

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



2024-3052 Officer Involved Critical Incident - 10300 block Silvercreek Road, Doylestown, Ohio 44230, Medina County

Investigative Activity:	Review of MCSO training records	personnel file and
Involves:	(S)	
Activity Date:	10/14/2024	
Activity Location:	BCI Richfield	
Authoring Agent:	SA Jon Lieber #50	

Narrative:

On Monday, October 14, 2024, Ohio Bureau of Criminal Investigation (BCI) Special Agent (SA) Jon Lieber (Lieber) received the personnel file and training records for from the Medina County Sheriff's Office (MCSO). SA Lieber reviewed the personnel file and training records and noted the following:

Personnel file

personnel file consisted of pre-employment documents, payroll records, training records, departmental commendations, and miscellaneous documents.

No discipline was located within the personnel file.

Range Qualification Records

On July 17, 2024, completed firearms qualification with a Glock model 45, serial # This was the firearm utilized during the October 5, 2024, incident.

Ohio Peace Officer Training Academy/Commission Records

In addition to the records received from the MCSO, SA Lieber also obtained the Ohio Peace Officer Training Commission (OPOTC) and Ohio Peace Officer Training Academy (OPOTA) records pertaining to **Example 1**. The OPOTA/OPOTC records indicated the following:

1. Basic Training

Enforcement Training Academy academy at the Medina County Law took the state certification exam on

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2024-3052



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2. Advanced Training

completed numerous advanced training courses:

- Advanced Traffic Stops (07/24/2024)
- Responding to Mental Health Issues (05/28/2024)
- Crisis Mitigation An Ohio Model (De-Escalation) (05/28/2024)
- Firearms Practical Manipulation Skills (05/17/2024)
- Arrest, Search, and Seizure 2023 (06/03/2023)
- Effective Communication and Safe Interaction with Persons in Crisis (11/28/2022)
- Mental Health Response (10/26/2022)
- Concealed Carry Changes (09/17/2022)
- Use of Deadly Force and Legal Guidelines (08/31/2022)
- Objective Reasonableness (08/26/2022)
- Critical Thinking in Use of Force Situations (08/25/2022)
- BCI Lethal Use of Force and OIS Investigations (08/21/2022)
- Crisis Intervention (07/29/2022)

It should be noted that the above-listed courses are not a complete list. Only those courses deemed to be the most relevant were noted above. In some cases, the date on the training certificate is one day before the date listed in the OPOTA records for a particular course.

3. Employment History

was appointed full-time by the Medina County Sheriff's Office on

4. Current Peace Officer Status

Based on the records received, it is noted that **Example 1** was a duly certified and sworn Ohio Peace Officer at the time of this incident.

The training documents received from the MCSO and OPOTA/OPOTC were attached to this report. Please refer to the attachments for further details.

References:

None

Attachments:

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Officer Involved Critical Incident - 10300 block Silvercreek Road, Doylestown, Ohio 44230, Medina County

- 1. 2024-10-14
- 2. 2024-10-14
- 3. 2024-10-14
- 4. 2024-10-14

firearms records training records personnel file OPOTA records

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Ohio Peace Officer Training Academy Office: 740-845-2700

COPY

Officer:	Date: 07/13/21
Agency: MCSO	Range: SEVILLE

	atic Pistol Man	nufacturer:	Instructor Name/R	lequal #:
Model:	Caliber:	Seria Numi	Score: 23/05	Instructor:

Semi-auton	natic Pistol Ma	nufacturer:	Instructor Name/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Back-up/Sub Caliber Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Revolver Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Shotgun Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Rifle/Carbine	Manufactur	er:	Instructor Name	e/Requal #:
Model: Man15	Caliber:	Serial Number:	Score:	Instructor:

SMG Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

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	RAN	GE PROF	CIENCY	RECORD: I	PATROL R	IFLE/CARBINE
Name						MCSO
Weapon	make: _	SAW	Mo	del: M4	ρ	Serial #
Hits in th	ne preferre	ed area (P	A) count a	as a plus on	e (+1).	
Hits in th	ne non-pre	eferred are	a (NPA) a	and inside o	f the silhou	ette outline are zero (0).
Rounds	not fired (NF) are ze	ero (0).			
Rounds ime limit	outside of t (OT), or	the silhou any extra	ette outlin rounds fire	e (MISS), c ed (ERF) an	ff the targe e minus 1 (·	t (MISS), fired over the -1).
Stage 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
Stage 2	3 hits in	the head	circle or hi	p circle		
	PA: 3	_NPA:	NF:	MISS:	OT:	ERF: Head Miss:_
Stage 3	2 hits in	the prefer	red area, o	one hit in th	e head circ	le or hip circle
	PA: 3	_NPA:	NF:	MISS:	OT:	ERF: Head Miss:
Stage 4	PA: 2	_NPA:	NF:	MISS:	OT:	ERF:
stage 5	PA:	NPA:	NF:	MISS:	OT:	ERF:
						ERF:
tage 7	PA: 3	_NPA:	NF:	_MISS: _	OT:	ERF:
ubtotals				MISS: _	OT:	_ ERF: Head Miss:
otal:	70 (F	ASSING	S A MININ	MUM OF 16)	
ate teste	ed: Z	13/2	/ P	assed:		Failed:
ested by		malo	> R	EQ#: 07	093	Exp: 12/8/2/

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	RANGE PROFICIENCY REC	CORD: SEMI-A	UTO PISTOL
Name:			Mesd
Weapon ma	ake: Glock Model: _	21	_ Serial #:
Hits in the p	preferred area (PA) count as a plu	us one (+1).	
Hits in the r	non-preferred area (NPA) and ins	ide of the silho	uette outline are zero (0).
Rounds not	t fired (NF) are zero (0).		
	tside of the silhouette outline (MIS DT), or any extra rounds fired (ER		the second se
Stage 1	PA: <u>3</u> NPA:NF:MI	SS: OT:	_ ERF:
Stage 2	2 hits in the preferred area, on	e hit in the head	d circle or hip circle
	PA: <u>3</u> NPA: NF: MI	SS:OT:	_ ERF: Head Miss:
Stage 3A	PA: <u>4</u> NPA: NF: MI	SS:OT:	_ERF:
Stage 3B	PA: <u>4</u> NPA: NF: MI	SS: OT:	_ERF:
Stage 4	PA: <u>5</u> NPA: <u>NF</u> : MI	SS: OT:	_ ERF:
Stage 5	PA: <u>3</u> NPA:NF:MI	SS: OT:	_ ERF:
Stage 6	PA: NPA: NF: MI	SS:OT:	_ERF:
Subtotals:	MI	SS: OT:	ERF:Head Miss:
Total: 2	3 (PASSING IS A MINIMUM	OF 20)	~
Date tested		d:	Failed:
Tested by:	Imato REQ#:	07093	_ Exp: 12/8/21

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	RANGE PROFICIENCY R	ECORD: SE	MI-AUTO PISTOL
Name:		Ager	Medina County Sheriff Office
Weapon ma	ake: <u>Calock</u> Model:	6745	Serial #:
Hits in the p	preferred area (PA) count as a	plus one (+1).
Hits in the r	on-preferred area (NPA) and i	nside of the	silhouette outline are zero (0).
Rounds not	fired (NF) are zero (0).		
	side of the silhouette outline (N DT), or any extra rounds fired (N		•
Stage 1	PA: <u>3</u> NPA: NF: N	MISS: 0	T: ERF:
Stage 2	2 hits in the preferred area, o	one hit in the	head circle or hip circle
	PA: 3_NPA:NF:N	MISS: 0	T: ERF: Head Miss:
Stage 3A	PA: <u>4</u> NPA: NF: N	MISS:O	T: ERF:
Stage 3B	PA: <u></u> NPA: NF: I	MISS:O	T: ERF:
Stage 4	PA: 6 NPA: NF: I	MISS:O	T: ERF:
Stage 5	PA: <u>3</u> NPA: NF: I	MISS:O	T: ERF:
Stage 6	PA: Z NPA: NF: I	MISS:O	T: ERF:
Subtotals:	25	MISS:O	T: ERF: Head Miss:
Total: 25	(PASSING IS A MINIMU	M OF 20)	
Date tested	: 11/11/2022 Pass	sed:	Failed:
Tested by:	J.Salsgilar REC	H. ASICO	- octala:



Name:				/	Agency:	Medina County	Sheriff Office
Weapon	make: _	aniei Dete	nse Mo	del: MY		Serial #:	
Hits in th	e preferre	ed area (P/	A) count a	s a plus one	(+1).		e La
Hits in th	e non-pre	eferred are	a (NPA) a	nd inside of	the silho	ouette outline	are zero (0).
Rounds	not fired (NF) are ze	ro (0).				
				e (MISS), of ed (ERF) are		get (MISS), fir (-1).	ed over the
Stage 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:	_
Stage 2	3 hits in	the head	circle or hi	ip circle			
	PA: 3	_NPA:	NF:	MISS:	OT:	ERF:	_ Head Miss:
Stage 3	2 hits in	the prefer	red area,	one hit in the	head c	ircle or hip cir	cle
	PA: 3	_NPA:	NF:	MISS:	OT;	ERF:	_ Head Miss:
Stage 4	PA: 2	_NPA:	NF:	MISS:	OT:	ERF:	
Stage 5	PA: [_NPA:	NF:	MISS:	OT:	ERF:	_
Stage 6	PA: 5	_NPA:	NF:	MISS:	OT:	ERF:	_
Stage 7	PA: 3	_NPA:	NF:	MISS:	OT:	ERF:	_
Subtotal	s: 20	2		MISS:	OT:	ERF:	Head Miss:
Total: _	20 (PASSING	IS A MINI	MUM OF 16)		
	4.1	1 100	7		.)		
Date tes	ted: 11	11/202	<u> </u>	Passed:	~	Failed:	
Tested k	N. 5.5	alsaiv	5	REO# 08	659	Exp:	5/27/750

