-Time

Work Hours: Variable, Determined by FOP Contract

Civil Service Status: Classified

FLSA Status: Non-exempt

Probation: One year

Reports to: Correction Sergeant, Correction Lieutenant

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

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

Essential Functions: Regular and predictable attendance

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

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

Work overtime as necessary and directed

Maintain the trust, faith and confidence of the Sheriff

Support and enforce the administrative and operational policies of the Sheriff

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

Demonstrate appropriate respect for co-workers and supervisors

Maintain confidentiality in the performance of duties

Maintain a harmonious work relationship with other personnel and agencies

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

Use physical force to control inmates

Qualify with firearms as required and defensive weapons

Work independent of direct supervision

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

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

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

Duties and Responsibilities:

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

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

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

Develop and maintain professional rapport with inmates

Communicate facility rules and expectations to inmates and respond to questions

Ensure inmates have access to grievance forms and kites

Make prudent and sound decisions and diffuse problem situations

Contribute to the efficiency and effectiveness of the facility

Uphold the highest standards of security and safety

Works rotation posts and assignments to maintain security on assigned area

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

Attends meetings and committees and provides feedback

Responds to the need of staff and the concerns of inmates

Maintain discipline and order of inmates

Monitors and operates security controls and or computers

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

Monitors and responds accordingly to alarms and medical emergencies

Utilize computers and monitor surveillance equipment as required by assigned post

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

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

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

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

Operates a county car or van under adverse and stressful conditions

Operates a county vehicle to transport inmates as required

Completes and maintains electronic post logs, JAMIN information and reports

Document information accurately, concisely and in proper grammar

Count inmates and then report them in accordance with count procedures

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

Controls and distributes all incoming mail to proper inmates

Completes necessary paperwork as required in the performance of duties

Complete personal observation rounds inside the pods as required

Ensure orderly movements of inmates throughout the facility

Attend a corrections academy within the first year of employment

Successfully pass the OPOTA Corrections Officer Test

Successfully complete a 12 week field training corrections training program

Enforce inmate rules, regulations, and procedures and polices

Visually and tactfully detect contraband per facility rules and regulations

Electronically write incident reports and initiate inmate rule violations as needed

Report any unusual circumstances and information to supervision

Identify and address safety and security problems

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

Ensure cleanliness of the facility by directing inmates to clean

Conduct searches and inventories of inmate personal and issued property

Encouraged to participate on committees

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

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

Comply with Standard Operating Procedures and County Policies and Procedures

Read and consistently follow post orders

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

Attends training as requested and directed

Maintains uniform and equipment issued by the department

Testify in depositions, hearings and trials

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

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

Job Description Approval:

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

MARK Cooper
Employee Printed Name

2/6/13
Date

Mark Cooper
Employee Signature

I have issued this job description to the employee.

Captain M...
Supervisor Signature

2/6/13
Date

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

MAJ J...
Administrator Signature

02-06-13
Date

SETTLEMENT AGREEMENT

To: Mark Cooper

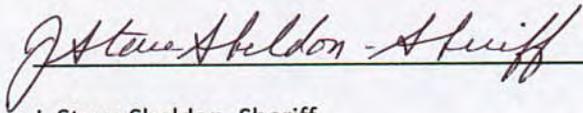
From: J. Steve Sheldon, Sheriff

On April 27, 2013, CO Cooper (Employee) was served with an Instruction & Cautioning for exhibiting unsatisfactory work and failing to maintain a required standard of performance for not properly conducting personal observation checks on inmates on April 12 & 15, 2013. This was his first violation involving personal observation checks.

The Sheriff (Employer) and the Fraternal Order of Police (Union) believe it is in the best interests of the parties to resolve the present disciplinary matter and to avoid future disciplinary action regarding personal observation checks.

NOW, THEREFORE, the parties agree as follows:

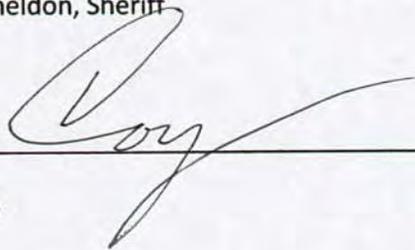
1. By signing this Agreement, the Employer agrees to withdraw the above referenced disciplinary action.
2. By signing this Agreement, the Employee and the Union agree to withdraw any grievance that was filed regarding the above referenced disciplinary action.
3. The Employee acknowledges that, prior to signing this Agreement, he was provided with the opportunity to consult with his Union representative and/or legal counsel of his choice and that he is voluntarily entering into this Agreement and not relying on any representation made by the Sheriff's Office except as expressly provided herein.
4. The parties acknowledge that this Agreement constitutes a single integrated agreement expressing the entire agreement between the parties. There are no other agreements, written or oral, express or implied, between the parties thereto concerning the subject matter of this Agreement.
5. The Employee expressly agrees and waives any right to challenge the validity of this Agreement in the event that litigation is necessary regarding the interpretation of this Agreement, each side shall bear their own costs of suit and attorneys' fees regardless of who is the prevailing party. This Agreement is entered into in the State of Ohio and the rights and obligations of the parties hereunder shall be construed and enforced in accordance with the laws of the State of Ohio.



J. Steve Sheldon, Sheriff

07-23-13

Date



Employee

7/30/13

Date



Union Representative

7-30-13

Date

**RICHLAND COUNTY SHERIFF'S OFFICE
INSTRUCTION & CAUTIONING**

Employee's Name: Mark Cooper Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 09-24-12 St. R. Sinton

VIOLATION

Date Violation Occurred: May 5, 2012, June 2, 2012 & August 25, 2012

Location Where Violation Occurred: R.C.S.O. Jail

Type of Violation Group I Number 13

Description of Violation: That on the dates listed above you negligently failed to observe a rule, regulation, policy or directive of the Richland County Sheriff's Office when you violated Policy 16.1 (Sick Leave), F (Sick Leave Use and Abuse), h (Pattern Abuse), 4 (Any one specific day). Pursuant to this policy, you are required to produce a physician's verification statement for all subsequent illnesses. This is your 1st offense.

(Attach Additional sheets if necessary)

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

Justin Hubbell
Signature of person issuing reprimand
Shiff
Title

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

Mark Cooper
Employee's Signature
9/24/12
Date

cc: Employee
Supervisor
Appointing Authority



**RICHLAND COUNTY SHERIFF'S OFFICE
"PERSONNEL COMPLAINT REPORT"**

ORIGINAL

DATE/TIME REPORTED		LOCATION OF INTERVIEW		COMPLAINT NO
05/05/11				11-039
COMPLAINANT'S NAME	RESIDENCE ADDRESS	RES. PHONE	BUS. PHONE	
LT SANTORO			419.774.7864	
TYPE OF COMPLAINT	PLACE OF OCCURRENCE	DATE	TIME	
SOP 16.1 #F - SICK LEAVE ABUSE	RCSO JAIL	05/05/11		
BRIEF DESCRIPTION OF COMPLAINT: OFFICER COOPER VIOLATED THE SICK LEAVE ABUSE POLICY 16.1 #F VIA THE PATTERN ABUSE WITHIN THE LAST (12) MONTHS BY USING (4) SICK DAYS IN CONJUNCTION WITH TIME OFF WITHOUT DOCTORS EXCUSES. THE FOLLOWING DATES APPLY: 06/18/10, 01/03/11, 03/01/11, AND 04/09/11.				
OFFICER(S) INVOLVED:				
NAMES	BUREAU	UNIT NO.		
OFFICER MARK COOPER	CORRECTIONS	7C53		
NUMBER AND SEGREGATE THE FOLLOWING (1) DETAILS OF COMPLAINT AS STATED BY COMPLAINANT (2) INTERVIEWER'S REMARKS (3) INVESTIGATION SUGGESTIONS.				
*NOTICE: UNDER SECTION 2921.13 OF THE OHIO REVISED CODE, FALSIFICATION IS A CRIMINAL ACT, WHICH MAY BE SUBJECT TO PROSECUTION. PUNISHABLE BY UP TO 6 MONTHS CONFINEMENT AND A FINE OF \$1,000.				
COMPLAINANT'S SIGNATURE	INVESTIGATING OFFICER	DATE		
<i>St. R. Santoro</i>		05-05-11		

**RICHLAND COUNTY SHERIFF'S OFFICE
INSTRUCTION & CAUTIONING**

Employee's Name: Mark Cooper Employee's Classification: Correction Officer

Date Instruction & Cautioning was Issued: 5-11-2011

VIOLATION

Date Violation Occurred: 6/18/10; 1/3/11; 3/1/11; 4/9/11

Location Where Violation Occurred: N/A

Type of Violation Group I Number 13

Description of Violation: That on the dates listed above, you negligently failed to observe a rule, regulation, policy or directive of the Sheriff's Office by violating Sick Leave Policy 16.1, F, 2, h. Pursuant tot his policy, you are required to produce a physician's verification statement for all subsequent illnesses.

(Attach Additional sheets if necessary)

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

SGT Ed [Signature]
Signature of person issuing reprimand

SGT.
Title

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

Mark Cooper [Signature]
Employee's Signature

5/11/11
Date

cc: Employee
Supervisor
Appointing Authority

Name: Mark Cooper
Unit #: 7C53

Review Period: 4/14 to 9/14
Review Deadline Date: 10/3/14

Bi-Annual Review

**RICHLAND COUNTY SHERIFF'S OFFICE
CORRECTION OFFICER PERFORMANCE EVALUATION**

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper is very security minded while on the job.

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

Officer Cooper does his POC's on time and logs them correctly

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

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

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

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

7. Consistently follows post orders, policies and procedures.

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

Above + 2 Meets + 1 Does Not Meet + 0

Explain:

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

OVERALL EVALUATION

Total Points: 12

Rater: Sgt James Date: 9/18/14 Comments:

Officer Cooper always does his work
and knows the job very well

Lieutenant/Staff Lieutenant: Stacy Date: 10-4-14 Comments:

Jail Administrator: Cyrtle Date: 10/6/14 Comments:

Employee Signature: Mal Coy Date: 9/18/14 Comments:

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

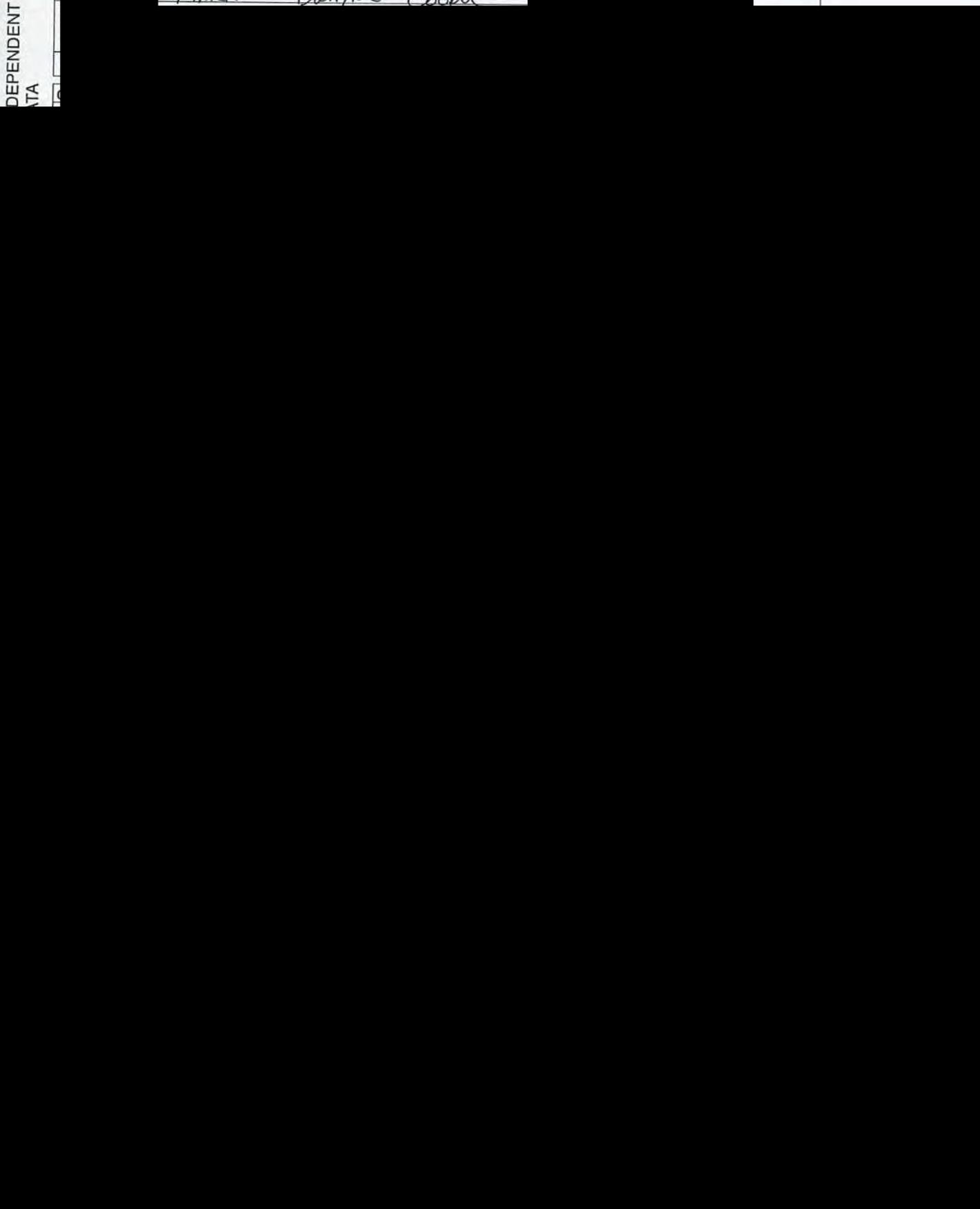
Initial to request to have a meeting with the Staff Lieutenant or the Jail Administrator to discuss my evaluation _____.

RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 349
Employee Number: [REDACTED]

CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT	<input type="checkbox"/> NEW HIRE	<input type="checkbox"/> CHANGE	Date of Change:	Date of Hire: 10/16/03	Effective Date: 1-1-14
CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE					
<input type="checkbox"/> CHANGE NAME/ADDRESS, state previous					
<input type="checkbox"/> ADD/CANCEL DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order <input type="checkbox"/> Divorce *If marriage, state previous name					
<input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status <input type="checkbox"/> Other (explain)					

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	MARK	DWAYNE	COOPER	[REDACTED]



DEPENDENT
DATA

OTHER
CHANGES

RICHLAND COUNTY SHERIFF'S OFFICE
Mansfield, Ohio

ACKNOWLEDGEMENT SHEET

I acknowledge receipt of the Richland County Sheriff's Office Employee Handbook and hereby affirm I have read and understand the written information in this booklet and agree to follow all the rules and regulations therein. I further agree if any subject matter in this booklet is not clear to me, I will contact my immediate supervisor for clarification. I understand that as a Richland County Sheriff's employee, I must always strive to do my best on the job and treat others with respect, and follow the rules described in this handbook.

Employee's Signature Mark Coy
Date 10/15/03

NOTE: Return signed acknowledgement to Nancy Metcalf's office prior to September 21, 2001.



AUTHORIZATION FOR DUES DEDUCTION
FRATERNAL ORDER OF POLICE, OHIO LABOR COUNCIL, INC.

222 E. Town St., Columbus, Ohio 43215
1-800-FOP-OLCI

\$13.82

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

(PLEASE PRINT)

Place of Employment RICHLAND CO. SO. 0349

Name of Employee: MARK D. COOPER # [REDACTED]

[REDACTED]

Classification CORRECTIONS OFFICER

Department CORRECTION DEPT.

Signature Mark Cooper Date 12/10/03

Mail white copy to FOP-OLC at above address
Present card to your Auditor



RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

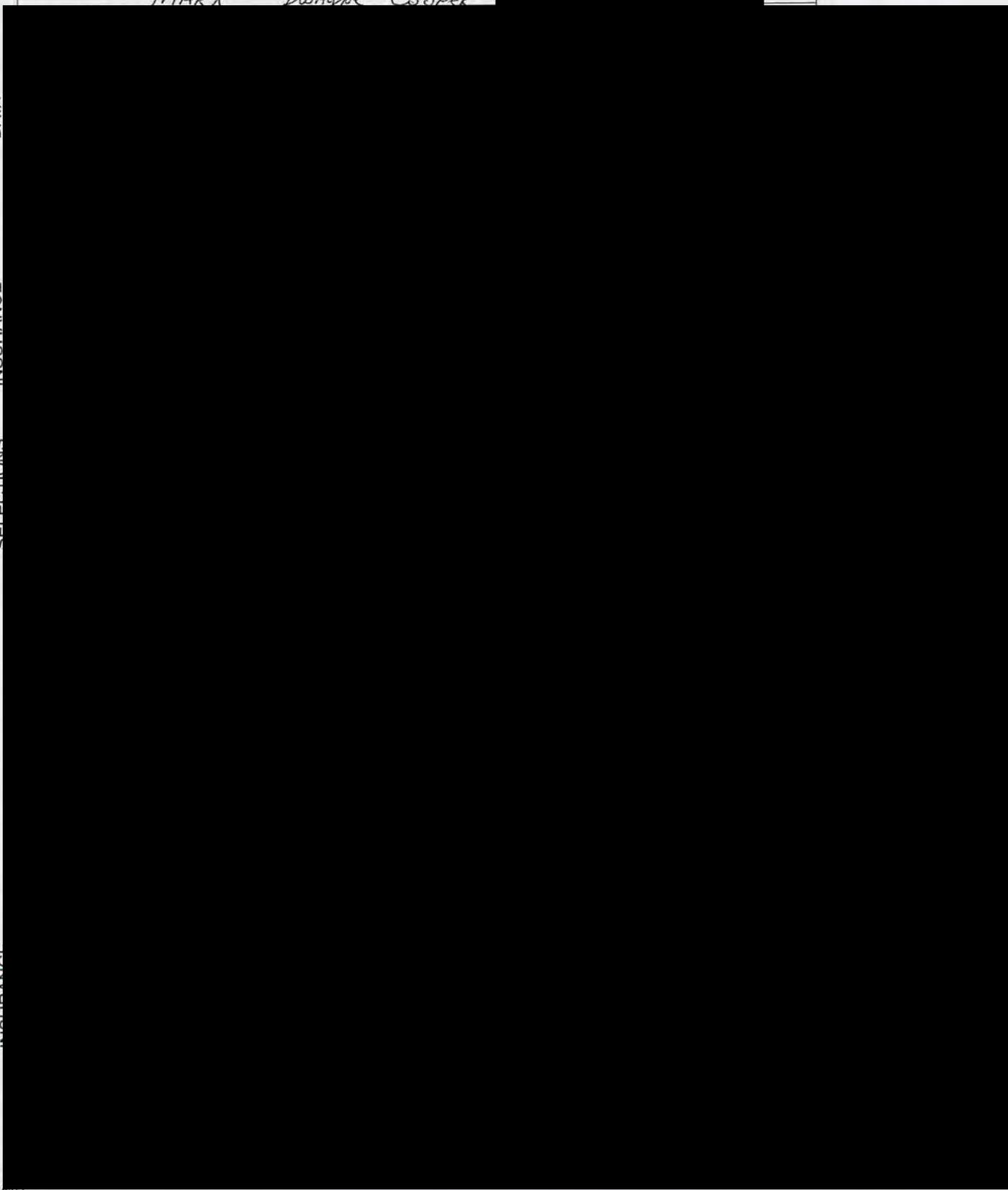
Department Number: 349
Employee Number: [REDACTED]

CHECK ONE: <input type="checkbox"/> OPEN ENROLLMENT <input checked="" type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
<i>CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE</i>		<u>10-16-03</u>	<u>12-1-03</u>
<input type="checkbox"/> Change division <input type="checkbox"/> Convert to COBRA <input type="checkbox"/> Reinstate above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
<input type="checkbox"/> CANCEL COVERAGE: <input type="checkbox"/> Terminate employment <input type="checkbox"/> Voluntary withdrawal <input type="checkbox"/> Leave of absence <input type="checkbox"/> Decreased hours			
<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order			
<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Marriage <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status			
<input type="checkbox"/> OTHER CHANGE (Specify):			

OTHER CHANGES

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	<u>MARK</u>	<u>DWAYNE</u>	<u>COOPER</u>	[REDACTED]

EMPLOYEE/DEPENDENT DATA
OTHER INSURANCE
BENEFIT SELECTIONS
FLEXIBLE SPENDING
LIFE INSURANCE



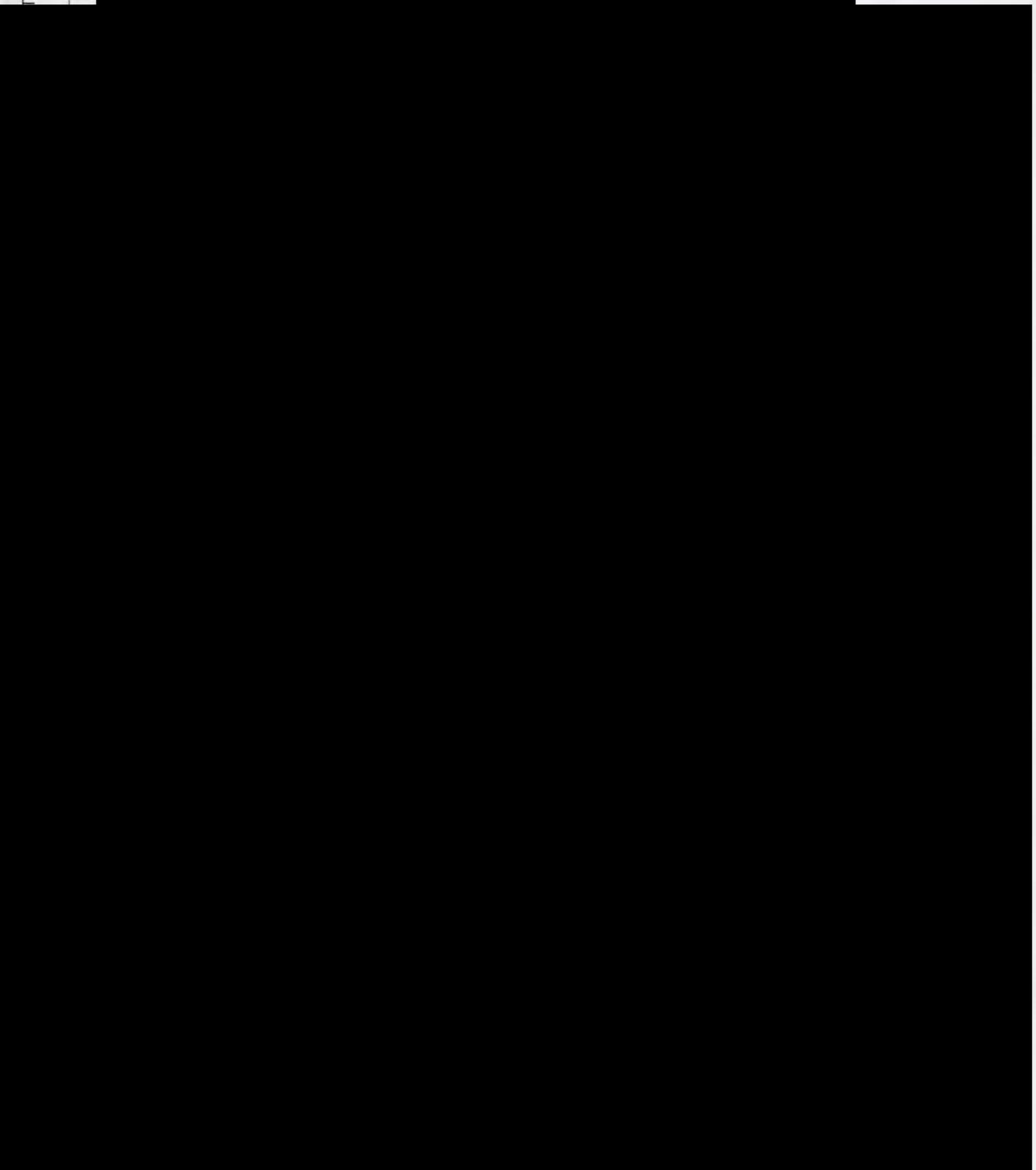
RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 0349
Employee Number: [REDACTED]

CHECK ONE: <input type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input checked="" type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
<input checked="" type="checkbox"/> CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE	<u>8/29/06</u>	<u>10/16/03</u>	
<input type="checkbox"/> Reinstate above indicated coverage with no lapse <input checked="" type="checkbox"/> Change name/address			
<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
<input checked="" type="checkbox"/> CANCEL DEPENDENT(S): <input checked="" type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status			

OTHER CHANGES

NAME OF EMPLOYEE: First: MARK Middle: DENNIS Last: COOPER Social: [REDACTED]



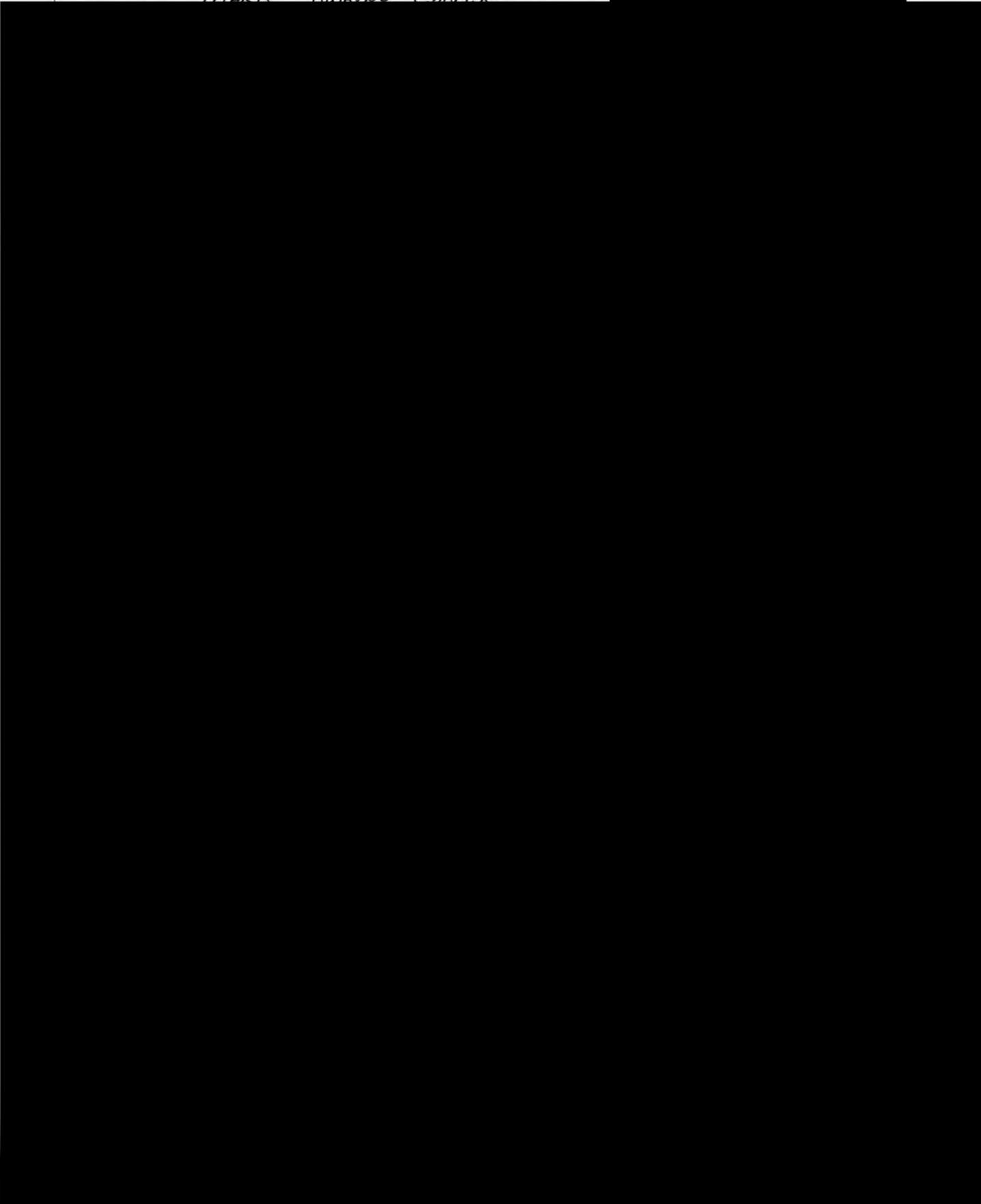
RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

COPY
Department Number: 0349
Employee Number: [REDACTED]

CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
<i>CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE</i>	11/1/07	10/16/03	1/1/07
<input checked="" type="checkbox"/> Reinstatement above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status			

OTHER CHANGES

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	MARK	DWAYNE	COOPER	[REDACTED]

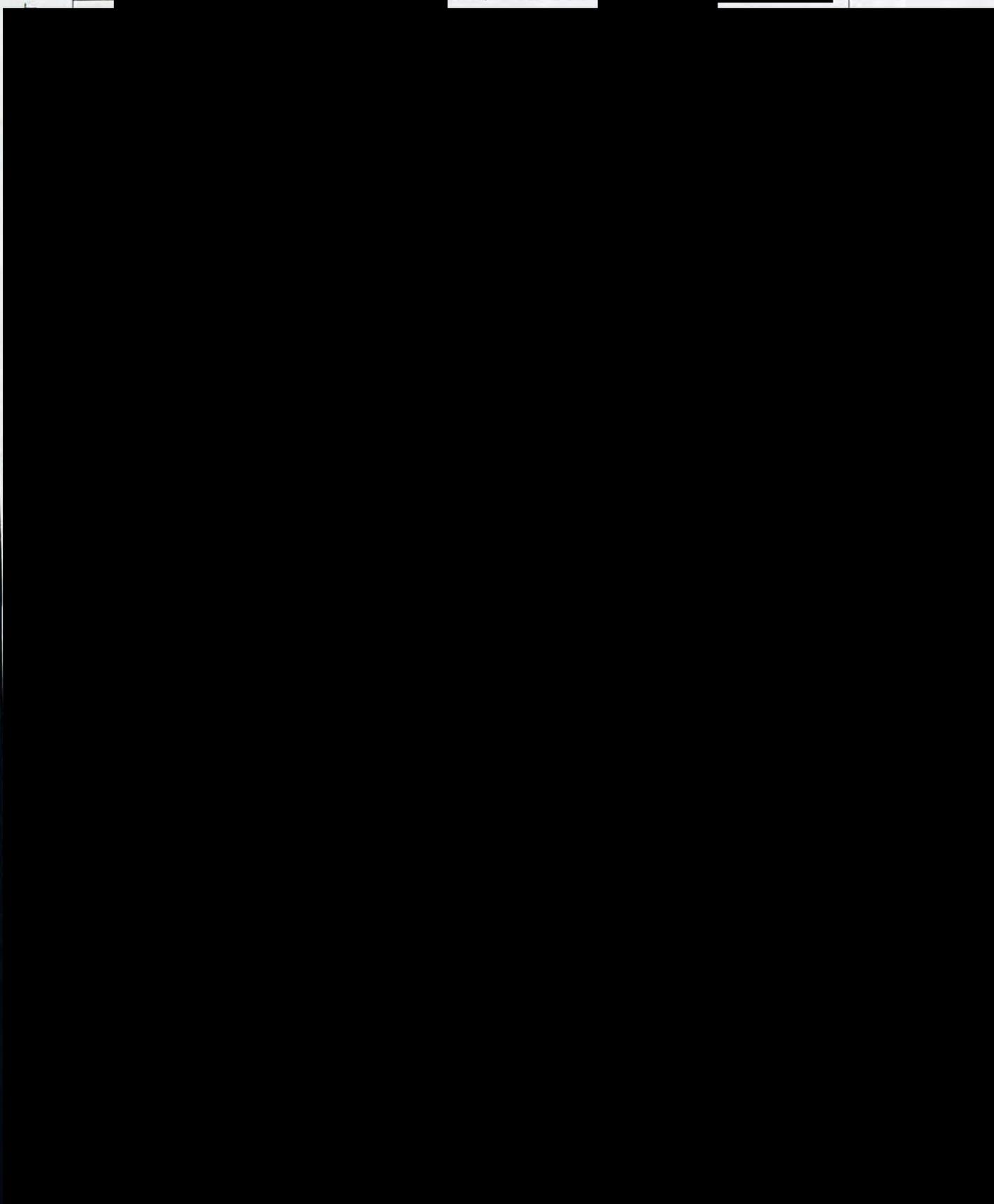


RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 0347
Employee Number: [REDACTED]

CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change: 10/18/12	Date of Hire: 10/16/03	Effective Date: 10/18/12
OTHER CHANGES: CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			
<input type="checkbox"/> CHANGE NAME/ADDRESS, state previous			
<input checked="" type="checkbox"/> ADD/CANCEL DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order <input type="checkbox"/> Divorce *If marriage, state previous name			
<input type="checkbox"/> Death <input checked="" type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status <input type="checkbox"/> Other (explain)			

NAME OF EMPLOYEE:	First: MARK	Middle: DWAYNE	Last: Cooper	Social Security #: [REDACTED]
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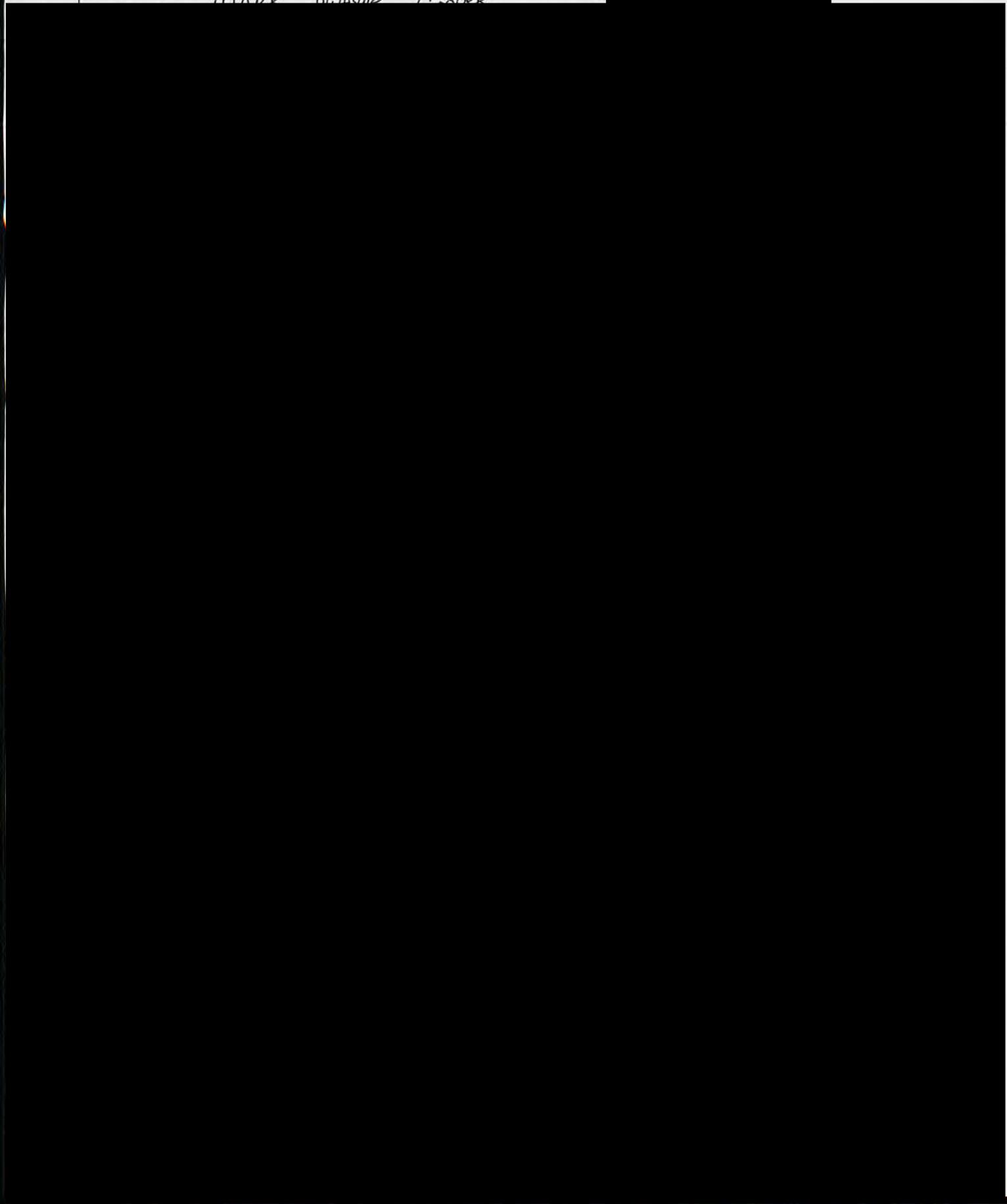


(use ballpoint pen and press firmly)

Employee Number: [REDACTED]

OTHER CHANGES	CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire: 10/16/03	Effective Date: 01-01-12
	CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			
	<input type="checkbox"/> CHANGE NAME/ADDRESS, state previous			
	<input type="checkbox"/> ADD/CANCEL DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order <input type="checkbox"/> Divorce *if marriage, state previous name			
<input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status <input type="checkbox"/> Other (explain)				

NAME OF EMPLOYEE:	First: MARK	Middle: Dwayne	Last: Cooper	Social Security #: [REDACTED]
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RICHLAND COUNTY Enrollment/Change Form

Department Number: 549
Employee Number: [REDACTED]