Patrol Rifle Carbine Qualification Course Effective: April 1, 2019





Ohio Peace Officer Training Academy Office: 740-845-2700

Date: 9-30-21
Range: Wadsworth

Semi-automatic Pistol Manufacturer:			Instructor Name/Regual #: McCEUNT 03252		
Model: 6745	Caliber: 9 m M	Serial Number:	Score: 23	125	Instructor: MeCaNT

Semi-automatic Pistol Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Back-up/Sub Caliber Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Revolver Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Shotgun Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

Rifle/Carbine Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

SMG Manufacturer:		Instructor Name/Requal #:		
Model:	Caliber:	Serial Number:	Score:	Instructor:

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Name:				Agency:	MCS	0
Weapon m	ake: <u>(alock</u>	Mode	1: <u>G4</u>	5	Serial	#: _
Hits in the	preferred area (PA)	count as	a plus one	e (+1).		
Hits in the i	non-preferred area	(NPA) and	d inside of	the silhe	ouette outlin	ne are zero (0).
Rounds no	t fired (NF) are zero	0 (0).				
Rounds out time limit (C	tside of the silhouet OT), or any extra ro	te outline unds fired	(MISS), o (ERF) are	ff the targ e minus 1	get (MISS), I (-1).	fired over the
Stage 1	PA: 3 NPA:	NF:	MISS:	_ OT: _	ERF:	
Stage 2	2 hits in the prefe	erred area.	, one hit ir	the hea	d circle or l	nip circle
	PA: 2 NPA:	_NF:	MISS: /	_ OT:	_ERF:	_Head Miss: /
Stage 3A	PA: 4 NPA:	_NF:	MISS:	_ OT:	_ERF:	
Stage 3B	PA: 4_ NPA:	NF:	MISS:	_ OT: _	_ERF:	_
Stage 4	PA: 6 NPA:	NF:	MISS:	_ OT:	_ERF:	_
Stage 5	PA: 3 NPA:	NF:	MISS:	_OT: _	_ERF:	-
Stage 6	PA: ZNPA:	_NF:	MISS:	_OT: _	_ERF;	_
Subtotals:	24		MISS: _/	OT:	ERF:	Head Miss: /
Total: 22	PASSING IS	A MINIMU	JM OF 20))		
)ate tested	= 9/30/21	Pas	ssed: L	/	Faile	d-

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	RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL
Name: _	Agency: MCS O
Veapon m	ake: Model: Serial #
lits in the	preferred area (PA) count as a plus one (+1).
lits in the	non-preferred area (NPA) and inside of the silhouette outline are zero (0).
ounds no	t fired (NF) are zero (0).
	tside of the silhouette outline (MISS), off the target (MISS), fired over the DT), or any extra rounds fired (ERF) are minus 1 (-1).
tage 1	PA: 3_NPA:NF:MISS:OT:ERF:
age 2	2 hits in the preferred area, one hit in the head circle or hip circle
	PA: <u></u>
tage 3A	PA: 4_NPA:NF:MISS:OT:ERF:
tage 3B	PA: 3 NPA: NF:MISS:OT:ERF:
tage 4	PA: NPA: NF: MISS: OT: ERF:
tage 5	PA: <u>3</u> NPA: NF: MISS: OT: ERF:
age 6	PA:NPA:NF:MISS:OT:ERF:
ubtotals:	MISS:OT:ERF: Head Miss:
otal: 24	(PASSING IS A MINIMUM OF 20)
ate tested	: <u>93073</u> Passed: Failed:
sted by:	KING REQ#: 09089 Exp: 9/29/2

Name:		Agency:	MCSO
Weapon	make: DAV. DEFENSE Mode	al: AR-15	Serial #:
Hits in th	e preferred area (PA) count as	a plus one (+1).	
Hits in th	e non-preferred area (NPA) an	d inside of the silhou	ette outline are zero (0).
Rounds	not fired (NF) are zero (0).		
	outside of the silhouette outline t (OT), or any extra rounds fired		
Stage 1	PA: <u>3</u> NPA:NF:	_MISS:OT:	ERF:
Stage 2	3 hits in the head circle or hip	circle	
	PA: <u>3</u> NPA: NF:	_MISS:OT:	ERF: Head Miss:
Stage 3	2 hits in the preferred area, or	ne hit in the head circ	cle or hip circle
	PA: <u>3</u> NPA:NF:	_MISS:OT:	ERF: Head Miss:
Stage 4	PA: 2 NPA:NF:	_MISS:OT:	ERF:
Stage 5	PA:NPA:NF:	_MISS:OT:	ERF:
Stage 6	PA: <u>5</u> NPA:NF:	_MISS:OT:	ERF:
Stage 7	PA: <u>3</u> NPA:NF:	_MISS:OT:	ERF:
Subtotal	s:	MISS: OT:	ERF: Head Miss:
Total:	C (PASSING IS A MININ	1UM OF 16)	
Date tes	ted: 9/30/23 Pa	assed:	Failed:
Tested t	NY: J.Salguer R	EQ#: 08659	Exp: 65/27/20

Patrol Rifle/Carbine Qualification Course Effective: April 1, 2019





Ohio Peace Officer Training Academy Office: 740-845-2700

Officer	Date: 7-10-211
Agency:	Range:
niso	M40

Semi-autor	natic Pistol Ma	nufacturer:	J. S. Isquer	e/Requal #: 08LS9
Model:	Caliber:	Serial«	Score:	Instructor:

Semi-autor	natic Pistol Ma	nufacturer:	Instructor Nan	ne/Requal #:
Model:	Caliber:	Serial Number:	Score:	Instructor:

Back-up/Su	ub Caliber Man	ufacturer:	Instructor Nan	ne/Requal #:
Model:	Caliber:	Serial Number:	Score:	Instructor:

Revolver N	fanufacturer:		Instructor Name/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Shotgun M	anufacturer:		Instructor Name/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

	Defense	er:	Instructor Nar I Selsa	ne/Requal #: 68659
Model:	Caliber:	Serial Number:	Score:	Instructor: J.Scisg.W

SMG Man	SMG Manufacturer:		Instructor Name/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

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RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

Name:		1		Agency:	MLSO
Weapon ma	ke: <u>Glock</u>	Model	645	_	Serial #
Hits in the p	referred area (PA) c	ount as a	plus one	e (+1).	
Hits in the n	on-preferred area (N	IPA) and	inside of	the silhou	uette outline are zero (0).
Rounds not	fired (NF) are zero (0).			
	side of the silhouette T), or any extra rour				et (MISS), fired over the (-1).
Stage 1	PA: <u>3</u> NPA:	NF:	MISS:	_OT:	_ERF:
Stage 2	2 hits in the prefer	red area,	one hit in	h the head	circle or hip circle
	PA: 3_NPA:	NF:	MISS:	_OT:	_ERF: Head Miss:
Stage 3A	PA: <u>4</u> NPA:	NF:	MISS:	_ OT:	_ERF:
Stage 3B	PA: <u>4</u> NPA:	NF:	MISS:	OT:	_ERF:
Stage 4	PA: 6 NPA:	NF:	MISS: _	OT:	_ERF:
Stage 5	PA: 3 NPA:	NF:	MISS:	_OT:	_ERF:
Stage 6	PA: 2-NPA:	NF:	MISS:	OT:	_ERF:
Subtotals:	25		MISS: _	OT:	ERF: Head Miss:
Total: 35	(PASSING IS A		JM OF 2	0) /	
Date tested	7.19-24	Pag	sod L	/	Failed:

Tested by: J. Salsg. Ver REQ#: 08659 Exp:

Exp: 5/27/2027

OHIO PEACE OFFICER TRAINING ACADEMY

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RANGE PROFICIENCY RECORD: PATROL RIFLE/CARBINE

Name:				Α	gency: /	MUSO	
Weapon	make: De	white Defe	SC Moo	tel: DDml	117	Serial #:	
Hits in th	e preferre	d area (PA) count as	s a plus one	(+1).		
Hits in th	e non-prei	ferred area	a (NPA) a	nd inside of t	the silhoue	ette outline a	are zero (0).
Rounds	not fired (N	NF) are ze	ro (0).				
				e (MISS), off d (ERF) are			ed over the
Stage 1	PA: 3	NPA:	NF:	_MISS:	OT:	ERF:	-)
Stage 2	3 hits in	the head o	ircle or hi	p circle			
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:	_ Head Miss:
Stage 3	2 hits in	the prefer	ed area, o	one hit in the	head circ	le or hip cir	cle
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:	_ Head Miss:
Stage 4	PA: 2	NPA:	NF:	MISS:	OT:	ERF:	_
Stage 5	PA:	NPA:	NF:	MISS:	OT:	ERF:	_
Stage 6	PA: 4		NF:	MISS:	OT:	ERF:	-
Stage 7	PA: 7		NF:	MISS:	OT:	ERF:	-
Subtotal	s: 18			MISS:	OT:	ERF:	_Head Miss:_
Total:	18° (F	PASSING	IS A MINI	MUM OF 16)		
Date tes	ited: <u> </u>	18 24	/ i	Passed: _L	/	_ Failed:	
	y: IS	150 ver		REQ#: 08	159	_ Exp: _	5/27/20