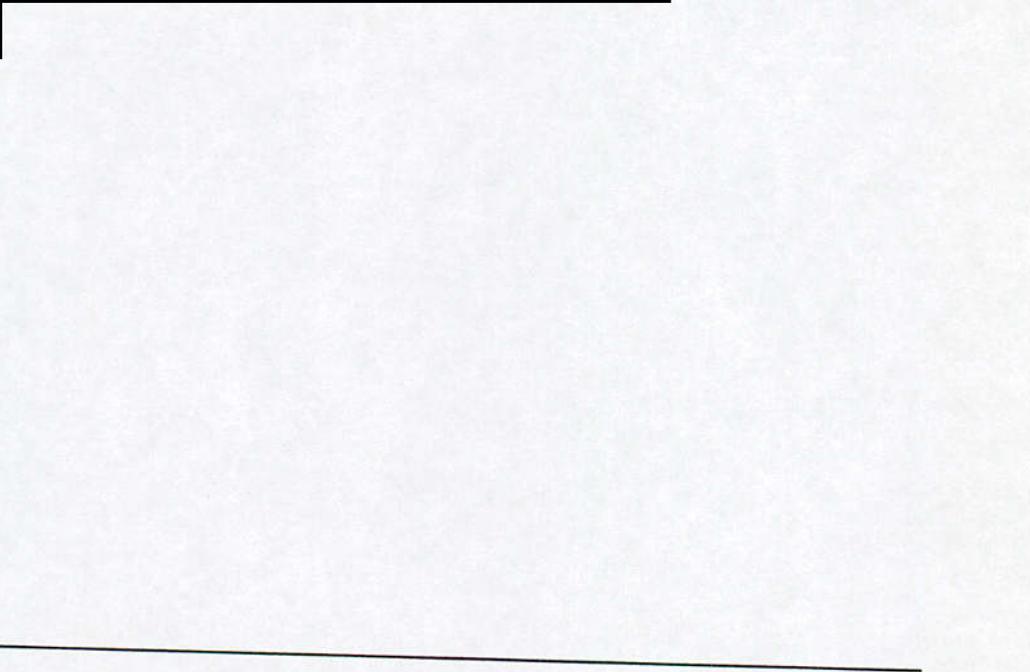
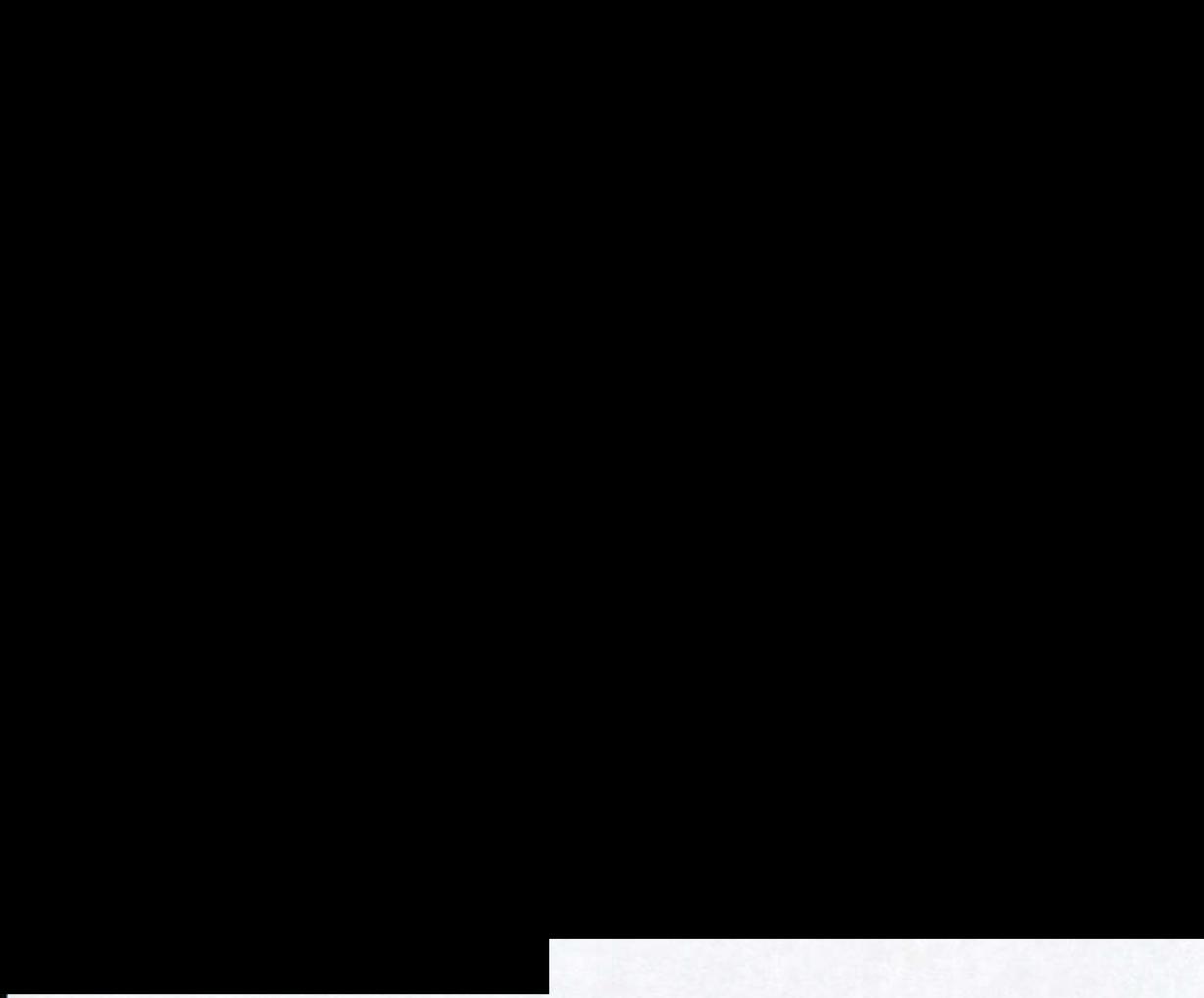
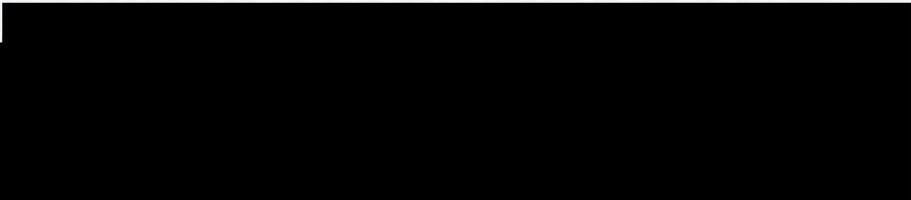
(use ballpoint pen and press firmly)

OTHER CHANGES	CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire: <u>10-16-03</u>	Effective Date: <u>01-01-2011</u>	
	<i>CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE</i>				
	<input type="checkbox"/> CHANGE NAME/ADDRESS, state previous				
	<input type="checkbox"/> ADD/CANCEL DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order <input type="checkbox"/> Divorce *If marriage, state previous name				
<input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status <input type="checkbox"/> Other (explain)					

NAME OF EMPLOYEE:	First: <u>MARK</u>	Middle: <u>DWAYNE</u>	Last: <u>COOPER</u>	Social Security: <u>[REDACTED]</u>
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Richland Co. Payroll Form

COOPER, MARK # [REDACTED]		Gross Amount			Additional			
DOH: 10-16-03		Regular	Corr Pay	Overpay	Holiday	Corr Hol Pay	Overpay	Comments
Pay Period	Date Paid							
1	01/01/10	1,531.82						
2	01/15/10	1,579.79	1,523.34	56.45	473.94	457.00	16.94	Christmas/N.Y.'s
3	01/29/10	1,579.78	1,523.34	56.44	78.99	76.17	2.82	4 hrs. MLK
4	02/12/10	1,579.78	1,523.34	56.44				
5	02/26/10	1,579.78	1,523.34	56.44				
6	03/12/10	1,579.79	1,523.34	56.45				
7	03/26/10	1,579.79	1,523.34	56.45				
							TOTAL OVERPAID	
Y.T.D.				338.67			19.76	\$ 358.43



RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 349
Employee Number: [REDACTED]

OTHER CHANGES	CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
	<i>CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE</i>			
	<input type="checkbox"/> Reinstate above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
	<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status				

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	<u>MARK</u>	<u>DWAYNE</u>	<u>CONNER</u>	[REDACTED]

Richland Co. Payroll Form

COOPER, MARK		Gross Amount										Additional	
DOH: 10-16-03		Regular	Split Regular	Overtime	Split Overtime	Holiday	Special Detail	Longevity	Bonus	On Call FTO	Year to Date Gross	Comments	
1	01/04/08	1,381.03	-	314.19	-	207.15	-	-	-	-	1,902.37	12 Hrs. OT/12 Hrs. N.Y.'s	
2	01/18/08	1,381.03	-	52.37	-	-	-	-	-	-	3,335.77	2 hrs. OT	
3	02/01/08	1,381.03	-	274.92	-	207.15	-	-	-	-	5,198.87	10.50 hrs. OT/12 hrs. MLK	
4	02/15/08	1,381.03	-	-	-	-	-	-	-	-	6,579.90		
5	02/29/08	1,381.03	-	157.10	-	-	-	-	-	-	8,118.03	6 Hrs. OT	
6	03/14/08	1,381.03	-	209.46	-	-	-	-	-	-	9,708.52	8 Hrs. OT	
7	03/28/08	1,381.03	-	-	-	-	-	-	-	-	11,089.55		
8	04/11/08	1,381.03	-	196.37	-	-	-	-	-	-	12,666.95	7.50 hrs. OT	
9	04/25/08	1,381.03	-	-	-	-	-	-	-	-	14,047.98		
10	05/09/08	1,381.03	-	209.46	-	-	-	-	-	138.10	15,776.57	8 hrs. OT/32 hrs. FTO	
11	05/23/08	1,381.03	-	-	-	-	-	-	-	345.26	17,502.86	80 hrs. FTO	
12	06/06/08	1,381.03	-	209.46	-	-	-	-	-	345.26	19,438.61	8 hrs. OT/80 hrs. FTO	
13	06/20/08	1,381.03	-	-	-	-	-	-	-	207.15	21,026.79	48 hrs. FTO	
14	07/04/08	1,381.03	-	261.83	-	-	-	-	-	-	22,669.65	10 Hrs. OT	
15	07/18/08	1,381.04	-	-	-	207.15	-	-	-	-	24,257.84	12 Hrs. July 4th	
16	08/01/08	1,381.04	-	52.37	-	-	-	-	-	-	25,691.25	2 hrs. OT	
17	08/15/08	1,381.03	-	8.64	-	-	-	-	-	-	27,080.92	.33 hr. OT	
18	08/29/08	1,429.37	-	-	-	-	-	-	-	-	28,510.29		
19	09/12/08	1,429.37	-	487.60	-	214.41	-	-	-	-	30,641.67	12 hrs. Labor Day/18 hrs. OT	
20	09/26/08	1,429.37	-	541.78	-	-	-	-	-	-	32,612.82	20 Hrs. OT	
21	10/10/08	1,429.36	-	270.89	-	-	-	-	-	-	34,313.07	10 hrs. OT	
22	10/24/08	1,485.37	-	225.11	-	445.61	-	-	880.64	-	37,349.80	80 hrs."C"/8 hrs. OT/24 hrs. Col.Day/Back Pay	
23	11/07/08	1,485.37	-	226.05	-	-	-	562.50	-	-	39,623.72	8 hrs. OT	
24	11/21/08	445.61	-	445.38	445.61	-	-	-	-	-	40,960.32	24 Hr. pay/16 Hrs. OT/24 Hrs. OT @ st. time/susp.	
25	12/05/08	1,039.76	-	675.63	297.07	-	-	-	-	-	42,972.78	56 Hr. pay/24 Hrs. OT/16 Hrs. OT @ st. time/susp.	
26	12/19/08	1,485.37	-	496.66	148.54	-	-	-	-	35.73	45,139.08	16 Hrs. OT/8 Hrs. OT @ st. time/8 Hrs. FTO	
Y.T.D.		35,136.48	-	5,315.27	891.22	1,281.47	-	562.50	880.64	1,071.50	45,139.08		

Richland Co. Payroll Form

COOPER, MARK # [REDACTED]
DOH: 10-16-03

		Gross Amount				Additional					Additional		Comments
Pay Period	Date Paid	Regular	Split Regular	Overtime	Split Overtime	Holiday	Special Detail	Longevity	Bonus	On Call FTO	Year to Date Gross		
1	01/02/09	1,485.36	-	678.15	-	-	-	-	-	-	2,163.51	24 hrs. OT	
2	01/16/09	1,531.82	-	233.02	-	459.55	-	-	-	-	4,387.90	8 hrs. OT/12 hrs. Christmas/12 hrs. New Years	
3	01/30/09	1,531.82	-	233.02	-	229.77	-	-	-	-	6,382.51	8 hrs. OT/12 hrs. MLK	
4	02/13/09	1,531.82	-	466.04	-	-	-	-	-	-	8,380.37	16 hrs. OT	
5	02/27/09	1,531.82	-	466.04	-	229.77	-	-	-	-	10,608.00	16 hrs. OT/12 hrs. Pres. Day	
6	03/13/09	1,531.82	-	-	-	-	-	-	-	-	12,139.82		
7	03/27/09	1,531.82	-	-	-	-	-	-	-	-	13,671.64		
8	04/10/09	1,531.82	-	-	-	-	-	-	-	-	15,203.46		
9	04/24/09	1,531.82	-	-	-	-	-	-	-	-	16,735.28		
10	05/08/09	-	-	-	-	-	-	-	-	-	16,735.28		
11	05/22/09	-	-	-	-	-	-	-	-	-	16,735.28		
12	06/05/09	-	-	-	-	-	-	-	-	-	16,735.28		
13	06/19/09	-	-	-	-	-	-	-	-	-	16,735.28		
14	07/03/09	-	-	-	-	-	-	-	-	-	16,735.28		
15	07/17/09	-	-	-	-	-	-	-	-	-	16,735.28		
16	07/31/09	-	-	-	-	-	-	-	-	-	16,735.28		
17	08/14/09	-	-	-	-	-	-	-	-	-	16,735.28		
18	08/28/09	-	-	-	-	-	-	-	-	-	16,735.28		
19	09/11/09	-	-	-	-	-	-	-	-	-	16,735.28		
20	09/25/09	-	-	-	-	-	-	-	-	-	16,735.28		
21	10/09/09	-	-	-	-	-	-	-	-	-	16,735.28		
22	10/23/09	-	-	-	-	-	-	-	-	-	16,735.28		
23	11/06/09	-	-	-	-	-	-	-	-	-	16,735.28		
24	11/20/09	-	-	-	-	-	-	-	-	-	16,735.28		
25	12/04/09	-	-	-	-	-	-	-	-	-	16,735.28		
26	12/18/09	-	-	-	-	-	-	-	-	-	16,735.28		
Y.T.D.		13,739.92	-	2,076.27	-	919.09	-	-	-	-	16,735.28		

Richland Co. Payroll Form

COOPER, MARK # [REDACTED]
DOH: 10-16-03

Pay Period	Date Paid	Gross Amount				Additional					Year to Date Gross	Comments
		Regular	Split Regular	Overtime	Split Overtime	Year to Holiday	Special Detail	Longevity	Bonus	On Call FTO		
1	01/05/07	1,076.40	-	-	-	-	-	-	-	-	1,076.40	
2	01/19/07	430.56	828.62	405.04	-	-	-	-	-	-	2,740.62	17 Hrs. OT
3	02/02/07	1,381.03	-	176.25	-	-	-	-	-	-	4,297.90	6.75 Hrs. OT
4	2/16/07	1,307.66	-	319.86	4.32	-	-	-	-	-	5,929.74	75.75 Hrs./docked 15 min./12.25 Hrs. OT/25 OT @ st. time
5	3/2/07	1,381.03	-	208.89	-	-	-	-	-	-	7,519.66	8 Hrs. OT
6	3/16/07	1,381.03	-	182.77	-	-	-	-	-	-	9,083.46	7 Hrs. OT
7	3/30/07	1,381.03	-	417.77	-	-	-	-	-	-	10,882.26	16 Hrs. OT
8	4/13/07	1,381.03	-	-	-	-	-	-	-	-	12,263.29	
9	4/27/07	1,381.03	-	417.77	-	-	-	-	-	-	14,062.09	16 Hrs. OT
10	5/11/07	1,381.03	-	52.22	-	-	-	-	-	-	15,495.34	2 Hrs. OT
11	5/25/07	1,381.04	-	-	-	-	-	-	-	-	16,876.38	
12	6/8/07	1,381.03	-	208.89	-	-	-	-	-	-	18,466.30	8 hrs. OT
13	6/22/07	1,381.03	-	372.08	-	-	-	-	-	-	20,219.41	14.25 Hrs. OT
14	7/6/07	1,381.03	-	228.47	-	-	-	-	-	-	21,828.91	8.75 Hrs. OT
15	7/20/07	1,381.03	-	-	-	-	-	-	-	34.53	23,244.47	8 Hrs. FTO
16	8/3/07	1,381.03	-	469.99	-	-	-	-	-	-	25,095.49	18 Hrs. OT
17	8/17/07	1,381.03	-	313.33	-	-	-	-	-	-	26,789.85	12 Hrs. OT
18	8/31/07	1,381.03	-	-	-	-	-	-	-	-	28,170.88	
19	9/14/07	1,381.03	-	287.22	-	-	-	-	-	-	29,839.13	11 Hrs. OT
20	9/28/07	1,368.08	-	261.11	-	-	-	-	-	-	31,468.32	79.25 Hr. pay/docked 45 min./10 Hrs. OT
21	10/12/07	1,381.03	-	208.89	-	-	-	-	-	-	33,058.24	8 hrs. OT
22	10/26/07	1,381.03	-	261.83	-	-	-	400.00	-	-	35,101.10	10 hrs. OT
23	11/9/07	1,381.03	-	209.46	-	-	-	-	-	-	36,691.59	8 hrs. OT
24	11/23/07	1,381.03	-	209.46	-	-	-	-	-	-	38,282.08	8 hrs. OT
25	12/7/07	1,381.03	-	-	-	207.15	-	-	-	-	39,870.26	12 Hrs. Thanks
26	12/21/07	1,381.03	-	-	-	-	-	-	-	-	41,251.29	
Y.T.D.		34,565.37	828.62	5,211.30	4.32	207.15	-	400.00	-	34.53	41,251.29	

Request for Verification of Employment

ne09040057

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

Instructions: Lender - Complete items 1 through 7. Have applicant complete item 8. Forward directly to employer, named in Item 1.
 Employer - Please complete either Part II or Part III as applicable. Complete Part IV and return directly to lender named in Item 2.
 The form is to be transmitted directly to the lender and is not to be transmitted through the applicant or any other party.

Part I - Request

1. To (Name and address of employer)
 Richland Co Sheriffs Office
 55 E. 2nd St.
 Mansfield, OH 44902
 (P) 419-774-7864

2. From (Name and address of lender)
 [Redacted]

I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any interested party.

3. Signature of Lender
 4. Title: Production Specialist
 5. Date: 04/27/2009
 6. Lender's No. (Optional)

I have applied for a mortgage loan and stated that I am now or was formerly employed by you. My signature below authorizes verification of this information.

7. Name and Address of Applicant (include employee or badge number)
 Mark D Cooper, [Redacted]

8. Signature of Applicant
 SEE ATTACHMENT

9. Applicant's Date of Employment: 10-16-03
 10. Present Position: CORRECTION OFFICER
 11. Probability of Continued Employment: YES

12A. Current Gross Base Pay (Enter Amount and Check Period)
 Annual Hourly Monthly Other (Specify) Weekly
 \$ 18,447.88 19.1478

13. For Military Personnel Only
 Pay Grade
 Type Monthly Amount
 Base Pay \$
 Rations \$
 Flight or Hazard \$
 Clothing \$
 Quarters \$
 Pro Pay \$
 Overseas or Combat \$
 Variable Housing Allowance \$

14. If Overtime or Bonus is Applicable, Is Its Continuance Likely?
 Overtime Yes No
 Bonus N/A Yes No

15. If paid hourly-average hours per week: 40

12B. Gross Earnings					
Type	Year To Date	Past Year 08	Past Year 07		
Base Pay	Thru 04-24 \$ 13,739.92	\$ 36,017.12	\$ 35,393.99		
Overtime	\$ 2,076.27	\$ 6,206.49	\$ 5,215.62		
HOLIDAY					
Commissions	\$ 919.09	\$ 1,281.47	\$ 207.15		
OTHER					
Bonus	\$ 0	\$ 1,634.00	\$ 434.53		
Total	\$ 16,735.28	\$ 45,139.08	\$ 41,251.29		

16. Date of applicant's next pay increase: 01-01-10

17. Projected amount of next pay increase: \$1,246.95 ANNUUM

18. Date of applicant's last pay increase: 01-01-09

19. Amount of last pay increase: \$1,207.82 ANNUUM

20. Remarks (if employee was off work for any length of time, please indicate time period and reason)
 N/A

21. Date Hired
 22. Date Terminated
 23. Salary/Wage at Termination Per (Year)(Month)(Week)
 Base Overtime Commissions Bonus
 24. Reason for Leaving
 25. Position Held

Part II - Authorized Signature

Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer: Patricia A. Gallaway
 27. Title (Please print or type): Payroll Supervisor
 28. Date: 04-28-09
 29. Print or type name signed in Item 26: PATRICIA A. GALLAWAY
 30. Phone No.: 419-774-3559

RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

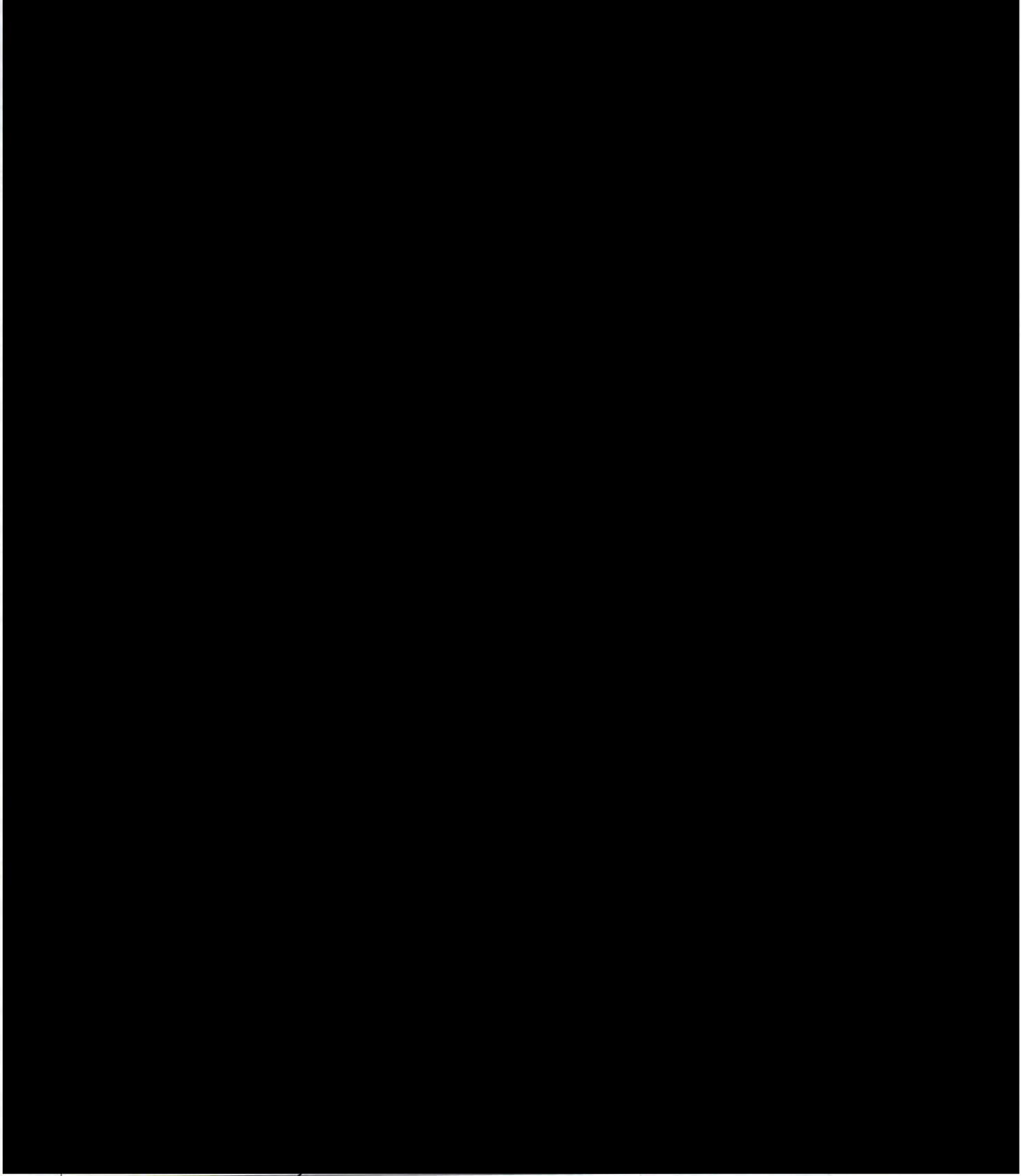
Department Number: 349
Employee Number: [REDACTED]

COPY

OTHER CHANGES	CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
	<i>CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE</i>		<u>10/16/03</u>	<u>1-1-08</u>
	<input type="checkbox"/> Reinstatement above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
	<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status				

NAME OF EMPLOYEE: First: Middle: Last: Social Security #:

MARK DWAYNE COOPER [REDACTED]



Shift Trade Form

Employee #1
As of 8-27-06, I, GARRY MILLS, am presently assigned to A-Watch
(Date) (Name) (Watch)
in CORRECTION. *w/Young*
(Bureau)

Employee #2
As of 8-27-06, I, MARK COOPER, am presently assigned to B-Watch
(Date) (Name) (Watch)
in CORRECTIONS. *w/G.Mills*
(Bureau)

1. We would like to trade shifts and/or schedules effective:
Employee #1 to work 8-30-06 B-Watch to and 9-30-06 B-Watch
(Date) (Watch) (circle) (Date) (Watch)

for

Employee #2 to work 8-30-06 A-Watch to and 9-30-06 A-Watch
(Date) (Watch) (circle) (Date) (Watch)

2. During a mutually agreed upon shift trade by two corrections/supervisors/transport Officers, no overtime shall be paid to either employee due to working more than eight (8) hours in a twenty four (24) hour period.

3. Other considerations not covered above: NA

It is expressly understood, by both parties, that this is a full release of all expressed or implied rights, entitlements, or other benefits that I may have earned or am entitled to.

Signature of employee #1 Garry R. Mills 8-27-06
(Date)

Signature of employee #2 Mark Cooper 8/27/06
(Date)

Date submitted 8-27-06

Signature of supervisor of employee #1 St. R. Santos
Approved Yes (X) No () Date 08-28-06

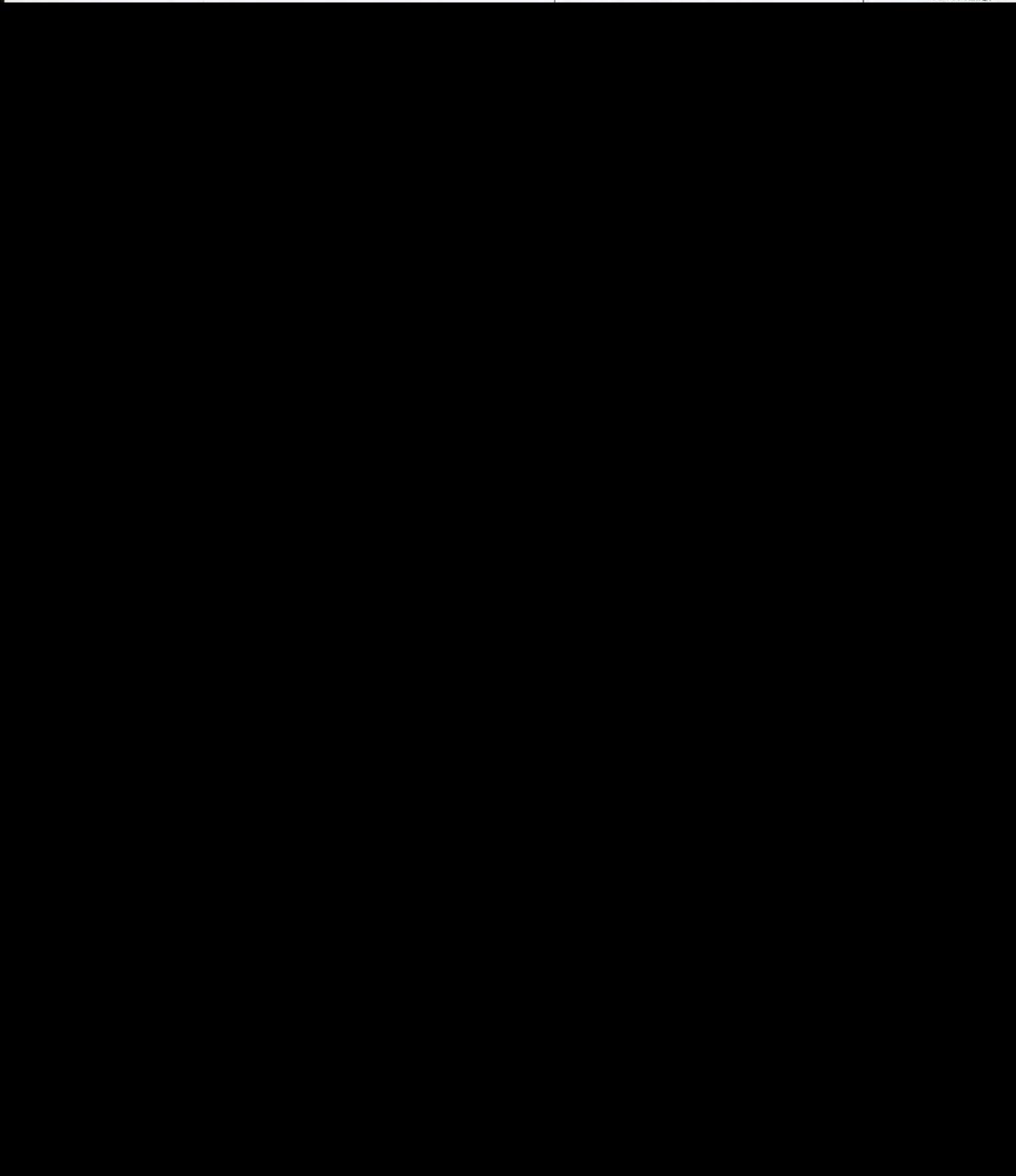
Signature of supervisor of employee #2 Se 22
Approved Yes (X) No () Date 8-28-06

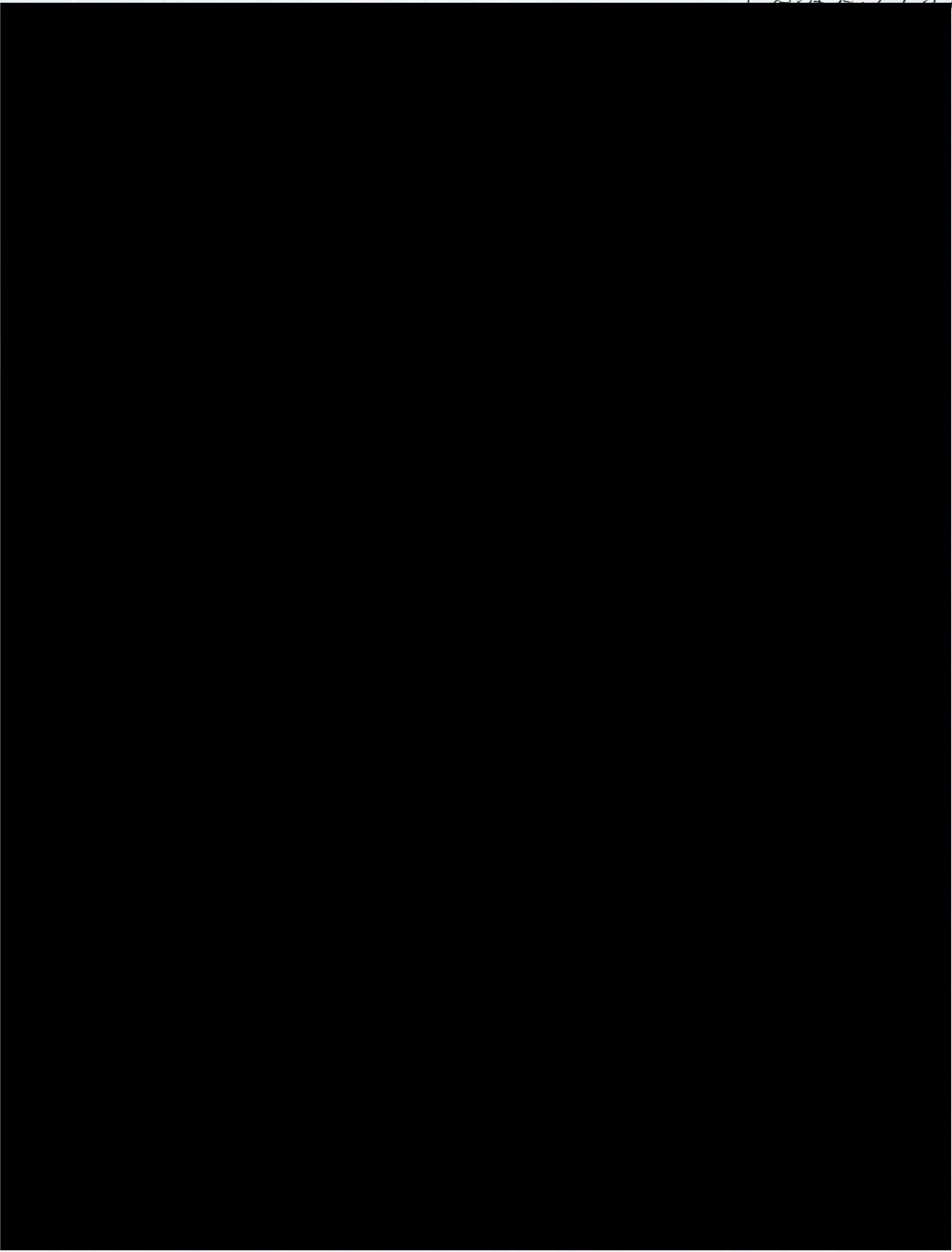
Signature of Jail administrator Maj R. [Signature]

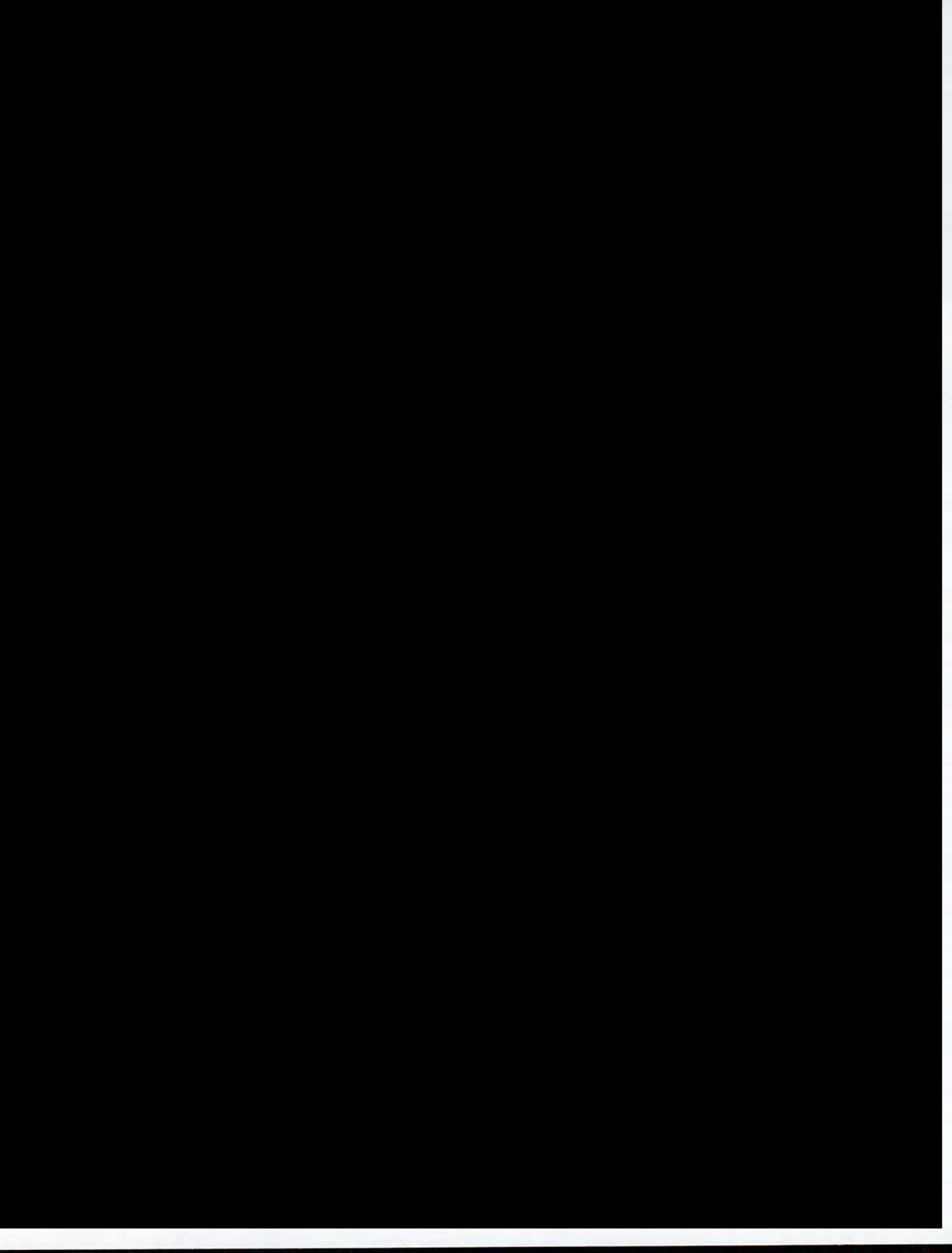
*How long?
Shift swap in
Oct.*

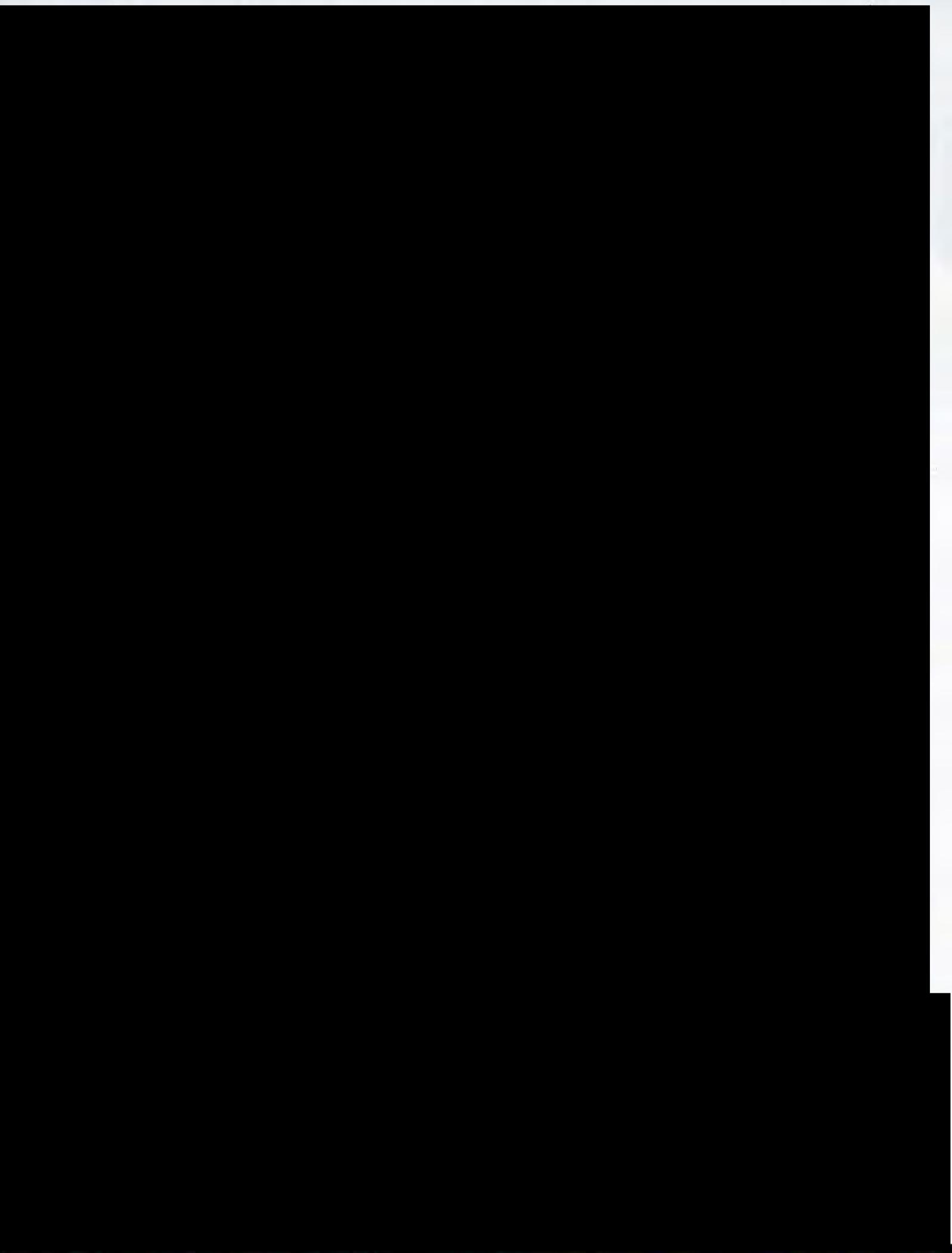
**Beneficiary Designation -
Group Life Insurance**