OHIO PEACE OFFICER TRAINING ACADEMY

Patrol Rifle/Carbine Qualification Course Effective: April 1, 2019





Ohio Peace Officer Training Academy Office: 740-845-2700

Officer: To las 6-	Date: 7 K-14
Agency:	Range:
MICO	Miso

Semi-autor	natic Pistol Ma	nufacturer:	Instructor Name	Requal #:	3rd etter
Model:	Caliber:	Serial Numb	Score: ZZ	Instructor:	

Semi-automatic Pistol Manufacturer:		Instructor Nar	ne/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Back-up/Sub Caliber Manufacturer:		Instructor Nar	ne/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Revolver Manufacturer:		Instructor Nar	ne/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Shotgun Manufacturer:		Instructor Nan	ne/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Rifle/Carbine Manufacturer:		Instructor Nar	ne/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

SMG Manufacturer:		Instructor Nar	ne/Requal #:	
Model:	Caliber:	Serial Number:	Score:	Instructor:

Eff. 1/2019

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CERTIFICATE OF COMPLETION



Training curriculum developed by Blue to Gold Law Enforcement Training

This is to certify that

Has attended 8 hours of training on July 24, 2024 in

Advanced Traffic Stops

24CPT616



Anthony Bandiero, JD President, Senior Legal Instructor



CERTIFICATE OF COMPLETION



Training curriculum developed by Blue to Gold Law Enforcement Training

This is to certify that

Has attended 8 hours of training on July 23, 2024 in

Advanced Search & Seizure

24CPT615



Anthony Bandiero, JD President, Senior Legal Instructor



TOPIC: Legal Updates & Marcy Law 24CPT2024VR /hr			
CPT #: 24CPT2024LU	5	CPT Credit hr(s): 2	
DATE: 06/11/2024	Time: 3:00pm-6:00pm	Instructor(s): Pros. Thompson, Asst. Pros. McNamara	

Name Printed	Signature
1 KPIS CONWILL	105
2 Jm HARADAN	300 135
-3 Elizabeth Bater	50 7 161,
- 4 Eliza Postlethwait	Can Lacunter # 133
5 Samantha Turner	attactures #111
TO VICHAEL SNIDIN	N' Mu
<_7	
-8 Mayan Wach	The second second
-9 David McGurk	Fried 140
10 Matthew J. Montgoppy	Das Weiteriching 110
-11 Alexis Dudte	Q. Derder 53
12 Bar Fraser	BouFrappy
13	
14	
15	
16	
17	
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21	
22	

OHIO PEACE OFFICER TRAINING COMMISSION & The Office of the Attorney General

This is to certify that

has successfully met the prescribed program requirements for

2024 CPT - NIBIN Overview Course

June 11, 2024

ine Ohio Attorney General

Thomas Que

Thomas Quinlan, Executive Director Ohio Peace Officer Training Commission

Vernon P. Stanforth, Charperson Ohio Peace Officer Training Commission

TOPIC: Responding to Me	ental Health Issues		
СРТ #: 24СРТ2024МН		CPT Credit hr(s):2	-
DATE: 05/28/2024 Time: 5:00pm-7:00pm		Instructor(s): Tom Huggins	

Name Printed	Signature
1 Benjemin Teylor	total "15 0
-2 Eliza Postlethwait	Els Diating
-3 Frank Chung	Alling
-4 Kethyn L. Bellesh	Btyrz
-5 Mike lyon	201-6 122
+6 David McGurk	
- Seff Kulbis	AP Kulber 1404
8 Davi DEMKU	Dep Derbo #123
-9 Bryan Balton	DEP. 1.3. J #191
-10 DENISE KROGEN	Q. Ja +160
-11 MILE GREEY	DER M. JURXED #162
A 12	
-13 nuns wurt	Unite 13
-14 Samantha Turner	ATEALLACHIL
- 15 MARTINE DEN M	130
-16 REVIN BOHRER	11-h
-17 - tim Harttore	AD 7 130
-18 Jackson Williams	10 - +156
-19 ANTONIO COLON	Chitorie Colar #198
-20 DAVE GUORD	D 5 m G # 128
-21 Scott Schmon	Attell 107
-22 JOSHWA CERSR	155
	0

-23 Ashray Wanchion #136 *24 Marijann Warden #164 -25 tule MICHAEL SNIDGE -26 STOLE WILMING TON 14.5.5 ROBERT WEIDIG +27 - 1450 Jim Kiouso DAVID KINK -28 -29 112 30 TAMARA Sindel 149 Suprate 31 MATTHEN DENSUN 120 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51

TOPIC: Crisis Mitigation -	An Ohio Model (De-Escalation)		
CPT #: 24CPT2024CM		CPT Credit hr(s): 2	
DATE: 05/28/2024 Time: 3:00pm-5:00pm		Instructor(s): Sgt. Turner, Dep. Denton	

Name Printed	Signature
-1- Jun HARHAM	28 135
-2 Eliza Postlethisterit	En Souteur
-3 JOSHUA COOPOR	ACCERT
-4 Frank Churig	Frank Rung
-5 Benjamin Taylor	
6 Jackson Williams	5 Jalen #156
-7 David Mcburk	A syle MI +14
-8 Alexis Dudte	a. Audte #153
-9 Scott Schward	bell in
2_10	
-11 DAVID KING	Alltyliz
12 MATT DENTON	100
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TOPIC: Firearms Practical	Manipulation Skills		
CPT #: 24CPT744		CPT Credit hr(s): 3 hr general	
DATE: 05/17/2024	Time: 12p-3p	Instructor(s): Deputy Donato	

	Name Printed	Signature
-	-1 MARY BRACKS	Ale o
	-2 Jack Hau	Supper
-	-3 DENISE KROGER	Choffen #160
-	-4 Eliza Pustuth would	Elex Islan und
-	5 David McGurk	× 8 mg(r) / # 140
	6 Michael McVicker	NOMU-
	7 James Flehlinser	0/20-127
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Medina County Sheriff's Office

TOPIC: AHA BLS Re	enewal		
CPT #: 24CPT728		CPT Credit hr(s): 3	
DATE: 4'/22/24	Time:12:30p-	Instructor(s):	
	3:30p	Timothy Bruenemeister	

Name Printed	Signature
1 Beu Fraser	Bee Frager
2 MIKE ISURICEY	D.m. Sirken #162
/3	
4 Amaptha timer	All TUMIN #114
5 David Mcburk	A STEP HILU
6 Eliza Poskethwait	Eling Polalent
17 Rodney Rees	P.S. Mr
8 DAVID KING	2014
9	
10 Nicholas H Numper	Aiz Aghum
11 ANTHONY MANCO	Aiz
12	
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John E. Reid and Associates

Hereby Certifies That

Attended and successfully completed a course on

The Reid Technique of Investigative Interviewing & Advanced Interrogation



June 26 – 29, 2023 24 Continuing Professional Education Credits Awarded

Prin

Course Instructo
















OHIO PEACE OFFICER TRAINING COMMISSION &The Office of the Attorney General

This is to certify that

has successfully met the prescribed program requirements for

Effective Communication and Safa Interaction With Persons in Crisis

Dave Y

Attorney Genera

4 A the

Vernon P. Stanforth, Chairperson Ohio Peace Officer Training Commission

Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission

OHIO PEACE OFFICER TRAINING COMMISSION & The Office of the Attorney General

TTORNEY GENERA

This is to certify that

has successfully met the prescribed program requirements for

Mental Health Response

Date: October 25, 2022

Vernon P. Stanforth, Champerson Ophio Peace Officer Training Commission

thre yout Dave Yost

Attorney General

Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission









OHIO PEACE OFFICER TRAINING COMMISSION &The Office of the Attorney General

This is to certify that

has successfully met the prescribed program requirements for

Hate Crimes

Date: _____September 26, 2022

Dave '

Attorney General

Vernon P. Stanforth, Chairperson Ohio Peace Officer Training Commission

Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission









ATTORNEY GENER **OHIO PEACE OFFICER TRAINING COMMISSION** THE OFFICE OF THE ATTORNEY GENERAL This is to certify that has successfully met the prescribed program requirements for **Concealed Firearm Carry** Changes Date: September 17, 2022 Vernon P. Stanforth, Chairperson Dave Y Attorney General Ohio Peace Officer Training Commission Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission



OHIO ATTORNEY GENERAL PROCEMENT RAMING OF THE OTHER TRAMING OF THE OTHER TRAVING OF THE OTHER
OHIO PEACE OFFICER TRAINING COMMISSION & The Office of the Attorney General
This is to certify that has successfully met the prescribed program requirements for
Use of Deadly Force and Legal Guidelines Date:
Dave Yost Attorney General Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission

OHID ATTORNEY GENERAL READ DEFORT TRANING COMMENTER	
OHIO PEACE OFFICER TRAINING COMMISSION & The Office of the Attorney General	
This is to certify that	
has successfully met the prescribed program requirements for Trauma and the Brain	
Date: Date: Dave Yost Attorney General Dugtt A. Holion Dehio Peace Officer Training Commission	
Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission	

.







DHIO DEPARTMENT OF HEALTH

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ALCOHOL AND DRUG TESTING

This is to certify that

3701-53-01 through 10 of the Ohio Administrative Code and is authorized to perform has qualified for and is hereby issued Senior Operator permit number 90885-S-6 under the provisions of section 3701.143 of the Ohio Revised Code and chapter breath tests in accordance with such laws and rules, using the BAC DataMaster instrument.

Effective Date August 23, 2022 This permit expires August 23, 2023





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GENERA

This is to certify that

has successfully met the prescribed program requirements for

Sexual Assault Investigations

Date: August 02, 2022

are yout Dave '

Attorney Genera

Vernon P. Stanforth, Chairperson hio Peace Officer Training Commission

Dwight A. Holcomb, Executive Director Ohio Peace Officer Training Commission







MEDINA COUNTY SHERIFF'S OFFICE CERTIFICATE OF COMPLETION This Certificate is presented to For completing 4 hours of Diversity, Equity and Inclusion 2022 CPT on this <u>19</u> day of <u>May</u>, 20<u>22</u>. Deputy Matthew Denton **Sheriff Terry Grice** Instructor



MEDINA COUNTY SHERIFF'S OFFICE



CERTIFICATE OF COMPLETION

This Certificate is presented to

For completing <u>8</u> hours of Reflex Presidia Gel

on this 18 day of February, 2022.

104. TUNU#116

Sgt. Samantha Turner Instructor

Sheriff Terry Grice





OHIO DEPARTMENT OF HEALTH

ALCOHOL AND DRUG TESTING

This is to certify that

has qualified for and is hereby issued Senior Operator permit number under the provisions of section 3701.143 of the Ohio Revised Code and chapter 3701-53-01 through 10 of the Ohio Administrative Code and is authorized to perform breath tests in accordance with such laws and rules, using the BAC DataMaster instrument.

> Effective Date July 28, 2021 This permit expires July 28, 2022



Application Date July 28, 2021

Stephanie McClaud





Human Resources & Administrative Services

Date Completed	Staff Initials	Probationary Officer Date	Probationary Officer Initials	Task
	Bak			Advised of start date/time/who to report to.
	Bal			Advised of swearing in ceremony/dress code/guest
	B.g.			Given uniform list and/or set up go to uniform shop
	Ball			New Hire paperwork completed with Personnel Office
	Bal			Unit number assigned
	Bal			Locker issued
	Bak			Hepatitis Shots- Advised how to receive or waive
	Bal2			Photo ID issued
	Balt			Mailbox set up in breakroom
	Knt			Business Cards

Technical Services

Date Completed	Staff Initials	Probationary Officer Date	Probationary Officer Initials	Task
	Baff			Email
	0			Computer Passwords Issued (Central Square)
	Back			Door Code/Key Fob issued
	0			Voicemail Access

Operations/Road Division FTO Supervisor

Date Completed	Staff Initials	Probationary Officer Date	Probationary Officer Initials	Task
				Department vehicle keys issued
				Fuel Card issued
	Bak			Range Qualification - Scheduled Date: 7-13-21 10A
				CLEAR Access
				Initial schedule issued

Training Division

Date Completed	Staff Initials	Probationary Officer Date	Probationary Officer	Task
	Bork			Tour of Facility, Introductions of available staff
	Bat		n.	Fingerprints taken for employee's Personnel File
	Balt		о.	Advised how to receive a TB Test by Medical Staff
	Bak			Core Values: Honesty, Integrity, Loyalty, Professionalism
	Box		~	Employee Assistance Program
	Bok			General Orders
	Beit			Lexipol Overview
	Bat		a.	Mission Statement
	BOR			Review of Ethics
	Bab			Review of Sexual Harassment Policy
	Pak			Review of Use of Force Policy
	Bal			Time Sheet-How to complete/submit for time off
	Back			Uniform Requirements
	mak			Union Contract

______ acknowledge that I have been informed on how to riff's Office Policy and Procedures on the computer system. I

acknowledge that I have been informed and understand that it is my responsibility to read and become familiar with all the agencies policy and procedures within thirty (30) days of my employment. I also understand that the evention of Policies and Procedures during Orientation highlights energies of

olicies and	a Procedures durin	gorientation	nignlights specific areas	5 OT
id is not a	substitute for com	nlying with th	his directive	

iplying with this directive.
Date

Witness Signature

1_

a

Date

Certificates for Training File

Staff Initials	Probationary Officer Date	Probationary Officer Initials	Task
			Basic OPOTC Training Certificate or letter
			Documentation of any required OPOTC Topics
			CLEAR
0	12. 1		LEADS
Ball			DHLEG
	BaB	Officer Date	Contraction of the second s

imap://csperry@mail.medinaco.org:143/fetch%3EUID%3E.IN...

Subject: Information Changes From: @medinaco.org>

Date: 2/16/2022, 6:28 AM

To: Carol Diekman <cdiekman@medinaco.org>

Carol,

I have recently moved and need to change my address on file. I also need to change my direct deposit information. Please let me know what steps/ paperwork is needed in order to do so. My new address is,

Thanks,	
1	/

Access Luerder

Employ Unit Nu	EN ee Name: _	7/7/2/ S OFFICE HANGES	→ Cpt. Bors → M. Harton → Keith Howard → Sqt. Fraser → Hylbert - M. Donnellan ⊠ Add □ Remove □ Make Changes				
NEW PC	SITION:						
	Captain Communications Techni Corrections Officer Court Screening Officer Deputy Detective	cian	□ Lieuten: □ LPN □ RN □ Secreta □ Sergear □ Other _	ry nt			
WORK STATUS: STATUS: Part-Time			Changes N				
	□ Civil □ DAR □ Communications □ Medi □ Corrections □ Road		ARE etective Bureau edical oad Patrol ansport	AUXILIA	hts & Scales RY: ial Deputy ted Deputy		
	INEL OFFICE USE ONL	Y:					
Persor	n Requesting Change	S:	Carol J. Diekma	n - Personnel	Assistant		
Date C	CAL SERVICES USE ON Changes Made: n Making Changes: _N				ataBoard@medinaco.org		

When complete, return to "Personnel Office" to be filed in the employee personnel file.

EMPLOYEE PERSONAL INFO



EMERGENCY CONTACT INFO

1.) NAME_		Relation	iship:
Home#:	Cell#:		#(Specify):
2.) NAME_		Relation	nship:
Home#:	Cell#	∋r	#(Specify):
INSURANCE: E			
UNIT # _	FU	ND# <u>2900 -</u>	2901- 50030
HIRE DATE:	PO	SITION:	
COLLEGE DEGRE BACHELORSA		: NO	
COMMISSIONED POS	SITION: YES VN	0	
Subject: Peace Officer Basic Training Certificate issued for From: Judith Wilson <Judith.Wilson@OhioAGO.gov> Date: 8/31/2021, 12:00 PM

To: "

>, "cdiekman@medinaco.org"

<cdiekman@medinaco.org>

As a result of your agency submitting an SF400 Notice of Appointment, a certificate of completion # has been issued for **agency submitting** and emailed to the school commander for signature. The school commander will forward the certificate to the student once it has been signed.

To increase efficiency and reduce costs, our office is now sending correspondence through email instead of through the US Postal Service, whenever possible. As such, please keep your email up to date with our office so that you receive all OPOTC correspondence. If you have any questions, please contact our office at 740-845-2700.

Thank you,



Judy Wilson Administrative Professional 2 – Ohio Peace Officer Training Commission Office of Ohio Attorney General Mike DeWine Office number: 740-845-2668 Fax number: 866-523-8130 Email: Judith.Wilson@OhioAGO.gov





Ohio Peace Officer Training Commission Office 800-346-7682 Fax 740-845-2675

NOTICE OF PEACE OFFICER APPOINTMENT

Check Box if: Correction to Record

Name Change

OSHP Trooper to Peace Officer (OSHP certificate <u>must</u> be attached)

 Within ten days of the appointment or status change, or promotion to Chief, submit one copy of this form either by email SF400@ohioattorneygeneral.gov, fax, or mail.

- 2. Type or print legibly and complete all blanks. Officer and Agency email addresses need to be entered to receive training determinations.
- 3. Submit pages 1 and 2 when an officer is newly-appointed to your agency, or has previously left the agency and returns.
- Submit only page 1 when an officer continues to be appointed by your agency, but has a change from one status, as listed in Box 15, to a different status, or is promoted to Chief.
- 5. Enter any necessary information for a Correction to Record, submitting all affected pages, and attach a letter explaining the requested change.