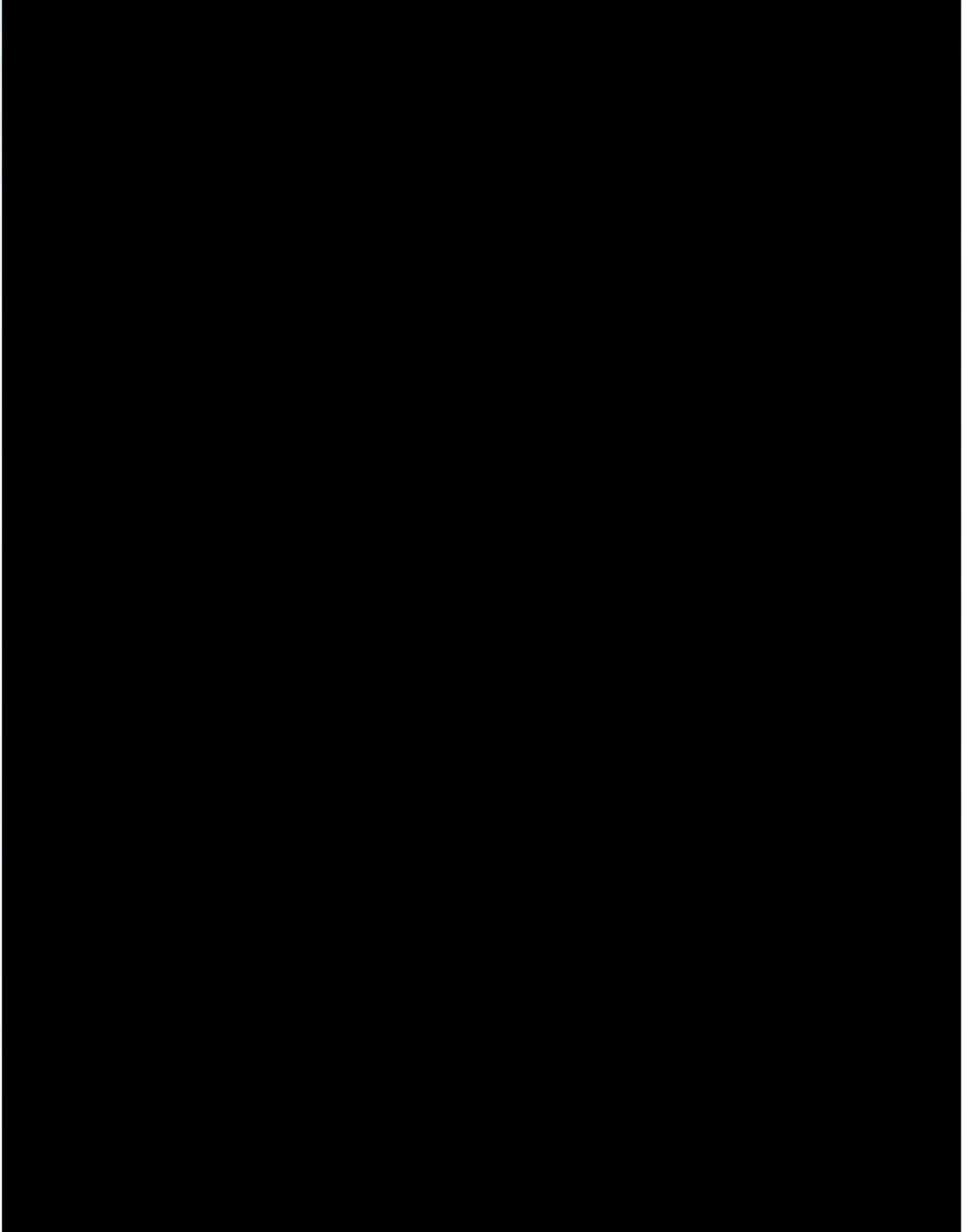
*American United Life Insurance Company®
One American Square, P.O. Box 368
Indianapolis, IN 46206-0368
(317) 285-1877*





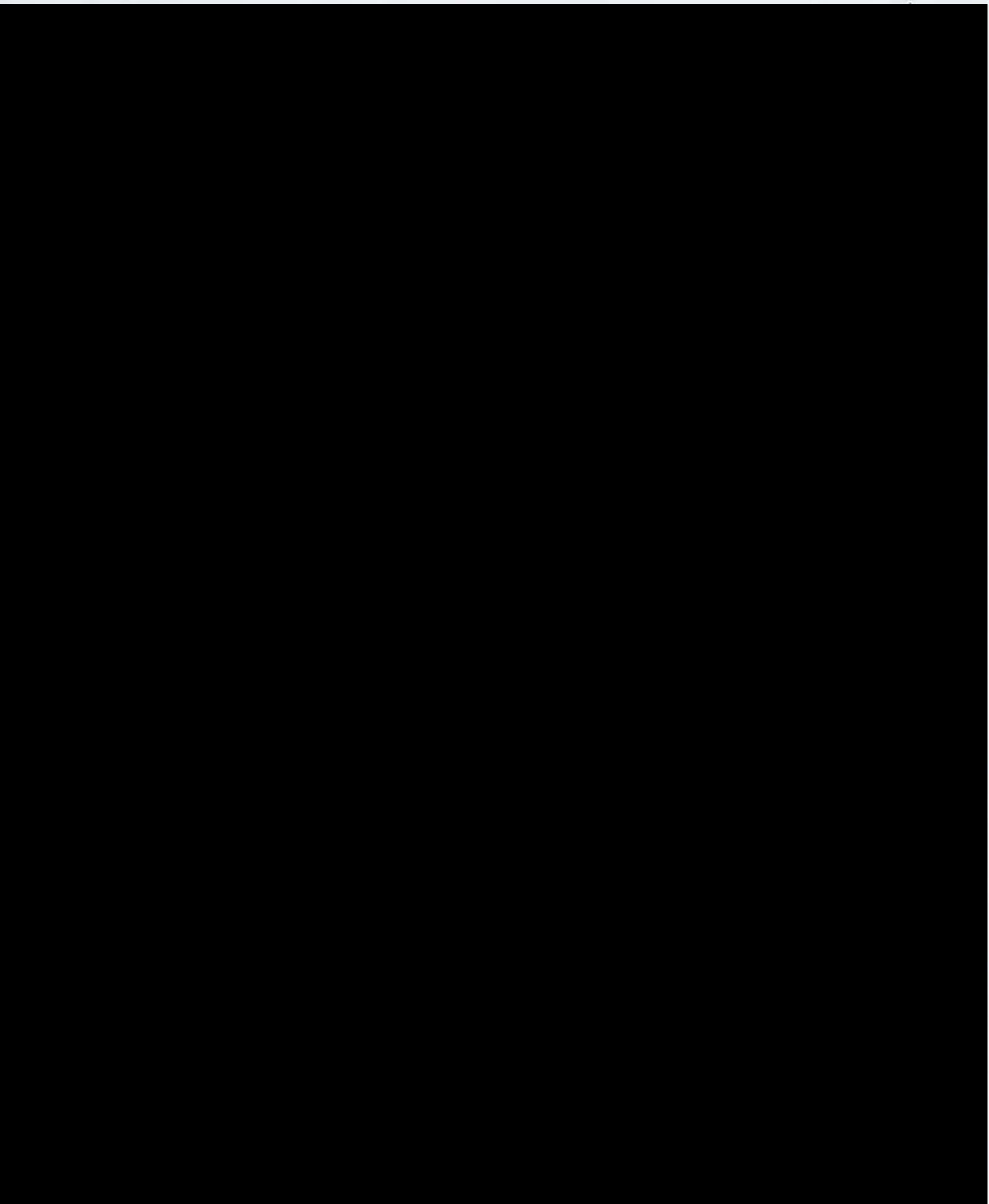


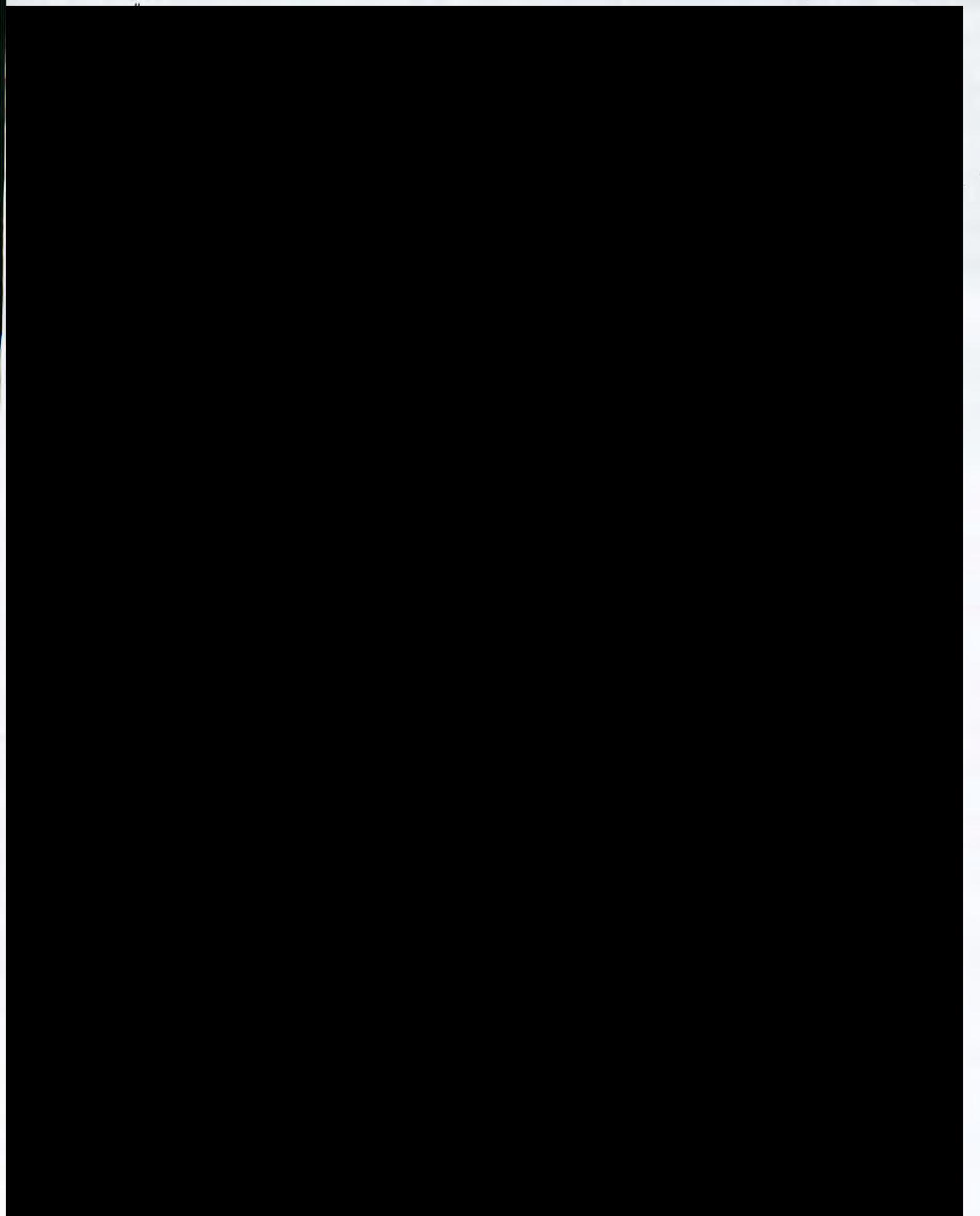


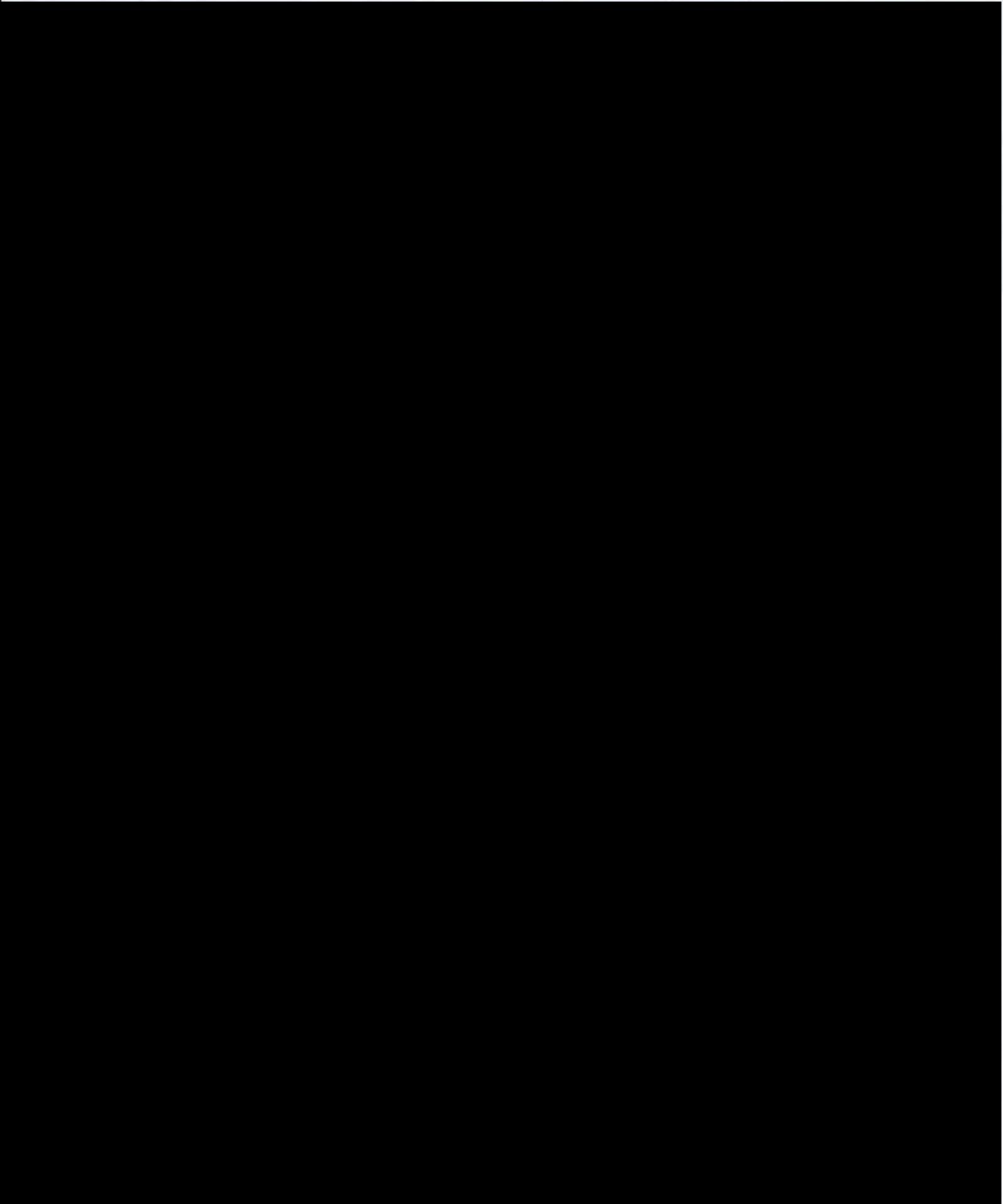


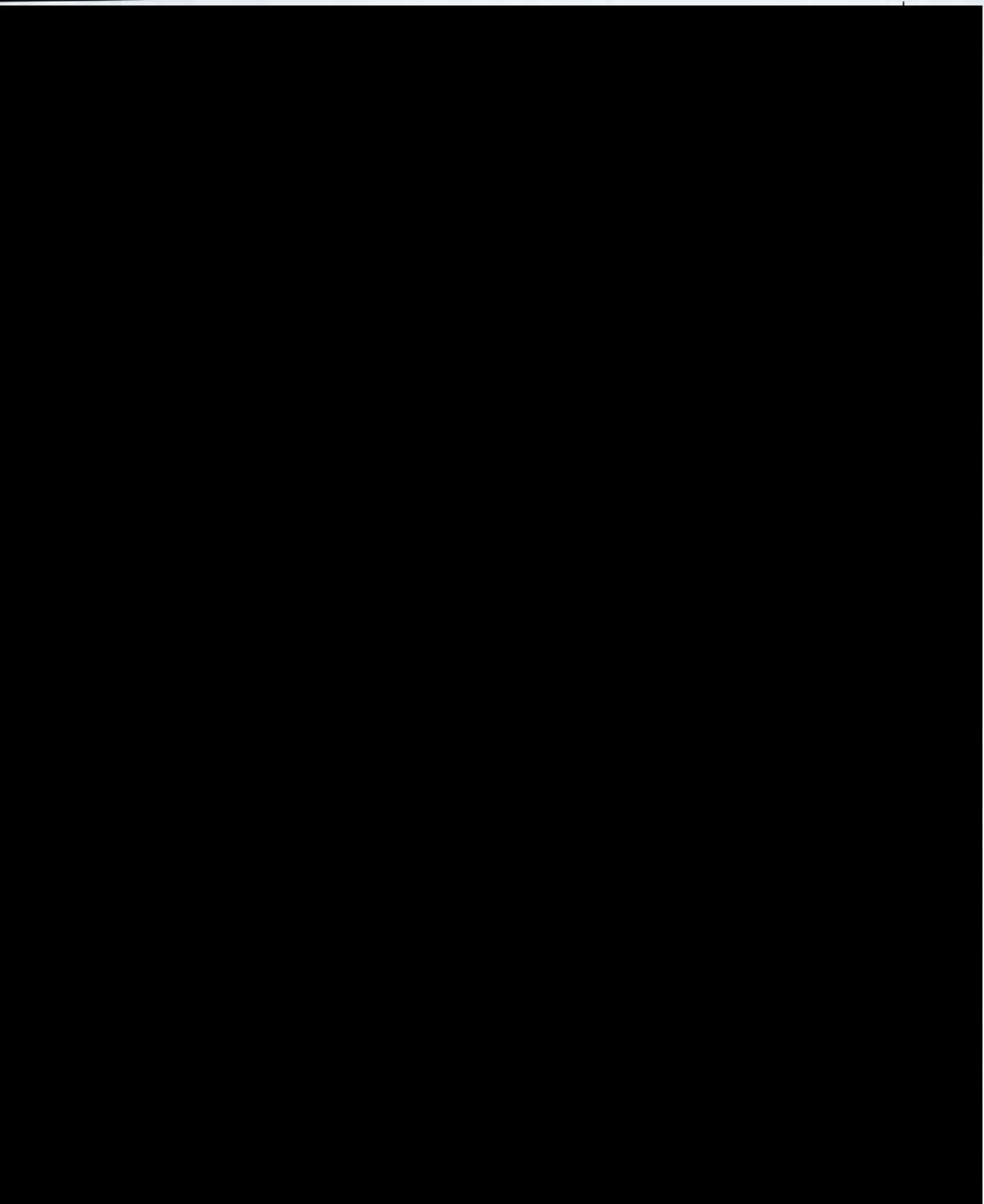
||

|











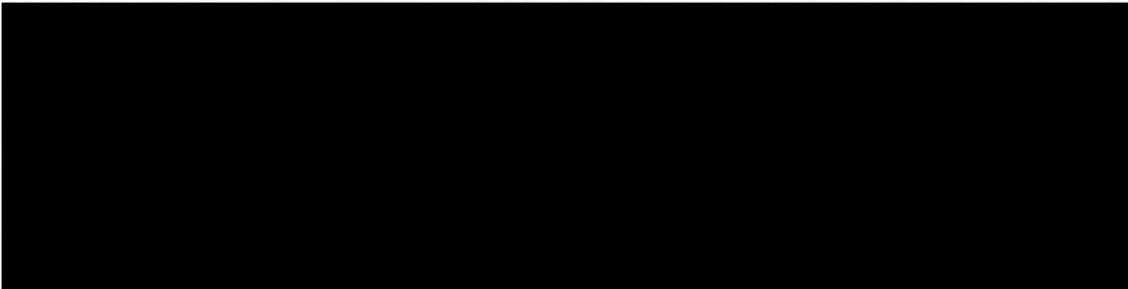
J. Steve Sheldon, Sheriff

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

March 31, 2006

Honorable Judge Konstam:

Mark Cooper is a full time employee with the Richland County Sheriff's Office.