OFFICER INFORMATION		(First) (Mid	dle) 2. Social Security Number (last 5 only)
3. Previous Name(s) or Alias (Last)		(First)	(Middle)
n/a		n/a	n/a
4. Birth date (mm/dd/yyyy) 5. Office	er's Individual Email Address		6. Phone Number
7. Home Mailing Address (#/Street/PO Box)		(City) (S	(Zip Code) (County Name)
Basic Training Academy (Academy Na (Only complete if this is the officer's first appointment or OSP)	a	(Academy Number)	(Dates of Training)
AGENCY INFORMATION 9. Agency Nan Medina C			
10. Reporting Authority's Email Address		11. Agency Phone Number	
cdiekman@medinaco.org 12. Agency Mailing Address (#/Street/PO Box)		330-764-3632 (City)	(Zip Code) (County Name)
555 Independence Drive		Medina	44256 Medina
APPOINTMENT INFORMATION (Con	nplete Date, Status <u>and</u> ORC)	13. New Appointment Date	14. Status Change Date
15. Select New Status	Part-Time pay status (including those on vi 0 hours in a 14-day period.	Auxiliary Reservation, sick, bereavement, personal or a	reSpecialSeasonal administrative leave; on compensatory time or holidays) receiving
City Full-Time/Part-Time (737.02)	City Auxilia	ry/Reserve/Special (737.051)	City Chief (737.02)
Village Full-Time/Part-Time/Special (737	.16) Village Aux	iliary/Reserve (737.161)	Village Chief (737.15)
		Constable (509.01)	Other Chief - List ORC/Charter
Other - List ORC/Charter	✓ Deputy She	eriff (311.04)	Sheriff (311.01)
ATTESTATION OF REPORTING AUT	HORITY own fi	ree will and volition. I attest that t orrect and is based on my perso	d fully understand its contents and I sign it of my he information provided on this document is true nal knowledge or inquiry. I further understand and
	HORITY own fi and c ackno	ree will and volition. I attest that t orrect and is based on my perso	the information provided on this document is true nal knowledge or inquiry. I further understand and ed records is a criminal violation.
	HORITY own fr and c ackno	ree will and volition. I attest that to orrect and is based on my person wledge that submission of falsifie	he information provided on this document is true nal knowledge or inquiry. I further understand and
ATTESTATION OF REPORTING AUT	HORITY own fi and c ackno	ree will and volition. I attest that to orrect and is based on my person wiledge that submission of falsifie heriff	the information provided on this document is true nal knowledge or inquiry. I further understand and ed records is a criminal violation.

This form may be emailed to: SF400@ohioattorneygeneral.gov

	<u> </u>	\sim	
fficer Name (Last)	(First)	(Middle)	SSN (last 5 only)
B. OATH OF OFFICE			
	, and Laws and Ordinances of the p	on and Laws of the United States of Ame political subdivision to which I am appoint the duties of this office.	
	\sim	Terry Grice Name of Appointing Authority (Typed or Pr	inted Legibly)
	10	Sheriff	1100 203101)/
Signature of Appointing Autho	rity	Title of Appointing Authority (Typed or Prin	ted Legibly)
Please list all nr		R APPOINTMENT HISTORY es of page 2, as needed, to list the entire app	aintment history
riease list all pi		25 01 page 2, as needed, 10 list the entire app	Sinunent mistory.
4. Appointed By (Agency Name a	and County):	25. From(mm/dd/yyyy):	To(mm/dd/yyyy): / /

			1 1	
26. Appointment Status (Check Appropriate Box) Full-Time Part-Time	Auxiliary	Reserve	Special	Seasonal
27. Appointed By (Agency Name and County):		-	28. From(mm/dd/yyyy):	To(mm/dd/yyyy):
29. Appointment Status (Check Appropriate Box) Full-Time Part-Time	Auxiliary	Reserve	Special	Seasonal
30. Appointed By (Agency Name and County):			31. From(mm/dd/yyyy):	To(mm/dd/yyyy):
32. Appointment Status (Check Appropriate Box) Full-Time Part-Time	Auxiliary	Reserve	Special	_ Seasonal
33. Appointed By (Agency Name and County):			34. From(mm/dd/yyyy):	To(mm/dd/yyyy):
S. Appointment Status (Check Appropriate Box) Full-Time Part-Time	Auxiliary	Reserve	Special	_ Seasonal
36. Appointed By (Agency Name and County):			37. From(mm/dd/yyyy):	To(mm/dd/yyyy):
Appointment Status (Check Appropriate Box) Full-Time Part-Time	Auxiliary	Reserve	Special	Seasonal
39. Appointed By (Agency Name and County):			40. From(mm/dd/yyyy):	To(mm/dd/yyyy):
41. Appointment Status (Check Appropriate Box) Full-Time Part-Time	Auxiliary	Reserv	eSpecial	Seasonal

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This form may be emailed to: SF400@ohioattorneygeneral.gov

Subject: RE: Appointment History From: Heather Cloutier <Heather.Cloutier@OhioAGO.gov> Date: 8/11/2021, 8:24 AM to: cdiekman <cdiekman@medinaco.org>

Carol,

Sorry for the delay, I have been off on Medical Leave.

has no appointment history, looks like he took his exam on July 7th.

Travis McCourt:

Employment History

Employment History Start Date 1 Starting Source End Date Agency Sugar Grove Police Department (Fairfield) - A ... 1/9/1996 Appointment 7/7/1996 Medina County Park District (Medina) - Active 8/1/1997 Roster 4/4/2003 Montville Township Police Department (Medi... 4/9/2003 Appointment 1/27/2014 Medina Twp. Police Department (Medina) - A... 5/10/2004 Appointment 8/14/2015 Montville Township Police Department (Medi... 1/27/2014 Status Change 9/1/2015 Medina Twp. Police Department (Medina) - A... 8/14/2015 Appointment 8/31/2019 Medina County Park District (Medina) - Active 8/30/2019 Appointment 7/12/2021 Hinckley Police Department (Medina) - Active 7/13/2020 Appointment 7/11/2021

From: cdiekman <cdiekman@medinaco.org> Sent: Wednesday, July 7, 2021 1:41 PM To: Heather Cloutier <Heather.Cloutier@OhioAGO.gov> Subject: Appointment History

Heather,

Please send me the appointment histories for:

DOB:

and

Travis McCourt

Subject: Emailing: - SF400adm_001 From: cdiekman <cdiekman@medinaco.org> Date: 7/23/2021, 11:13 AM To: "Heather M. Cloutier" <Heather.cloutier@ohioattorneygeneral.gov>, "Courtney B. DeLong" <Courtney.DeLong@ohioattorneygeneral.gov>

Your message is ready to be sent with the following file or link attachments: - SF400adm_001

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.

Carol J. Diekman Personnel Assistant Medina County Sheriff's Office (330) 764-3632 cdiekman@medinaco.org

-Attachments:

- SF400adm_001.pdf

846 KB

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Auditor	Base Rate:	37.54
Access Data Base	Ed. Benefit:	0.00
Transmittal Report	Hourly Rate:	37.54
	Longevity:	0.000
	Adj. Rate:	37.540
	x OT Factor:	1.500
	OT Rate:	56.31
	OIC Rate:	40.16
	EMPLOYEE PAY RATE / FUND	
DATE:	Full-time Hire Date:	1.0
07/01/2024	State/County Previous Service Credit (Vacation Accrual):	None
	County Previous Service Credit (Longevity):	None
	OPBA Collective Bargaining Unit:	Deputies
	SUPERVISOR	Sheriff ESS Deputy
	SUPERVISOR PCN (POSITION CONTROL NUMBER)	
EMPLOYEE PCN		
EMPOLOYEE NAME		
SSN		Auditor Code 1
DOOLTION		

	Additor Odd	
POSITION		
DIVISION		
FUND#	29002901-50030	
FUND NAME	Road Patrol	
HOURLY RATE	\$37.54	
OVERTIME RATE	\$56.31	
STEP	#5	
EFFECTIVE DATE	July 12, 2024	
PAYABLE	Bi-weekly	
* Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy	

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$56.31
5007-2900-50030	Safe Communities DDEP Grant FY23 (OT Rate)	\$56.31
5002-2900-50030	Safe Communities STEP Grant FY24 (OT Rate)	\$56.31
5003-2900-50030	Safe Communities IDEP Grant FY24 (OT Rate)	\$56.31
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

2-8/gm Sheriff

Auditor ccess Data Base Transmittal Report

Base Rate:	35.83
Ed. Benefit:	0.00
Hourly Rate:	35.83
Longevity:	0.000
Adj. Rate:	35.830
x OT Factor:	1.500
OT Rate:	53.75
OIC Rate:	40.16

EMPLOYEE PAY RATE / FUND

Full-time Hire Date: State/County Previous Service Credit (Vacation Accrual): None County Previous Service Credit (Longevity): None OPBA Collective Bargaining Unit: Deputies SUPERVISOR Sheriff ESS Deputy

DATE: 12/18/2023

SUPERVISOR PCN (POSITION CONTROL NUMBER)

EMPLOYEE PCN	
EMPOLOYEE NAME	
SSN	Auditor Code
POSITION	Deputy
DIVISION	Road Patrol *
FUND#	29002901-50030
FUND NAME	Road Patrol
HOURLY RATE	\$35.83
OVERTIME RATE	\$53.75
STEP	4
EFFECTIVE DATE	December 24, 2023 (START OF PP#24-01)
PAYABLE	Bi-weekly
* Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$53.75
5007-2900-50030	Safe Communities DDEP Grant FY23 (OT Rate)	\$53.75
5002-2900-50030	Safe Communities STEP Grant FY24 (OT Rate)	\$53.75
5003-2900-50030	Safe Communities IDEP Grant FY24 (OT Rate)	\$53.75
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