Patricia A. Gallivay
Patricia A. Gallivay
Payroll Supervisor

COPY



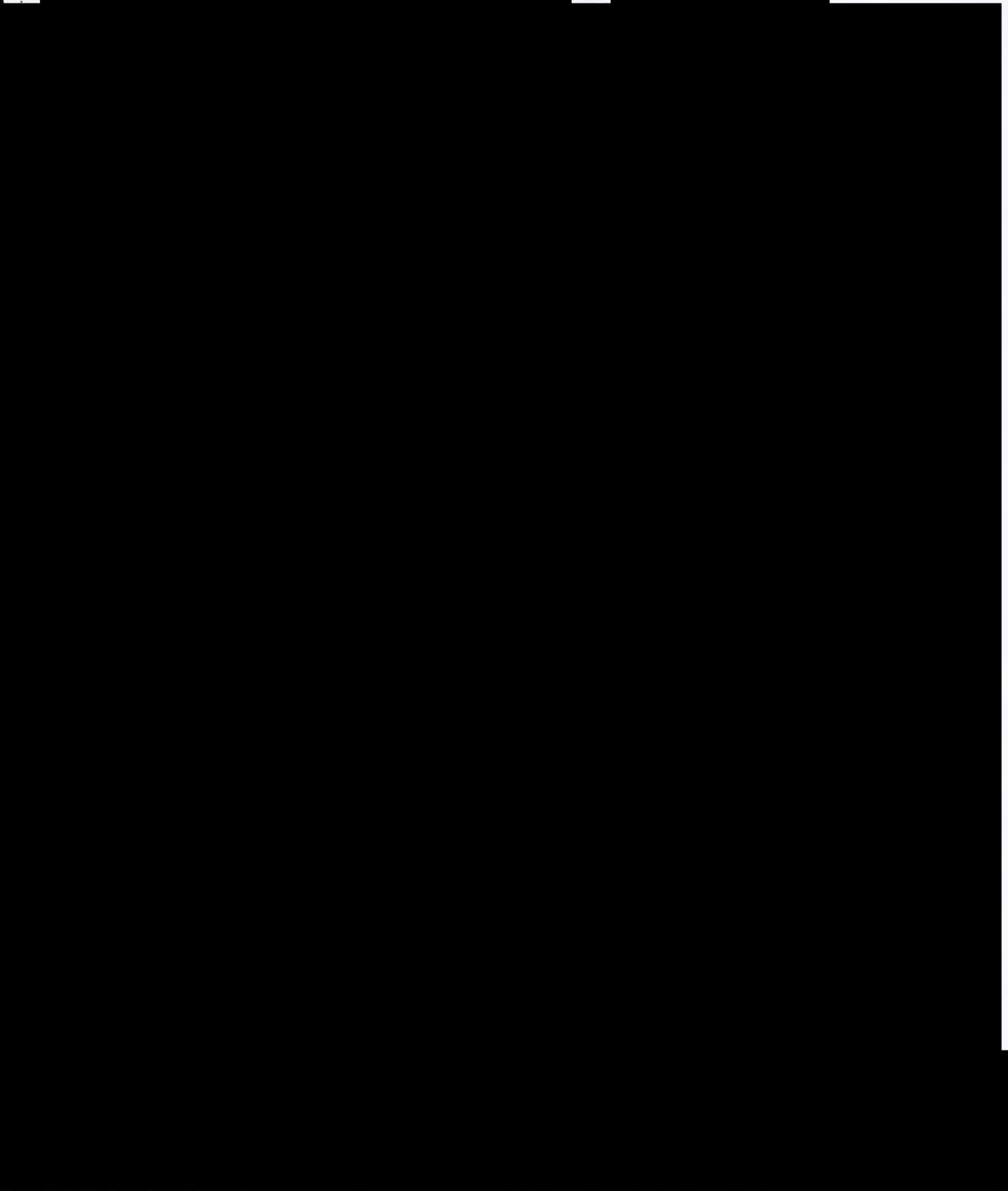
RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 349
Employee Number: [REDACTED]

CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
<i>CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE</i>		10/16/03	01/01/06
<input type="checkbox"/> Reinstate above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status			

OTHER CHANGES

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
	MARK	Dwayne	CORDER	[REDACTED]



Mike Scott
Office of the Sheriff



State of Florida
County of Lee

July 26, 2005

VIA FACSIMILE (419) 774-5891
(419) 774-5646

Richland County Sheriff's Office
Personnel Dept

Attn: Pat Galliway

Re: Mark D. Cooper

Dear Ms. Galliway:

This is to inform you that Mark D. Cooper was employed as a Detentions Corporal with our Agency from January 26, 1998 to August 19, 2003. When Mr. Cooper resigned he had 66.66 hours of Sick Time Accrued.

If you should need further information please feel free to contact me.

Very truly yours,

A handwritten signature in cursive script that reads "Linda B Walker".

Linda B. Walker
Financial Assistant
(239) 477-1025
(239) 477-1347 - Fax

*Can not
add out
of State*

2005 JUL 29 PM 12:30





14750 Six Mile Cypress Parkway
Fort Myers, Florida 33912-4406

Office of the Sheriff
Mike Scott
Lee County



Richland Co. Sheriff's Office
Attn: Pat Gallway, Personnel Dept.
55 East Second St.
Mansfield, Ohio 44902

7507-26-2005

POSTNET

FIRST CLASS

MAILED FROM 33901

US POSTAGE

JUL 26 2005

\$0.30

HASLER

FGKD7M 44902



CO

Mike Scott
Office of the Sheriff



** not from another State **
State of Florida
County of Lee

July 15, 2005

Richard County Sheriff's Office
C/O Ms. Pat Galiway
55 East Second St. Mansfield, Ohio 44902

Dear Ms. Galiway:

This is to verify that Mark D. Cooper was employed as a fulltime Deputy Sheriff with the Lee County Sheriff's Office on January 26, 1998 to August 19, 2003.

Sincerely,

MIKE J. SCOTT
Sheriff, Lee County

Annmaire Reno
Personnel Manager, Human Resources

AR/zb

10-16-03

2005 JUL 18 PM 12:40



14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 349
Employee Number: [REDACTED]

OTHER CHANGES	CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE	Date of Change:	Date of Hire:	Effective Date:
	CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE		<u>10-16-03</u>	<u>01-01-05</u>
	<input type="checkbox"/> Reinstate above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
	<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status				

NAME OF EMPLOYEE: First: Middle: Last: Social Security #:

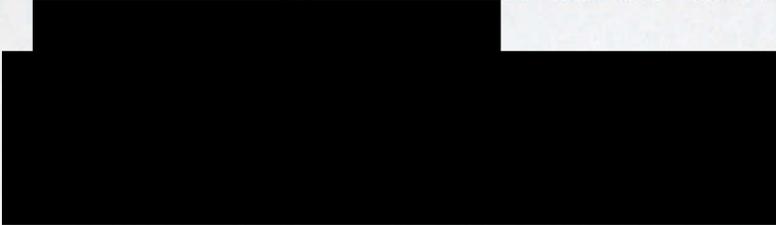
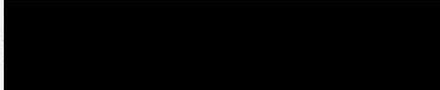
mark [REDACTED] [REDACTED] [REDACTED] [REDACTED]



To: Pat Galliway

From: C.O. Mark Cooper 7c53

Pat, I'm writing you this letter to inform you that I have moved.



747-4953

Thank you in advance for making all the changes.

Mark Cooper 8/7/04

Pat Galliway

RICHLAND COUNTY Enrollment/Change Form
(use ballpoint pen and press firmly)

Department Number: 349
Employee Number: [REDACTED]

CHECK ONE: <input checked="" type="checkbox"/> OPEN ENROLLMENT <input type="checkbox"/> NEW HIRE <input type="checkbox"/> CHANGE		Date of Change:	Date of Hire:	Effective Date:
CHECK ALL APPROPRIATE BOXES BELOW FOR CHANGE			<u>Oct 23, 2003</u>	<u>Jan 1, 2004</u>
OTHER CHANGES	<input type="checkbox"/> Reinstatement above indicated coverage with no lapse <input type="checkbox"/> Change name/address			
	<input type="checkbox"/> ADD DEPENDENT(S): <input type="checkbox"/> Marriage* <input type="checkbox"/> Birth <input type="checkbox"/> Adoption <input type="checkbox"/> Court Order *If marriage, state previous name			
	<input type="checkbox"/> CANCEL DEPENDENT(S): <input type="checkbox"/> Divorce <input type="checkbox"/> Death <input type="checkbox"/> Age Limit <input type="checkbox"/> Change in student status			

NAME OF EMPLOYEE:	First:	Middle:	Last:	Social Security #:
<u>Mark</u>		<u>D</u>	<u>Copper</u>	[REDACTED]

PERSONAL HISTORY RECORD

INSTRUCTIONS

1. As an OPERS member you are required to complete a Personal History Record (Form A). Please fill out the form in **blue or black ink**.
2. Be sure your date of birth and Social Security Number, which are used to identify your account, are entered correctly.
3. Sign the form in SECTION 5 - **EMPLOYEE CERTIFICATION**. We cannot accept a typed or printed signature.
4. The employer is required to complete SECTION 6 - **EMPLOYER CERTIFICATION**.
5. The employer is required to mail the **completed** form to OPERS at the above address immediately upon hire.

SECTION 1 - PERSONAL INFORMATION

Name MARK DWAYNE COOPER

Home Telephone [REDACTED] Work Telephone (419) 774-5678

Fax Number () E-mail address

SECTION 2 - CURRENT EMPLOYMENT INFORMATION

Full-Time Part-Time

Start Date 10/16/03 (First Day Worked) Temporary Casual/Contingent
(MM/DD/YY) REQUIRED

Employee Title CORRECTION OFFICER

SECTION 3 - BENEFICIARY DESIGNATION

Benefits may be available to your qualifying beneficiary if you should die before you receive a distribution of your account. Your beneficiary designation is determined in one of two ways,

- 1) either by automatic succession in the following order:
a) Spouse, b) Children, c) Parents and d) Estate;

- 2) or by specific designation.

If this is your first public employment in Ohio, a Member Beneficiary Designation Form (A-3) will be sent to you so you can make your selection.

(Please turn page to complete remainder of form.)

COPY

SECTION 4 - PRIOR SERVICE INFORMATION

1. Have you previously worked in public employment in Ohio? yes no

If "yes," which employer(s)? _____

If "yes," give first date of service _____

2. Do you have any previous public service for which OPERS contributions were not submitted? yes no

If "yes," which employer(s)? _____

3. Are you currently a member or have you been a member of any of the following retirement systems?
If applicable, check either retired or refunded.

- | | | |
|--|---|---|
| a) State Teachers Retirement System (STRS) | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> retired or <input type="checkbox"/> refunded |
| b) School Employees Retirement System (SERS) | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> retired or <input type="checkbox"/> refunded |
| c) Ohio Police and Fire Pension Fund (OP&F) | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> retired or <input type="checkbox"/> refunded |
| d) State Highway Patrol Retirement System (HPRS) | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> retired or <input type="checkbox"/> refunded |
| e) Cincinnati Retirement System (CRS) | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> retired or <input type="checkbox"/> refunded |

SECTION 5 - EMPLOYEE CERTIFICATION

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



Signature of Employee
(We cannot accept a typed or printed signature)

10/16/03

Date

SECTION 6 - EMPLOYER CERTIFICATION

Employer _____

Employee Rate of Pay _____ per hour/day/week/month.
(Circle One)

Is this an elected position? Yes No

If "yes," OPERS membership is optional and requires an application. If not already submitted, the employee will need to complete an Application for Membership from an Elective Official (A-9) and submit to OPERS.

Is this a law enforcement position? Yes No

I hereby certify that _____ began employment with the above
Employee Name
employer on the start date indicated in SECTION 2 - CURRENT EMPLOYMENT INFORMATION, and the
statements set forth are true and accurate as disclosed by the records of

Signature of Certifying Officer

Title

Form W-4 (2003)

Purpose. Complete Form W-4 so that your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2003 expires February 16, 2004. See Pub. 505, Tax Withholding and Estimated Tax.

Note: You cannot claim exemption from withholding if: (a) your income exceeds \$750 and includes more than \$250 of unearned income (e.g., interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 adjust your withholding allowances based on itemized

deductions, certain credits, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. **However, you may claim fewer (or zero) allowances.**

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 919, How Do I Adjust My Tax Withholding? for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using

Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax.

Two earners/two jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others.

Nonresident alien. If you are a nonresident alien, see the **Instructions for Form 8233** before completing this Form W-4.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the dollar amount you are having withheld compares to your projected total tax for 2003. See Pub. 919, especially if your earnings exceed \$125,000 (Single) or \$175,000 (Married).

Recent name change? If your name on line 1 differs from that shown on your social security card, call 1-800-772-1213 for a new social security card.

Personal Allowances Worksheet (Keep for your records.)

- A Enter "1" for yourself if no one else can claim you as a dependent A _____
- B Enter "1" if:
 • You are single and have only one job; or
 • You are married, have only one job, and your spouse does not work; or
 • Your wages from a second job or your spouse's wages (or the total of both) are \$1,000 or less. B _____
- C Enter "1" for your spouse. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.) C _____
- D Enter number of dependents (other than your spouse or yourself) you will claim on your tax return D _____
- E Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above) E _____
- F Enter "1" if you have at least \$1,500 of child or dependent care expenses for which you plan to claim a credit F _____
 (Note: Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)
- G **Child Tax Credit** (including additional child tax credit):
 • If your total income will be between \$15,000 and \$42,000 (\$20,000 and \$65,000 if married), enter "1" for each eligible child plus 1 additional if you have three to five eligible children or 2 additional if you have six or more eligible children.
 • If your total income will be between \$42,000 and \$80,000 (\$65,000 and \$115,000 if married), enter "1" if you have one or two eligible children, "2" if you have three eligible children, "3" if you have four eligible children, or "4" if you have five or more eligible children. G _____
- H Add lines A through G and enter total here. Note: This may be different from the number of exemptions you claim on your tax return. ▶ H _____
- For accuracy, complete all worksheets that apply.
 • If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
 • If you have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$35,000, see the **Two-Earner/Two-Job Worksheet** on page 2 to avoid having too little tax withheld.
 • If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.

MANSFIELD CITY INCOME TAX

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

Mark Coy
SIGNATURE

10/16/03
DATE

CORRECTION OFFICER
POSITION

COPY

COPY

STATE OF OHIO
DEPARTMENT OF TAXATION

Form IT-4
(11-90)

EMPLOYEE'S WITHHOLDING EXEMPTION CERTIFICATE

Employment Eligibility Verification

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

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins.

Print Name: Last <u>Cooper</u>	First <u>MARK</u>	Middle Initial <u>D.</u>	Maiden Name
-----------------------------------	----------------------	-----------------------------	-------------

Address (Street Name and Number)	Appt. #	Date of Birth (month/day/year)
[Redacted]		

imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

- A citizen or national of the United States
- A Lawful Permanent Resident (Alien #)
- An alien authorized to work until / /
(Alien # or Admission #)

Employee's Signature <u>Mark D. Cooper</u>	Date (month/day/year) <u>10/16/03</u>
---	--

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature	Print Name
Address (Street Name and Number, City, State, Zip Code)	Date (month/day/year)

Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s)

List A	OR	List B	AND	List C
Document title: _____	[Redacted]			
Issuing authority: _____				
Document #: _____				
Expiration Date (if any): <u> </u> / <u> </u> / <u> </u>				
Document #: _____				
Expiration Date (if any): <u> </u> / <u> </u> / <u> </u>				

CERTIFICATION - I attest, under penalty of perjury, that the above-listed document(s) of the employee began employment on (month/day/year) 10/10/03 and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

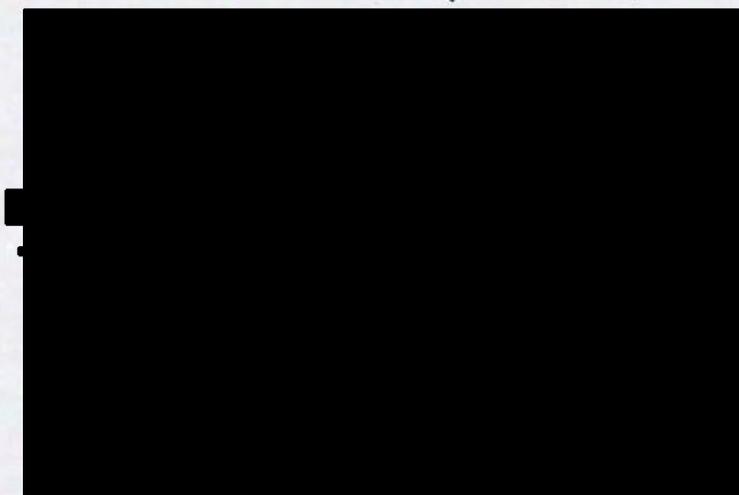
Signature of Employer or Authorized Representative <u>Patricia A. Gallaway</u>	Print Name <u>Patricia A. Gallaway</u>	Title <u>Payroll Supervisor</u>
Business or Organization Name <u>Richland Co. Sheriff Office 597 P.A.E. Mansfield, OH 44905</u>	Address (Street Name and Number, City, State, Zip Code)	Date (month/day/year) <u>10-16-03</u>

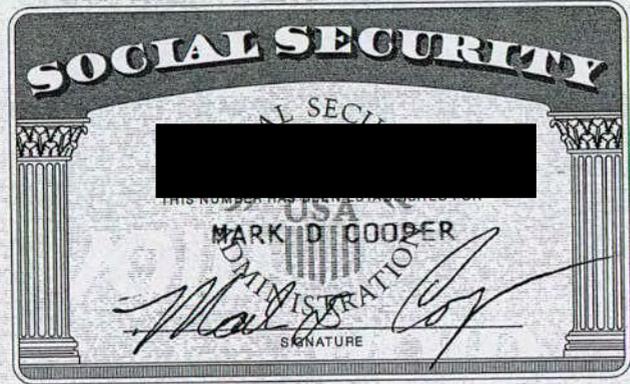
Section 3. Updating and Reverification. To be completed and signed by employer.

A. New Name (if applicable)	B. Date of rehire (month/day/year) (if applicable)
-----------------------------	--

C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.

Document Title: _____	Document #: _____	Expiration Date (if any): <u> </u> / <u> </u> / <u> </u>
I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.		
Signature of Employer or Authorized Representative		Date (month/day/year)





SCHEDULE C

Full Name: MARK Dwayne COOPER



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

QUESTIONNAIRE:

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

- 1. Have automobile insurance rejected, cancelled, refused or been in a high-risk insurance program?
NO
- 2. Been involved in any accidents either at fault or not at fault?
NO
- 3. Been arrested for any traffic related incidents?
NO
- 4. Had any traffic violations other than overtime parking?
NO

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

I understand that by giving incorrect information or by omitting information, I am falsifying my application and, therefore, subject to dismissal if hired. I further agree that the county, as my employer, may check my driving record at any time. I further agree to report to my supervisor any accidents, arrests, violations, or cancellation of personal insurance as soon as possible after they occur and prior to driving any vehicle on behalf of the County.

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

Mark Cooper
Signature

10/16/03
Date

COPY

OHIO DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS

Reg. Dist. No. 70

Primary Reg. Dist. No. 7001

CERTIFICATE OF LIVE BIRTH

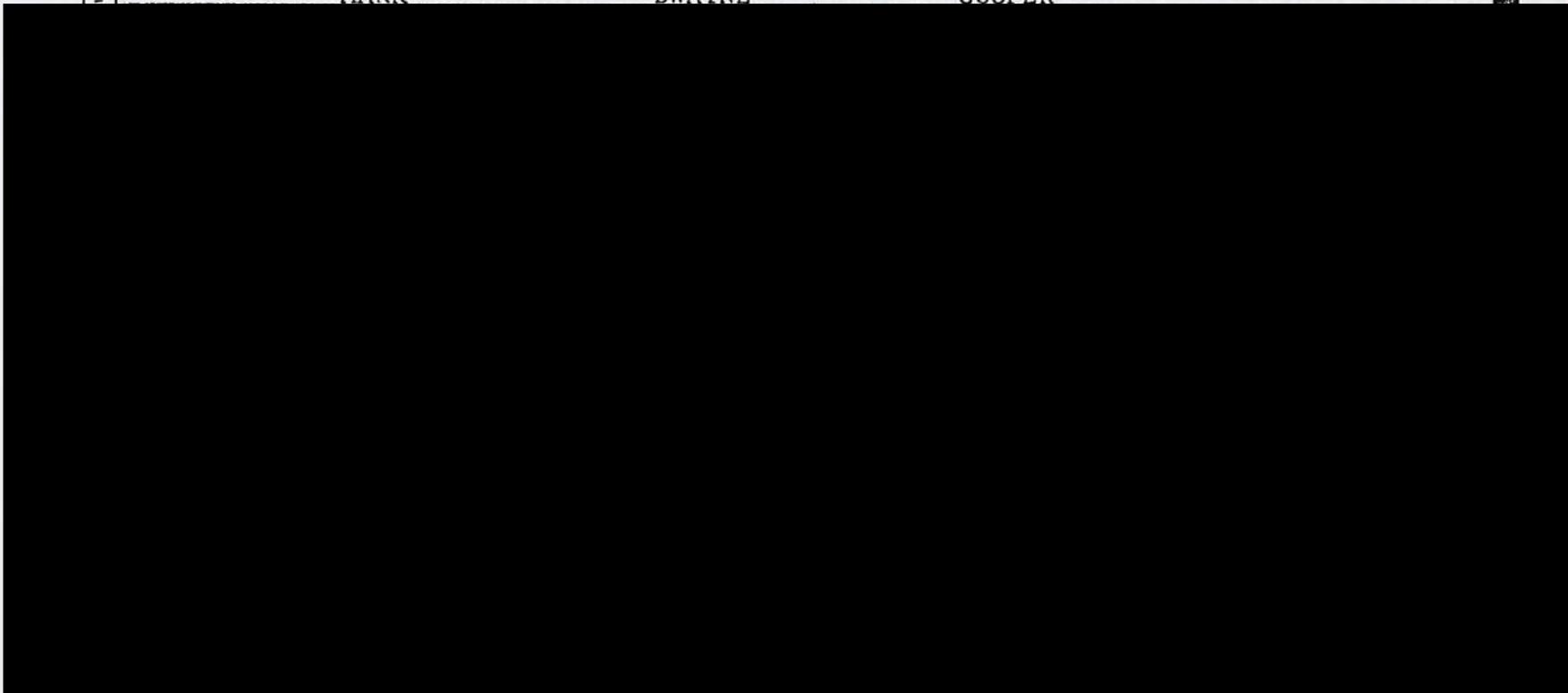
Registrar's No. 73

Birth No. 134 -

1. PLACE OF BIRTH 2. USUAL RESIDENCE OF MOTHER (Where does mother live?)



NAME (TYPE OR PRINT) MARK DWAYNE COLPER



TO: LT. ROBERT BROWN

**RE: PRE-EMPLOYMENT
EXAMINATION**

DATE: 10-03-03

PREDICATION

**THIS TRUTH VERIFICATION EXAMINATION WAS INITIATED UPON
A REQUEST BY ROBERT BROWN, LIEUTENANT WITH THE
RICHLAND COUNTY SHERIFF'S OFFICE.**

SCOPE

**THE SCOPE OF THIS TRUTH VERIFICATION EXAMINATION SHALL
BE LIMITED TO THE SUBJECTS HONESTY.**

For
Mark Cooper's
Personnel file

PRETEST INTERVIEW

THE SUBJECT ADVISED THAT HE HAD SMOKED MARIJUANA (1) TIME WHEN HE WAS 18-20 YEARS OF AGE. THE SUBJECT STATED THAT HIS YOUNGER BROTHER GAVE HIM THE MARIJUANA.

REPORT

ON OCTOBER 3, 2003, THIS AGENCY EXTENDED AN INTERVIEW TO MARK COOPER RELEVANT TO THE GENERAL HONESTY EXAMINATION. DURING THE PRETEST INTERVIEW, WE FORMULATED (23) QUESTIONS TO BE USED IN THE GENERAL SERIES TESTING SEQUENCE. I OBTAINED THE NECESSARY RELEASE FORM, CONDUCTED THE INTERVIEW, AND HEREBY SUBMIT THE RESULTS TO YOU.

POST-TEST INTERVIEW

AFTER CONDUCTING THE EXAMINATION, THE SUBJECT ADVISED THAT HE HAD ADDITIONAL INFORMATION TO ADVISE ME.

CONCLUSION

BASED UPON MY TRAINING AND EXPERIENCE, IT IS MY OPINION THAT THE SUBJECT DID RESPOND TRUTHFULLY TO THE RELEVANT QUESTIONS. DUE TO THE GRAVITY OF THE EXAMINATION, A SECOND OPINION WAS REQUESTED FROM DET. CHUCK METCALF, CERTIFIED VOICE STRESS ANALYST AND A DETECTIVE FOR THE RICHLAND COUNTY SHERIFF'S OFFICE. THE EVALUATION OF THE CHARTS WERE DONE "IN THE BLIND". THE CONCLUSIONS DRAWN BY DETECTIVE METCALF WERE THE SAME AS THOSE OF THIS EXAMINER, THAT THE SUBJECT DID RESPOND TRUTHFULLY TO THE RELEVANT QUESTIONS. I AM MAINTAINING A COPY OF THIS REPORT ON FILE AS WELL AS THE ORIGINAL SIGNED RELEASE FORM.



SGT. J.S. MCBRIDE B.A.
CERTIFIED VOICE STRESS ANALYST

CONFIDENTIAL

RICHLAND COUNTY SHERIFF'S OFFICE
JAMES A. STIERHOFF, SHERIFF
55 East Second St.
Mansfield, Ohio 44902



TRUTH VERIFICATION RELEASE FORM

I, MARK COOPER, DO HEREBY VOLUNTARILY, WITHOUT DURESS, COERCION, PROMISE, REWARD OR IMMUNITY, SUBMIT TO EXAMINATION BY THE VOICE STRESS ANALYSIS TRUTH VERIFICATION TECHNIQUE, DO HEREBY RELEASE, ABSOLVE AND FOREVER HOLD HARMLESS, THE NITV AND RICHLAND COUNTY SHERIFF'S OFFICE, IT'S SERVANTS, AGENTS, AND ANYONE ACTING IN IT'S BEHALF, FROM ANY AND ALL CLAIMS, DEMANDS, OR OTHER DAMAGES FROM ANY MATTER, ACT, OR THING ARISING OUT OF AFORESAID EXAMINATION.

Mark Cooper
SIGNATURE

10/3/03
DATE

WITNESSED;

Sgt J McBride

APPLICANT: *Mark Cooper*

DATE: *10-03-03*

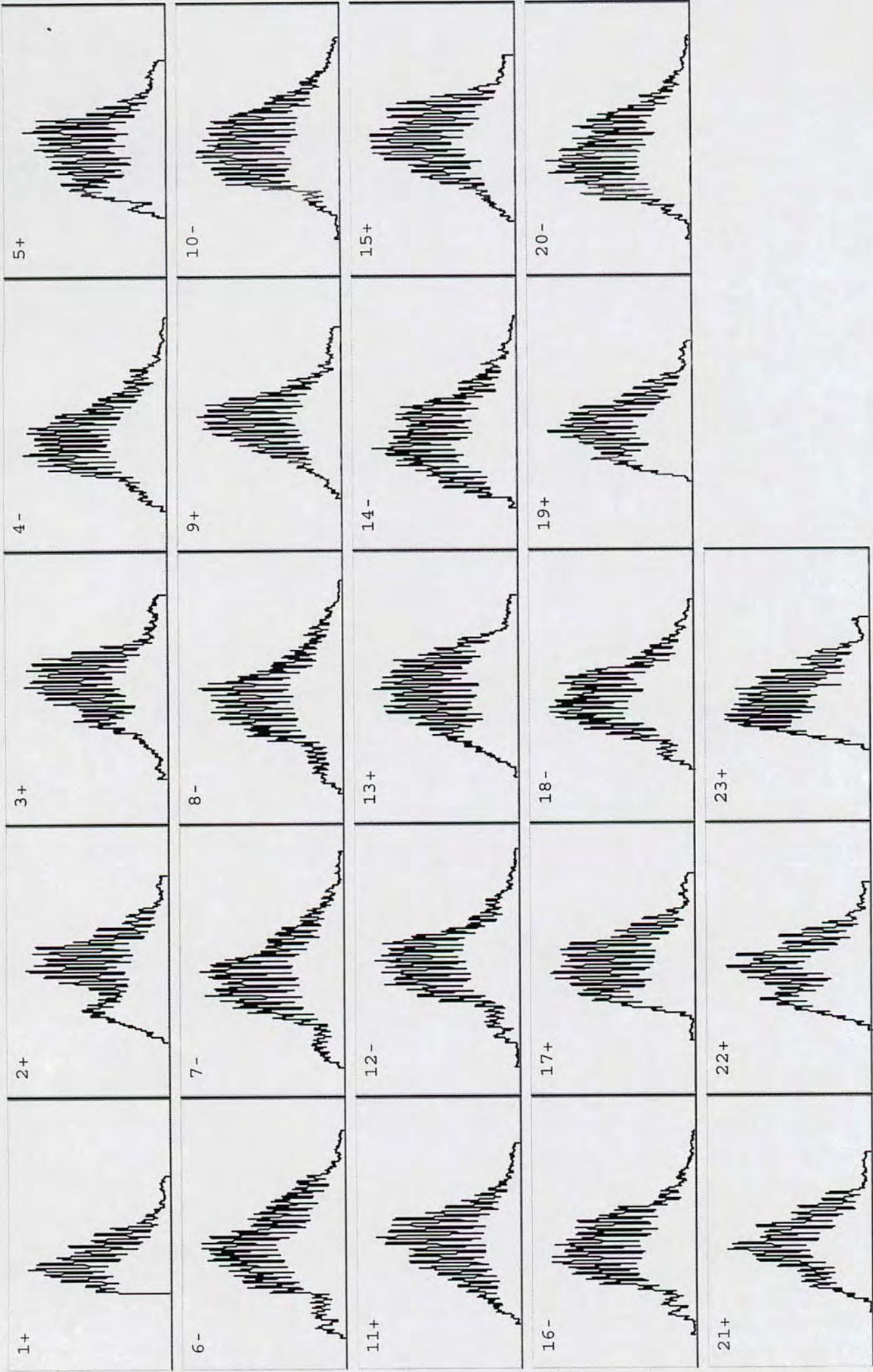
EXAMINER: *Sgt. McBride*

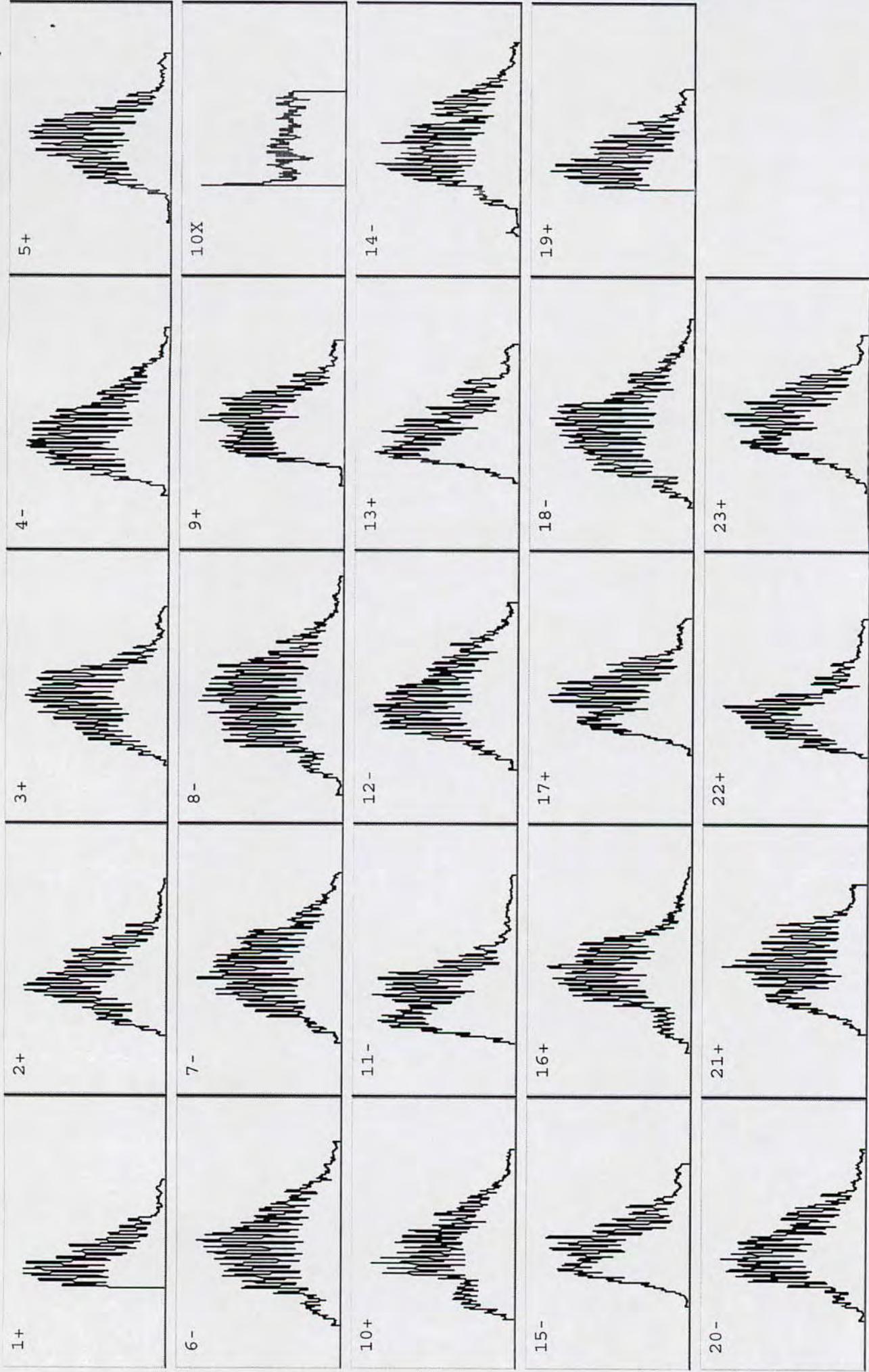
PRE-EMPLOYMENT COMPUTERIZED VOICE STRESS EXAMINATION
GENERAL HONESTY

1. IS YOUR NAME *Mark* ? Y N
2. IS THE COLOR OF THE WALL *Blue* ? (LIE) Y N
3. ARE YOU SITTING DOWN? Y N
4. HAVE YOU EVER BEEN FIRED OR ASKED TO LEAVE A JOB THAT YOU HAVE NOT DISCLOSED? Y N
5. IS TODAY *Friday* ? Y N
6. HAVE YOU TAKEN OVER \$10.00 IN CASH FROM AN EMPLOYER WITHIN THE PAST (5) YEARS? Y N
7. AM I WEARING A ^{*TIE*} ~~WATCH~~? Y N
8. HAVE YOU EVER DRIVEN OVER THE SPEED LIMIT? (*LIE*) Y N
9. AM I SITTING DOWN? Y N
10. HAVE YOU TAKEN OVER \$50.00 IN MERCHANDISE FROM EMPLOYER WITH THE PAST (5) YEARS? Y N
11. ARE YOU WEARING SHOES? Y N
12. HAVE YOU COMMITTED A CRIME WITHIN THE PAST (5) YEARS? Y N
13. ARE YOU IN THE STATE OF OHIO? Y N
14. HAVE YOU EVER RECEIVED ANY PROPERTY THAT WAS STOLEN? Y N
15. ARE YOU IN RICHLAND COUNTY? Y N

C.V.S.A. EXAMINATION CONTINUED

- BESIDES WHAT YOU HAVE TOLD ME*
16. HAVE YOU EVER USED OR ABUSED ANY TYPE OF DRUGS? Y N
17. IS THIS THE MONTH OF October? Y N
18. HAVE YOU EVER SOLD ANY DRUGS? Y N
19. ARE YOU IN THE UNITED STATES? Y N
20. HAVE YOU EVER BEEN CONVICTED OF ANY CRIME? Y N
21. ARE YOU WEARING A SHIRT? Y N
22. WERE YOU TRUTHFUL ON YOUR EMPLOYMENT APPLICATION? Y N
23. IS THIS THE YEAR 2003? Y N
- ~~24. DO YOU HAVE ANY MEDICAL PROBLEMS THAT WOULD KEEP YOU FROM PERFORMING THE JOB DUTIES OF THE POSITION THAT YOU APPLIED FOR? Y/N~~
- ~~25. IS YOUR DATE OF BIRTH _____? Y/N~~





CVSA LOG: Statistic Sheet.

	TEST# 1	TEST# 2	TEST#
1. Date:	10-03-03	10-03-03	
2. Time began	0938	0944	
3. Case No.			
4. Examiner	McBride	McBride	
5. Subject	Mark Cooper		
6. Req. by	St. Brown		
7. Outside agency			
8. Type of test			
Victim			
Suspect			
Witness			
Complainant			
Pre-employment	✓	✓	
I.A.			
9. Test medium			
Live	✓	✓	
Audio tape			
Video tape			
Chart			
10. Offense	Pre Employment		
11. Deception			
Indicated			
Not indicated	N/A	✓	
12. Verification:			
Confessed			
Other evidence			
13. Confession			
Before test			
After test			
Changed statement			
14. Cold call			
Concurred	C. Metcalf	✓	
Non-concurrence			
15. Time ended	0942	0948	
16. CVSA unit #	1	1	
17. Test format			
MZOC			
ZOC			
G. S.	✓	✓	
STRUCTURED			



Employee Maintenance

(circle one)		
ADD	Change	Delete

Name	MARK COOPER	Employee #	[REDACTED]
Address			
City, State, Zip Code			
Telephone		Has this person ever been employed by Richland County in the past? Yes or No	
Birthdate			
Social Security Number			
Marital Status:			
Sex			
Race			
Title			
Department Number	349	Account #	
Business Phone Number			
Start Date			
Rehire Date			
Termination Date			
Reason for Termination			

Salary/pay	
Rate/hour	\$ 20.0500
Alt Rate/hour	R 80 SHIFT
Wage Factor	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

EFFECTIVE 12/19/13

Comments

Steve Sheldon
Signature

12/19/13
Date



Employee Maintenance

(circle one)		
ADD	Change	Delete

Name: MARK COOPER

Address: _____

City, State, Zip Code: _____

Telephone: _____

Birthdate: _____

Social Security Number: _____

Marital Status: _____

Sex: _____

Race: _____

Title: _____

Department Number: 349

Business Phone Number: _____

Start Date: _____

Rehire Date: _____

Termination Date: _____

Reason for Termination: _____

Status: _____

Annual Salary: _____

Employee # [REDACTED]

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

Account # _____

TAXES	Code	Dep	TY	Add On
Federal				
State				
City				

Salary/pay	
Rate/hour	\$ 19.5500
Alt Rate/hour	R 80 SHIFT
Wage Factor	
Annual Hours	
Shift	
Full/Part	
STRS	
PERS	
Direct Dep. Route #	
Direct Dep. Account #	

EFFECTIVE 12/20/12

Comments

[Signature]
Signature

12/11/13
Date

CERTIFICATE OF APPOINTMENT

OF Mark Cooper

As Correction Officer

Office Sheriff
RICHLAND COUNTY

THIS IS TO CERTIFY, that the undersigned being of opinion that the business of this office requires it, has appointed Mark Cooper

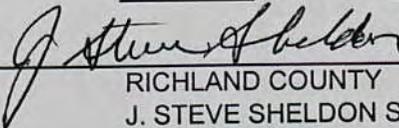
a suitable and competent person as Correction Officer

Therein, beginning on the 1st day of January 2005
and continuing until otherwise ordered.

Said Mark Cooper

as compensation the sum of \$11.0577 dollars
(\$) per hour payable bi-weekly from the County Treasury upon the warrant of the
County Auditor.