GA 0 Sheriff

1
Auditor
Access Data Base
Transmittal Report

DATE:

07/12/2023

Base Rate:	34.45
Ed. Benefit:	0.00
Hourly Rate:	34.45
Longevity:	0.000
Adj. Rate:	34.450
x OT Factor:	1.500
OT Rate:	51.68
OIC Rate:	38.62

EMPLOYEE PAY RATE / FUND

Full-time Hire Date: State/County Previous Service Credit (Vacation Accrual): County Previous Service Gredit (Longevity): OPBA Collective Bargaining Unit: SUPERVISOR Sheriff ESS Deputy

None

None

Deputies

SUPERVISOR PCN (POSITION CONTROL NUMBER)

EMPLOYEE PCN	
EMPOLOYEE NAM	AE .
SSN	Auditor Code 1
POSITION	Deputy
DIVISION	Patrol
FUND#	29002901-50030
FUND NAME	Road Patrol
HOURLY RATE	\$34.45
OVERTIME RATE	\$51.68
STEP	4
EFFECTIVE DATE	July 12, 2023
PAYABLE	Bi-weekly
Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$51.68
5007-2900-50030	Safe Communities DDEP Grant FY23 (OT Rate)	\$51.68
5004-2900-50030	Safe Communities STEP Grant FY23 (OT Rate)	\$51.68
5005-2900-50030	Safe Communities IDEP Grant FY23 (OT Rate)	\$51.68
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

2-8 Sheriff

Auditor
Access Data Base
Transmittal Report

Base Rate:	32.89
Ed. Benefit:	0.00
Hourly Rate:	32.89
Longevity:	0.000
Adj. Rate:	32.890
x OT Factor:	1.500
OT Rate:	49.34
OIC Rate:	38.62

EMPLOYEE PAY RATE / FUND

DATE: 01/03/2023

Full-time Hire Date: State/County Previous Service Credit (Vacation Accrual): County Previous Service Credit (Longevity): **OPBA Collective Bargaining Unit:** SUPERVISOR Sheriff ESS Deputy

None

None

Deputies

SUPERVISOR PCN (POSITION CONTROL NUMBER)

EMPLOYEE PCN		
EMPOLOYEE NAME		
SSN	Auditor	Code 1
POSITION	Deputy	
DIVISION	Patrol	
FUND#	29002901-50030	
FUND NAME	Road Patrol	
HOURLY RATE	\$32.89	
OVERTIME RATE	\$49.34	
STEP	3	
EFFECTIVE DATE	December 25, 2022 (START OF PP#23-01)	
PAYABLE	Bi-weekly	
Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy	

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$49.34
5007-2900-50030	Safe Communities DDEP Grant FY22 (OT Rate)	\$49.34
5002-2900-50030	Safe Communities STEP Grant FY22 (OT Rate)	\$49.34
5003-2900-50030	Safe Communities IDEP Grant FY22 (OT Rate)	\$49.34
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

2-

Sheriff

1		
Auditor Access Data Base	Base Rate:	31.03
Transmittal Report	Ed. Benefit: Hourly Rate:	0.00
	Longevity (Not Applicable to Employees Hired after 1/1/2013):	31.03 N/A
	Adj. Rate:	31.030
	x OT Factor:	1.500
	OT Rate:	46.55
	OIC Rate:	36.19
DATE:	EMPLOYEE PAY RATE / FUND	
7/20/22	State/County Previous Service Credit (Vacation Accrual):	Nor
1.1-21 	County Previous Service Credit (Longevity):	None N/A
	OPBA Collective Bargaining Unit:	Deputies
	SUPERVISOR	Sheriff ESS Deputy
	SUPERVISOR PCN (POSITION CONTROL NUMBER)	
EMPLOYEE PCN		
EMPOLOYEE NAME		
SSN		Auditor Code 1
POSITION	Deputy (w/Road Differential)	
DIVISION	Patrol	
FUND#	29002901-50030	
FUND NAME	Road Patrol	
HOURLY RATE	\$31.03	
OVERTIME RATE	\$46.55	
STEP	3	
EFFECTIVE DATE	7/12/22	
PAYABLE	Bi-weekly	
Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy	

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$46.55
5007-2900-50030	Safe Communities DDEP Grant FY22 (OT Rate)	\$46.55
5002-2900-50030	Safe Communities STEP Grant FY22 (OT Rate)	\$46.55
5003-2900-50030	Safe Communities IDEP Grant FY22 (OT Rate)	\$46.55
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

Sheriff

	Auditor	Base Rate:	30.11
/	Employee Maintenance	Ed. Benefit:	0.00
V	Access Data Base	Hourly Rate:	30.11
-V	Transmittal Report	Longevity (Not Applicable to Employees Hired after 1/1/2013):	N/A
		Adj. Rate:	30.110
		x OT Factor: OT Rate:	1.500 45.17
		OI Rate. OIC Rate:	36.19
		EMPLOYEE PAY RATE / FUND	00.10
	DATE:	Full-time Hire Date:	
	01/26/2022	State/County Previous Service Credit (Vacation Accrual):	None
		County Previous Service Credit (Longevity):	N/A
		OPBA Collective Bargaining Unit:	Deputies
			Sheriff ESS Deputy
		SUPERVISOR PCN (POSITION CONTROL NUMBER)	
	EMPLOYEE PCN		
	EMPOLOYEE NAME		
	SSN		Auditor Code 1
	POSITION	Deputy (w/Road Differential)	
	DIVISION	Patrol	
	FUND#	29002901-50030	
	FUND NAME	Road Patrol	
	HOURLY RATE	\$30.11	
	OVERTIME RATE	\$45.17	
	STEP	2	
	EFFECTIVE DATE	01/12/2022	
	PAYABLE	Bi-weekly	
	Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy	

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$45.17
5007-2900-50030	Safe Communities DDEP Grant FY22 (OT Rate)	\$45.17
5002-2900-50030	Safe Communities STEP Grant FY22 (OT Rate)	\$45.17
5003-2900-50030	Safe Communities IDEP Grant FY22 (OT Rate)	\$45.17
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

2-18 Sheriff

Auditor	Base Rate:	28.86
Employee Maintenance	Ed. Benefit:	0.00
Access Data Base	Hourly Rate:	28.86
Transmittal Report	Longevity (Not Applicable to Employees Hired after 1/1/2013):	N/A
	Adj. Rate:	28.860
	x OT Factor:	1.500
	OT Rate: OIC Rate:	43.29 36.19
	EMPLOYEE PAY RATE / FUND	50.18
DATE:	Full-time Hire Date:	
12/29/2021	State/County Previous Service Credit (Vacation Accrual):	None
	County Previous Service Credit (Longevity):	N/A
	OPBA Collective Bargaining Unit:	Deputies
	SUPERVISOR	Sheriff ESS Deputy
	SUPERVISOR PCN (POSITION CONTROL NUMBER)	
EMPLOYEE PCN		
EMPOLOYEE NAME		
SSN .		Auditor Code 1
POSITION	Deputy (w/Road Differential)	
DIVISION	Patrol	
FUND#	29002901-50030	
FUND NAME	Road Patrol	
HOURLY RATE	\$28.86	
OVERTIME RATE	\$43.29	
STEP	1	
EFFECTIVE DATE	December 26, 2021 (START OF PP#22-01)	
PAYABLE	Bi-weekly	
Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy	

FUND#	DESCRIPTION	RATE:
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$43.29
5007-2900-50030	Safe Communities DDEP Grant FY22 (OT Rate)	\$43.29
5002-2900-50030	Safe Communities STEP Grant FY22 (OT Rate)	\$43.29
5003-2900-50030	Safe Communities IDEP Grant FY22 (OT Rate)	\$43.29
6907-2900-50030	Op Safe Schools Grant (Set Rate)	\$49.89
7904-	Sheriffs Policing Rotary -	N/A

Tay 20 Sheriff

/		
Auditor	Base Rate:	28.1
Employee Maintenance	Ed. Benefit:	0.0
Access Data Base	Hourly Rate:	28.1
Fransmittal Report	Longevity (Not Applicable to Employees Hired after 1/1/2013):	N
	Adj. Rate: x OT Factor:	28.16
	OT Rate:	42.2
	OIC Rate:	35.3
	EMPLOYEE PAY RATE / FUND	
DATE:	Full-time Hire Date:	
	State/County Previous Service Credit (Vacation Accrual):	No
	County Previous Service Credit (Longevity):	N
	OPBA Collective Bargaining Unit:	Deputi
EMPLOYEE NAME		
SSN		Auditor Code
POSITION	Deputy (w/Road Differential)	
FUND#	2900-2901-50030	
DIVISION	Road Patrol	
HOURLY RATE	\$28.16	
FUND#	2900-2901-50030	
DIVISION	Road Patrol	
OVERTIME RATE	\$42.24	
STEP	1	
EFFECTIVE DATE		
PAYABLE	Bi-weekly	
Note to Auditor:	For City Tax purposes, this is an "Over the Road" Deputy	

OTHER FUNDS

FUND#	FUND# DESCRIPTION		
0163-2900-50030	Federal Law Enforcement SO Fund (OT Rate)	\$42.24	
5001-2900-50030	Safe Communities DDEP Grant (OT Rate)	\$42.24	
5004-2900-50030	Safe Communities STEP Grant (OT Rate)	\$42.24	
5005-2900-50030	Safe Communities IDEP Grant (OT Rate)	\$42.24	
6907-2900-50030			
7904-	Sheriffs Policing Rotary -	N/A	

Sheriff Sheriff

CERTIFICATE OF

APPOINTMENT OF DEPUTY

Revised Code Sec. 311.04, 325.17

Office of Sheriff, Medina County, Ohio 44256

To the County Auditor:

I hereby certify that I have this day appointed:



a qualified elector of said County, to the position of:

Deputy

FUND No.: 29002901-50030

in my office of Sheriff of said County, at a salary of:

\$28.16 per hour Step: 1

Said appointment is to take effect:

and the said salary is by law payable bi-weekly to appointee, out of the County Treasury, upon the warrant of the County Auditor.

1-2-8 Sheriff

Subject: RE: New Hire **Sector** From: "Kyle Dickel" <kdickel@medinaco.org> Date: 7/7/2021, 11:30 AM To: "'cdiekman'" <cdiekman@medinaco.org>

Yes it will be needed. The employee number would be

From: cdiekman <cdiekman@medinaco.org> Sent: Wednesday, July 7, 2021 11:28 AM To: Kyle Dickel <kdickel@medinaco.org> Subject: New Hire

Kyle,

New Hire: Hire Date: Title: Deputy Last 4 SSN:

Will an Auditor Code be needed?

Carol J. Diekman Personnel Assistant Medina County Sheriff's Office (330) 764-3632 cdiekman@medinaco.org Subject: New Employees From: Kevin Ross <kross@ohmedinaco.org> Date: 7/6/2021, 3:59 PM To: Carol Diekman <cdiekman@medinaco.org>, Margaret Donnellan <mdonnellan@medinaco.org>, Michael Hatton <mhatton@ohmedinaco.org>, Samo Mernik <smernik@medinaco.org>, Jonelle Meredith <jmeredith@ohmedinaco.org>, Beverly Fraser <bfraser@medinaco.org>, Bruce Cornelius <bcornelius@medinaco.org>, David Pries <dpries@medinaco.org>, Douglas Clinage <dclinage@medinaco.org>, Kevin Ross <kross@ohmedinaco.org>, Scott Schmoll <sschmoll@medinaco.org>, Todd Heckel <theckel@medinaco.org>

CC: Rebecca Byrne <rbyrne@ohmedinaco.org>, Terry Grice <tgrice@ohmedinaco.org>, Eric Bors <ebors@ohmedinaco.org>, Kris Conwill <kconwill@ohmedinaco.org>

Ladies and Gentlemen,

and Deputy Travis McCourt (151) will be

Make sure we are ready to get them through our process smoothly. We need to have their equipment ready for them along with keys, email address, payroll, OHLEG, LEADS, CLEAR, policy and procedure, contract, etc. I have their radio's set with their numbers. I want to make sure we are professional and organized throughout the process. They will be sworn in at 2:00PM on the same day.

Respectfully,

Captain Kevin J. Ross

imap://csperry@mail medinaco.org:143/fetch%3EUID%3E.INBO ...

Subject: Re: Information Changes From: cdiekman <cdiekman@medinaco.org> Date: 2/16/2022, 7:23 AM To: Management @medinaco.org>

Deputy

I am attaching a Change of Address form.

Please go to your ESS (Employee Self Service) Resource Icon (located next to your login arrow on upper right). From there you will find:

- IT-4 State Tax Form
- Residence Tax Form
- Direct Deposit Form

Please print off forms, then complete and return all to my office.

Thanks, Carol

On 2/16/2022 6:28 AM, wrote:

Carol,

I have recently moved and need to change my address on file. I also need to change my direct deposit information. Please let me know what steps/ paperwork is needed in order to do so. My new address is,

Thanks,

Carol J. Diekman Personnel Assistant Medina County Sheriff's Office (330) 764-3632 cdiekman@medinaco.org

Re: Information Changes	imap://csperry@mail.medinaco.org:143/fetch%3EUID%3E.INBO
- Attachments:	· · · · ·
Address change.pdf	20.2 КВ

imap://csperry@mail.medinaco.org:143/fetch%3EUID%3E.INBO ...

Subject: Fwd: Information Changes From: cdiekman <cdiekman@medinaco.org> Date: 3/3/2022, 12:00 PM To: @medinaco.org>

CC: Kyle Dickel <kdickel@medinaco.org>

Deputy

I am forwarding our previous emails regarding your Change of Address to Kyle Dickel at the Auditors Office.

Please note, to date, I have not received your updated IT-4 State Tax Form, Residence Tax Form or Direct Deposit Form.

I am attaching all forms here, they are also available in your ESS (Munis Employee Self Service).

Please submit as soon as possible.

Thank you, Carol

Deputy

I am attaching a Change of Address form.

Please go to your ESS (Employee Self Service) Resource Icon (located next to your login arrow on upper right). From there you will find:

- IT-4 State Tax Form
- Residence Tax Form
- Direct Deposit Form

Please print off forms, then complete and return all to my office.

Thanks, Carol On 2/16/2022 6:28 AM, wrote:

Carol,

I have recently moved and need to change my address on file. I also need to change my direct deposit information. Please let me know what steps/ paperwork is needed in order to do so. My new address is,

Thanks,

Deputy

Carol J. Diekman Personnel Assistant Medina County Sheriff's Office (330) 764-3632 cdiekman@medinaco.org

Attachments:		
Address change.pdf	20.2 KB	
IT-4 - Ohio Withholding Rev 12-2020.pdf	256 KB	
Residence City Income Tax.pdf	54.5 KB	
Direct Deposit Form.pdf	34.3 KB	

Name:	SSN:	Unit #:
Position: DEPUTY	Related Degree: NO	AS BA
und: 29002901	Step: Hrly Rate:	OT Rate: 42.24 OIC Rate: 35.31
Previous Service State/County for Vacati	on Accrual:	DOB:
Originals to Auditor's Office		Initial Uniform Allowance (Per Contracts)
Pay Rate & Fund Information		(Paid within 30 days of Hire)
Appointment of Deputy (Computer)		(Enter in Retro Pay; Advise Auditors Office)
A EEOC		Communications Techs: \$500.00
Federal Tax (Form W-4)		Corrections Officers: \$500.00:
Ustate Tax (Form IT4)		Deputy/Lieutenant/Sergeant: \$625.00 7
City Income Tax		Internal Check List
Employment Eligibility (Form I-9)		Auditor L
Copy of Drivers License and Social Security C	ard	OPOTA
OPERS - Personal History Record		Payroll System
Social Security Sign Off Sheet		Access Data Base
Authorization for Direct Deposit		Zuercher
E-Mail Direct Deposit Paystubs		Annual Employee Changes
Human Resources EAP Letter (EAP Brochure/	'Card)	Employee Workbook
/ Medical Mutual Info (Eligible 1st month folio	wing 30 days of employment)	Transmittal Report
On Line Life Ins \$25K Non-Union; \$30K Union		Check Distribution List
On-Line Supplemental Plans Information		*Step/Rate List
/ Affordable Care Act Paperwork		Seniority Lists
BE WELL (Instructions; Current Year Challeng	es) After PlanSource Enrollment	Roster Lists
Civilian Employees: Policies & Proceedures @		Swort WonSworn - EED
Photo ID Application	www.in.incomeco.org	Longevity List
Employee Personal/Contact Information (Acc	ess & Inter hardge)	Vacation Accrual Lists
CTransfer of Sick Time	ess a mes bader	Individual Key List (Excel)
Contemporandum of Agreement		Agency 360
Hepatitis B (3 Shot Vaccination Series)A	crent: Decline (County Health Dent.)	Alloted Positions/Slots List
Self Insured Workers Compensation (Compa		Autorea - astrono spis tra
FMLA Rights	ny nooprony	
Network Use PolicyFraud Rep	orting	
/ Medical Marijuana & Medina County Alcohol		
Important Links (Misc. County web addresses		
Loeker Assignment ker N	<pre>K#</pre>	
Combination: Right Left Right		
Individual Key List	t Out put in Master File Binder)	
Høliday List		
Deferred Comp (State; County)	
Time Sheet Review		
	gerprint Card (Sgt. Fraser) ptain, Training Sgt, Tech Coordinator; IT	

Equal Employment Opportunity Commission (EEOC)

Date:
Employee Name:
Job Category: PS - Protective Service
Function: Police Protection
Department:Sheriff's Department
Ethnic Class: White / Male
Job Category Job Title/Description
OA=Official/Administrative Chief, Captain
P=Professional RN
T=Technician Tech Coordinator, Computer Programmer, LPN, Medical Tech
PS=Protective Service Deputy, Detective, Lieutenant, Sergeant, Corrections Officer
AS=Administrative Support Communications Technician, Secretary
ETHNIC CLASSES
1. American Indian or Alaskan Native
2. Asian or Pacific Islanders
3. White
4. Black

5. Hispanic

Ohio Public Employees Retirement System

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



Personal History Record

INSTRUCTIONS

- As a public employee you are required to complete and file this Form within 30 days of commencing employment. Failure to do so may limit the options available to you as well as delay transactions. Please fill out the form in blue or black ink.
- 2. OPERS contributions are only permitted on compensation that is earnable salary. Examples of compensation that are not earnable salary include, but are not limited to, amounts paid to individuals who serve on a fee basis or compensation on a per page, per meeting, per inspection or per emergency response event. If there is a question about whether the compensation is earnable salary, please contact OPERS to request an earnable salary determination.
- 3. For elected officials: An elected official, or person appointed to a publicly elected position, who is not retired from an Ohio retirement system and does not have contributions on deposit with OPERS through previous elected service, has the option of contributing to OPERS or Social Security. Elected officials who choose OPERS membership are required to contribute to OPERS for all subsequent elected positions. Completion of this form indicates the elected official's irrevocable membership election.
- 4. Be sure your date of birth and Social Security Number, which are used to identify your account, are entered correctly.
- 5. Sign the form in SECTION 4 EMPLOYEE CERTIFICATION. DO NOT print or type.
- The employer is required to complete SECTION 5 EMPLOYER CERTIFICATION.
- 7. The employer is required to mail the completed form to OPERS at the above address immediately upon hire.