Witness my signature and seal of office, this 1st day of January 2005

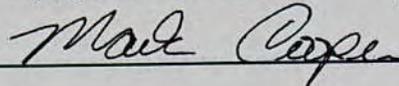

RICHLAND COUNTY
J. STEVE SHELDON SHERIFF

OATH OF OFFICE

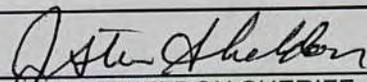
Rev Code Secs 3.22, 3-23

The State of Ohio, Richland County, ss.

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



Sworn to before me and signed in my presence, this _____ day of _____


J. STEVE SHELDON SHERIFF
Richland County

Future Changes

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Geneva Brothers
New Salary \$10.8173 / hour
Effective date 09-23-03
Signed *James A. Sheriff*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Natasha Porter
New Salary \$10.8173 / hour
Effective date 09-22-03
Signed *James A. Sheriff*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed _____

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed _____

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed _____

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper
New Salary \$10.8173 / hour
Effective date 10-16-03
Signed *James A. Sheriff*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed *J*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed _____

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed _____

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: _____
New Salary _____ / hour
Effective date _____
Signed _____



RICHLAND COUNTY SHERIFF'S OFFICE

JAMES A. STIERHOFF, SHERIFF

55 East Second St. • Mansfield, Ohio 44902

TO: Mark D. Cooper
FROM: James Stierhoff, Richland County Sheriff
SUBJECT: Probationary Status - Civilian Employees

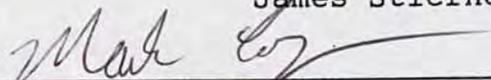
Inasmuch as you have applied for employment with the Richland County Sheriff's Office, I would like to take this opportunity to inform you of the county policy of probationary status for newly hired Civilian Employees.

It is the policy of Richland County, Ohio, that all newly hired employees, as mentioned above, do successfully complete one year probationary period before being considered a permanent county employee. Should you be accepted for employment, you will be required to fulfill this one year probationary period. If, during this period, it becomes apparent through job performance and training that you are unable or unwilling to carry out your assigned duties as a Civilian Employee, you will be notified of such and terminated from your employment with the Richland County Sheriff's Office.

This letter is not meant to scare or otherwise intimidate you. Furthermore, the job requirements and standards are such that if you are hired, you should have no problem in getting through your probationary period. It will require an honest effort on your part to learn your job and perform it to the best of your ability. If for some reason, you are unwilling or unable to measure up to that which is required of you, the Richland County Sheriff's Office does reserve the right to terminate your employment for the convenience and betterment of the county. You would, of course, receive adequate notice of any such notice of any decision to terminate.

I wish you the best of luck in your application process, and should you be hired, I am sure you and Richland County will benefit from your service at the Richland County Sheriff's Office.

James Stierhoff, Richland County Sheriff



Job Applicant

10/16/03

Date

BUSINESS CALLS 774-5678
EMERGENCY CALLS 524-2412
FAX 419-774-5646



**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper

New Salary \$17.2629 / hour

Effective date 01-01-07

Signed *Jeffrey Sheldon*



AVERY®

Shipping Labels

✓ **Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper

New Salary 13.4550 / hour

Effective date 01-01-06

Signed *Jeffrey Sheldon*



AVERY®

Shipping Labels

✓ **Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper

New Salary \$12.2500 / hour

Effective date 01-01-05

Signed *Jeffrey Sheldon*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper

New Salary 19.0473 / hour

Effective date 12-23-10

Signed *Jeffrey Sheldon*

www.avery.com
1-800-GO-AVERY



AVERY® 5163™

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper

New Salary 18.3418 / hour

Effective date 12-24-09

Signed *Jeffrey Sheldon*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: Mark Cooper

New Salary \$19.0473 / hour

Effective date 12-24-09

Signed *Jeffrey Sheldon*

**Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: MARK COOPER

New Salary \$18.4478 / hour

Effective Date 12/25/08

Signed: *Jeffrey Sheldon*

✓ **Richland Co. Sheriff Office
Appointment/Salary Change Record**

Name: MARK COOPER

New Salary 17.8671 / hour

Effective date 12/27/2007

Signed *Jeffrey Sheldon*

447-1323

FOR OFFICE USE ONLY

Possible Work Locations	Possible Positions
No RECORD!	

My Current Address



Ready For Hire
10-16-03
STARTING DATE
10-15-03
OK with Paxton

Information

Interest in our organization in employment as age, citizen of any localities, and to, discrimination Reporting Act, and to inform the representative of the

MARK

DWAYNE

Social Security No

Address

Are you legally eligible for employment in the U.S.A.? Yes No If hired, you are required to submit proof of your eligibility to work in the U.S.A.

Are you over the age of eighteen? Yes No If no, hire is subject to verification that you are of minimum legal age.

[Redacted] Employee

OFFICER

Yes No If yes, when? N/A

on what date will you be available for work? Any with 2 WEEKS NOTICE

Special skills, or qualifications which will be of special benefit in the job for 7 1/2 years EXPERIENCE IN CORRECTIONS FLORIDA. I HOLD BOTH A FLORIDA CORRECTIONS LAW ENFORCEMENT CERTIFICATION.

Loyal AND RELIABLE PERSON. I ALSO OP 5% OF MY LAW ENFORCEMENT

PHY TEST - 10/13/03

7C 53

(Turn to Next Page)

FOR OFFICE USE ONLY

Possible Work Locations Possible Positions

No RECORD!

FOR OFFICE USE ONLY

Work Location _____ Rate _____
Position _____ Date _____

Application for Employment

TO APPLICANT: We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. **This list, however, is not exhaustive of the grounds on which discrimination is prohibited.**

(PLEASE PRINT PLAINLY)

PERSONAL

Date 8/3/03

Name COOPER MARK DWAYNE



Are you legally eligible for employment in the U.S.A.? Yes No ___ If hired, you are required to submit proof of your eligibility to work in the U.S.A.

Are you over the age of eighteen? Yes No ___ If no, hire is subject to verification that you are of minimum legal age.

Position(s) applied for CORRECTION OFFICER

Were you previously employed by us? Yes ___ No If yes, when? N/A

If your application is considered favorably, on what date will you be available for work? Any with 2 WEEKS NOTICE

Are there any other job related experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? I HAVE 7 1/2 years EXPERIENCE IN CORRECTIONS IN THE STATE OF FLORIDA. I HOLD BOTH A FLORIDA CORRECTION CERTIFICATION AND A LAW ENFORCEMENT CERTIFICATION.

I AM A HONEST, LOYAL AND RELIABLE PERSON. I ALSO GRADUATED IN THE TOP 5% OF MY LAW ENFORCEMENT ACADEMY.

N/A
N/A
N/A

1 encl... 101...

(Turn to Next Page)

EMPLOYMENT HISTORY

List below present and past employment, beginning with your most recent

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
LEE COUNTY SHERIFFS OFFICE, 2501 ORTIZ AVE. FT. MYERS, FL. 33903 Telephone 1-239-477-1701	01	98	8	03	461.00	720.00	Still employed	Sgt. P. Bond
Describe the work you did: I CURRENTLY HOLD THE RANK OF CORPORAL IN THE DETENTION BUREAU. I AM RESPONSIBLE FOR THE CARE AND CUSTODY OF APPROXIMATELY 150 INMATES. I SERVE THEM BREAKFAST AND LUNCH. I CONDUCTED 3 COURTS A DAY SUPERVISED INMATES AT RECREATION AND ESCORTED THEM TO THEIR COURT APPEARANCES.								
DEPT OF CORRECTIONS (HENDRY CORRECTIONAL INSTITUTION) Telephone 1-239-657-3654 12551 WAINWRIGHT DR IMMOKALEE, FL. 33934	02	96	01	98	460.00	460.00	FOR POSITION AT LEE COUNTY	LT. MILLER
Describe the work you did: RESPONSIBLE FOR CARE AND CUSTODY AT THE PRISON WORK CAMP. I SUPERVISED APPROXIMATELY 75 INMATES. CONDUCTED RANDOM SEARCHES OF INMATES PROPERTY.								
STEELE TRUCK CENTER 2150 ROCKFILL RD FT. MYERS, FL. 33936 Telephone 1-239-334-7300	01	95	01	96	300.00	350.00	FOR POSITION AT D.O.C.	PAM KASSERMAN
Describe the work you did: WAS RESPONSIBLE FOR SHIPPING AND RECEIVING IN THEIR PARTS DEPT. DELIVERED PARTS AND CONDUCTED INVENTORIES.								
MANSFIELD Foundry Corp 50 N. MAIN ST. MANSFIELD OHIO 44906 Telephone 1-419-522-1308	06	85	11	94	200.00	320.00	TO MOVE TO FLORIDA	LINK HUFFMAN
Describe the work you did: I WAS A QUALITY CONTROL TECHNICIAN. CONDUCTED RANDOM QUALITY CHECKS ON AN ASSEMBLY LINE.								

I hereby give permission to contact the employers listed above concerning my prior work experience as indicated below.

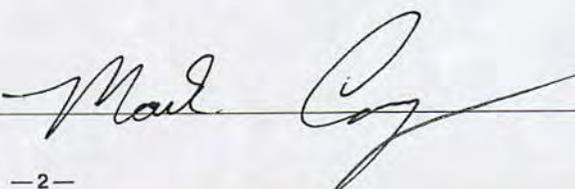
Employer I? Yes No

Employer II? Yes No

Employer III? Yes No

Employer IV? Yes No

Signed _____



8/25/03

Spoke to Lee Co. Sheriff

Verified Employed & Dates were correct.
No other Information was given.

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed				Did You Graduate?	List Diploma or Degree		
			5	6	7	8				
Elementary	UNION ELEMENTARY AND CRESTVIEW MIDDLE SCHOOL ST. RT. 96 Richland, Ohio	X				8	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	X		
	High		CRESTVIEW HIGH SCHOOL ST. RT. 96 Richland, Ohio				4		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	High School Diploma
			College	OHIO STATE UNIVERSITY UNIVERSITY DR. MANASSAS Ohio	1					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Other (Specify)	SOUTHWEST FLORIDA CRIMINAL JUSTICE ACADEMY 3800 MICHIGAN AVE. FT. MYERS, FL.					1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CERTIFICATION AS CORRECTIONS AND LAW ENFORCEMENT OFFICER		

PERSONAL REFERENCES (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number
WILLIAM CROSS	17400 WALLE RD. N. FT. MYERS, FL 33917	[REDACTED]
CHRISTIN CROSS	17400 WALLE RD. N. FT. MYERS, FL 33917	
JOSEPH HART	7523 MAYLAND ST. NORTH PORT, FL 34287	

May we telephone you to follow up on this application at home? Yes No

If yes, what is the best time to call? Any

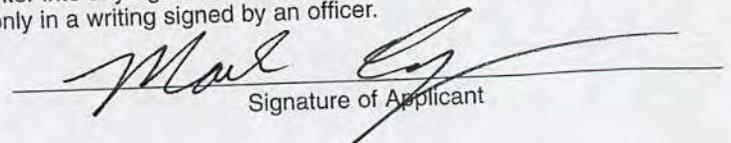
May we telephone you to follow up on this application at work? Yes No

If yes, what is the best time to call? N/A

What is your business telephone number? N/A

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.


 Signature of Applicant

APPLICANT - Do not write on this page

FOR INTERVIEWER'S USE

INTERVIEWER	DATE	COMMENTS

FOR TEST ADMINISTRATOR'S USE

TESTS ADMINISTERED	DATE	RAW SCORE	RATING	COMMENTS AND INTERPRETATION

REFERENCE CHECK

*Position Number	RESULTS OF REFERENCE CHECK	*Position Number	RESULTS OF REFERENCE CHECK
I		IV	
II			
III			

*See Page 2

This "Application for Employment" is prepared for general use throughout the United States. Employment laws and legal requirements change frequently, however. V.W. EIMICKE ASSOCIATES, INC. assumes no responsibility for an employer's use of this form or any decision made in connection with the form.



RICHLAND COUNTY SHERIFF'S OFFICE

APPENDIX 6

CONDITIONAL OFFER OF PROBATIONARY EMPLOYMENT

Dear Applicant:

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

You have successfully completed the initial phases of the employment process. As a condition of employment, you must successfully meet the minimum employment standards for a Law Enforcement/Corrections Officer and/or required training entrance as mandated by state law. You must also successfully complete a Psychological Interview (Test).

Following successful completion and review of the aforementioned inquiries, you will be informed by letter of your employment status.

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

ACKNOWLEDGEMENT AND ACCEPTANCE OF OFFER

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

Mad Cox
Applicant

10/13/03
Date

R.W. Johnson
Witness

October 13, 2003
Date

Richland County Sheriff's Office
Oral Interview Questions

Candidates Name: MARK COOPER

Assessors Name: BROWN

Rating a Candidate:

Poor: 1 Average: 2 Good: 3 Excellent: 4 Scores

1. Tell us about yourself. Looking for past work experience, Goals, Hobbies, Family life, Etc? _____

Notes: MARRIED 8 YRS JAIL
2 Kids 11 & 12, Fish

2. When dealing with an irate or un-cooperative person, What approach Do you think would work best for you in solving the situation? _____

Notes: TALK DOWN, Seperate FROM Arresting, offer

3. What job has been most satisfying for you? What job has been The most frustrating job for you? Ask for reasons why! _____

Notes: CORRECTIONS - CAREER
Both

4. Can you name some job duties and responsibilities of a corrections officer? _____

Notes: CARE & Custody of INMATES

5. What traits would you look for if you were hiring a corrections Officer?
(Look for answers such as Loyalty, Honesty, physical fitness, etc) _____

Notes: Common Sense, Level HEAD

6. If you saw a co-worker doing something dishonest or against policy,
How would you handle it? _____

Notes: Depending on Severity

7. What sort of work ethics would you have to offer if hired? _____

Notes: Experience, Honesty.

8. Can you tell us about a time when you made a bad decision
And how you handled it? _____

Notes: Heart Attack w/ Wife
Called 911 instead

9. What would be the single most important reasons to hire
You over the other candidates? _____

Notes: (36) Experience, AGE

10. Explain the difference between a subpoena and a warrant? _____

Notes:

Richland County Sheriff's Office
Oral Interview Questions

36

Candidates Name: Mark Cooper

Assessors Name: Welsh

Rating a Candidate:

Poor: 1 Average: 2 Good: 3 **Excellent: 4** Scores

1. Tell us about yourself. Looking for past work experience, Goals, Hobbies, Family life, Etc? _____

Notes: Married - 2 kids - 11/12
Currently painting houses

2. When dealing with an irate or un-cooperative person, What approach Do you think would work best for you in solving the situation? _____

Notes: Talk him down. Separate from arresting officer.

3. What job has been most satisfying for you? What job has been The most frustrating job for you? Ask for reasons why! _____

Notes: Corrections - Career
~~Found~~ Corrections - frustrating

4. Can you name some job duties and responsibilities of a corrections officer? _____

Notes: Care & Custody of inmates
Safety of public

5. What traits would you look for if you were hiring a corrections Officer?
(Look for answers such as Loyalty, Honesty, physical fitness, etc)

Notes: *Common Sense / Honest / Level Headed*

6. If you saw a co-worker doing something dishonest or against policy,
How would you handle it?

Notes: *Minor - Handle*
Major - Report

7. What sort of work ethics would you have to offer if hired?

Notes: *experience / intelligent / honest*

8. Can you tell us about a time when you made a bad decision
And how you handled it?

Notes: *Wife Heart Attack - How handled*

9. What would be the single most important reasons to hire
You over the other candidates?

Notes: *Experience & Age*

10. Explain the difference between a subpoena and a warrant?

Notes: *OK*
Can be arrested on subpoena.

Richland County Sheriff's Office
Oral Interview Questions

Candidates Name: MARK COOPER

Assessors Name: Lt. W^M. FRANKLIN

Rating a Candidate:

Poor: 1 Average: 2 Good: 3 Excellent: 4

Scores

1. Tell us about yourself. Looking for past work experience, Goals, Hobbies, Family life, Etc? _____

Notes: *MARRIED - 2 Kids
Fishing*

2. When dealing with an irate or un-cooperative person, What approach _____
Do you think would work best for you in solving the situation?

Notes: *Separate FROM Arresting officer
try to CALM DOWN.*

3. What job has been most satisfying for you? What job has been _____
The most frustrating job for you? Ask for reasons why!

Notes: *Corrections -
Corrections -*

4. Can you name some job duties and responsibilities of a _____
corrections officer?

Notes: *Treat them AS you want to be
treated,*

5. What traits would you look for if you were hiring a corrections Officer?
(Look for answers such as Loyalty, Honesty, physical fitness, etc)

Notes: Honesty,

6. If you saw a co-worker doing something dishonest or against policy,
How would you handle it?

Notes: if minor talk to him
if major Report to Supervisor

7. What sort of work ethics would you have to offer if hired?

Notes: Honest, intelligent

8. Can you tell us about a time when you made a bad decision
And how you handled it?

Notes: Wife had a heart attack
DID NOT CALL 911

9. What would be the single most important reasons to hire
You over the other candidates?

Notes: Experience, age
life experience

10. Explain the difference between a subpoena and a warrant?

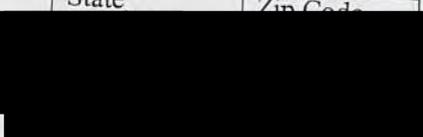
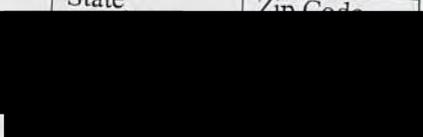
Notes: good answer

AFFIRMATIVE ACTION DATA RECORD

As an Equal Opportunity Employer and a recipient of Federal Funding, we comply with government regulations, including Affirmative Action responsibilities where they apply. Employees are treated during the hiring process and employment without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of this Data Record is **optional**. If you choose to volunteer the requested information please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or personnel file. Please note: **YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.**

(PLEASE PRINT)

Last Name <i>Cooper</i>	First Name <i>MARK</i>	Middle Name <i>DWAYNE</i>
		State 
		Zip Code 

Completion of the following is strictly optional. *Your cooperation is voluntary.*

Current Job: <i>LAW ENFORCEMENT</i>	Birthdate: <i>1/17/67</i>
Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Black <input type="checkbox"/> Other
Ethnic Origin: <input checked="" type="checkbox"/> White <input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian/Pacific Islander
<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Vietnam Era Veteran <input type="checkbox"/> Disabled Individual
Check one if applicable:	<input type="checkbox"/> Disabled Veteran

FEDERAL SOURCE: (i.e., Advertisement, Media, Relative, Friend, Employment Agency, Employee of Sheriff's Office, Walk-in, Other)

Signature *[Handwritten Signature]* Date *8/3/03*

◆ OFFICE USE ONLY ◆

Position(s) Applied For Is Open:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____
Position(s) Considered For:	_____	
Position:	_____	
Date:	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

APPENDIX 2

RICHLAND COUNTY SHERIFF'S OFFICE

APPLICANT RELEASE FORM

I, MARK Cooper, presently residing at [redacted] have applied for employment with the Richland County Sheriff's Office. I am fully aware that a representative of the Sheriff's Office will be conducting a thorough investigation of my background to assist in determining my suitability for this employment. I realize that, in conducting this investigation, Officers will be making inquiries of officials and record offices at schools which I have attended, physicians and/or other persons who may have examined or treated me for any physical or other type of illness or injury, police or courts which whom I may have an arrest or conviction record and/or financial standing/present and previous employers, military records, and any other persons who may be able to provide information about me which the Sheriff's Office desires.

I hereby give my permission and waive all provisions of law forbidding any physician or other person who has attended me, or any other school official, court, police agency, credit bureau, employer, United States Armed Forces, firm or person, from disclosing any knowledge or information they have concerning me which is requested or desired by the Sheriff's Office. I further consent that the Sheriff or his representative be provided with a copy of any such record concerning me which they desire.

I recognize the right of the Richland County Sheriff's Office to treat, at its discretion, certain sources as confidential, at its right to withhold them for me or my agent the names of such confidential sources and information obtained therefrom.

DATE 8/3/03

[redacted]

NAME OF APPLICANT MARK Cooper

SIGNATURE OF APPLICANT Mark Cooper

Sworn to and subscribed before me this 06 Day of August 19 2003

My commission expires 12/20/04

Notary Signature Shelby N Vick

[redacted]