Section 1 - Personal Information

Social Security Number		
Last Name	First Name	IM
Street or Mailing Address		Apt. Number
	State ZIP	Code
Province		
	Country Post	al Code .
Date Of Birth Gender Male Fe	male	
Yes No		
Are your levelly mented?		
Are you legally married?		
	Phone Number Cell Pho	ne Number
	Phone Number Cell Pho	ne Number
Work Phone Number Home	Phone Number Cell Pho	ne Number
Work Phone Number Home	Phone Number Cell Pho	ne Number
Work Phone Number Home 3307250028 E-mail Address		ne Number
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Work Phone Number Home 3307250028 E-mail Address Section 2 - Current Employment Infor Job Title		
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Work Phone Number Home 3307250028 E-mail Address Section 2 - Current Employment Infor Job Title	Imation	

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Section 3 - Prior Service Information																	
		and an other states of the sta	Ye	s	No /					e M	onth	D	lay	Y	/ear		
Have you previously worked in public employn	nent in	Ohio	, [٦ſ	V				ate c				T			1	
have you previously worked in public employing	nenc m	Onio	. –		-	制	publi	c se	rvice	::	-					10 Mar	
'yes," list employer(s)			-		1	12. I			10						-		
		2								1							
	T		-	1 -	T	1	T	T	T	T				1	1	T	-
				1		1	-	1	1	1					_		_
							THE .		1						1		
If "Yes" and you wish to request a determina a completed <i>Certification of Unreported F</i> Are you currently receiving a disability benef systems? <i>If applicable, please check all that</i> Ohio Police and Fire Pension Fund (OP&F) State Highway Patrol Retirement System (HPI Cincinnati Retirement System (CRS) Section 4 - Employee Certification	Public S fit or ar apply.	iervic n age	e (Fo	rm A servi	IA). ce ret a	irem	ent R	fror	n an	y of	the						
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Social Security Administration

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

Employee Name		Employee ID#	
Employer Name	MEDINA COUNTY	Employer ID#	

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

Windfall Elimination Provision

Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2013, the maximum monthly reduction in your Social Security benefit as a result of this provision is \$395.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to Social Security Publication, "Windfall Elimination Provision."

Government Pension Offset Provision

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

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

For More Information

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

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

Signature of Emp

Form SSA-1945 (01 Destroy Prior Edition

Date	
18.20	

Information about Social Security Form SSA-1945 Statement Concerning Your Employment in a Job Not Covered by Social Security

New legislation [Section 419(c) of Public Law 108-203, the Social Security Protection Act of 2004] requires State and local government employers to provide a statement to employees hired January 1, 2005 or later in a job not covered under Social Security. The statement explains how a pension from that job could affect future Social Security benefits to which they may become entitled.

Form SSA-1945, **Statement Concerning Your Employment in a Job Not Covered by Social Security**, is the document that employers should use to meet the requirements of the law. The SSA-1945 explains the potential effects of two provisions in the Social Security law for workers who also receive a pension based on their work in a job not covered by Social Security. The Windfall Elimination Provision can affect the amount of a worker's Social Security retirement or disability benefit. The Government Pension Offset Provision can affect a Social Security benefit received as a spouse, surviving spouse, or an ex-spouse.

Employers must:

- . Give the statement to the employee prior to the start of employment;
- . Get the employee's signature on the form; and
- . Submit a copy of the signed form to the pension paying agency.

Social Security will not be setting any additional guidelines for the use of this form.

Copies of the SSA-1945 are available online at the Social Security website,

<u>www.socialsecurity.gov/online/ssa-1945.pdf</u>. Paper copies can be requested by email at ofsm.oswm.rqct.orders@ssa.gov or by fax at 410-965-2037. The request must include the name, complete address and telephone number of the employer. Forms will not be sent to a post office box. Also, if appropriate, include the name of the person to whom the forms are to be delivered. The forms are available in packages of 25. Please refer to Inventory Control Number (ICN) 276950 when ordering.

MEDINA COUNTY

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

I hereby authorize the Medina County Payroll Office to initiate credit entries and to initiate, if necessary, debit entries to adjust for any credit entries in error to my Account(s) indicated below and the depository named below hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

EMPLOYEE INFORMATION

E

DEPOSITORY INFORMATION – Please fill in the amount to be deposited or the word NET in the space provided. Make sure to list <u>all</u> accounts receiving direct deposits to ensure an accurate updated employee file.

Checking / Sevince	Dinancial Institution Mumber	A 11 (Photostan
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Checking / Savings	Financial Institution Number	Add / Existing
	Account Number	Amount To Be Deposited
	Checking / Savings	Checking / Savings Financial Institution Number

PLEASE ATTACH A VOIDED CHECK OR SAVINGS DEPOSIT SLIP TO THIS AUTHORIZATION FOR EACH FINANCIAL DISTITUTION LISTED (FOR NEW DIRECT DEPOSIT ACCOUNTS ONLY)

NOTE: THE FIRST DIRECT DEPOSIT FOR NEW ACCOUNTS WILL TAKE PLACE ON THE PAYDAY FOLLOWING ON ACH PRE-NOTIFICATION.

By signing this statement, I authorize the Medina County Payroll Office to automatically deposit payments into the account(s) listed above. This authority is to remain in full force and effect until the Medina County Payroll Office has received notification from me of its termination in such time and in such manner as to afford the Medina County Auditor's Office and the designated Depository a reasonable opportunity to act on it.

EMAIL DIRECT DEPOSIT STUB

Name – Please Print	Last 4 digits of your Social Security No.		
Email Address (Non-Medina County aovernment email address)	Phone Number	Date	

The Medina County Auditor's Office has the ability to email your Direct Deposit paystubs. The email copy will look the same as your paper stub. It will come from the email address **MedinaCountyDD@Medinaco.org.** The attachment will be in a PDF format so you can print it for your files or just keep it in a file on your computer.

If you would like to sign up for this, please fill out the form at the top of this page and return it to your payroll department and they will forward the information to the Auditor's office. Since this is a personal email *please supply a non-Medina County government email address*.

If your email information is received by the Auditor's office by the Friday before the scheduled pay date, your pay stub will be emailed. If the information is received after that date, it will become effective for the following pay date.

Thank you for your time. If you have any questions, please contact Kyle Dickel at 330-725-9772 or Sharon Creswell at 330-9771.

Subject: Re: New Hire Seniority From: Kevin Ross <kross@ohmedinaco.org> Date: 7/14/2021, 2:36 PM To: Carol Diekman <cdiekman@medinaco.org>

Travis McCourt.

From: cdiekman <cdiekman@medinaco.org> Sent: Wednesday, July 14, 2021 1:57 PM To: Eric Bors <ebors@ohmedinaco.org>; Kevin Ross <kross@ohmedinaco.org> Subject: New Hire Seniority

Captain Bors and Captain Ross

We have 4 new employees with the same FT Hire Date of Please advise who has seniority.

Corrections Officers (Captain Bors please advise):

- · Ginnard, John
- · Placek, Tyler

Deputies (Captain Ross please advise):

Thank you, Carol

Carol J. Diekman Personnel Assistant Medina County Sheriff's Office (330) 764-3632 cdiekman@medinaco.org

ENERGY COUNT	555 Independence Driv Medina, OH 4425 330-725-002
and the second s	TERRY GRICE. SHERIF
	PP23-24 An Dete 1-11/03
Employee Name	
Department/Location Deputy	
Quartermaster Allowable Amount	\$1,500.00
Quartermaster Amount Spent	\$1,613.37
Quartermaster Amount Due	\$113.37
Detail:	
Employee Name (Printed)	
Employee Signature	
Date //-//-23	

HONESTY * INTEGRITY * LOYALTY * PROFESSIONALISM

Carol Diekman

From: Sent: To: Cc: Subject: Kevin Ross Tuesday, June 27, 2023 1:51 PM MCSO - All Terry Grice New

Ladies and Gentlemen,

I would like to officially announce that will be the next for the Medina County Sheriff's Office. The Medina County has illustrated professionalism, being proactive, dedication and an intense drive, since he was hired at the sheriff's office. We are looking forward to watching him grow as a deputy and the mean of the

Captain Kevin J. Ross Medina County Sheriff's Office 555 Independence Drive Medina, Ohio 44256 330.764.3672 - Direct Number 330.725.6631 - Communications



LODI POLICE DEPARTMENT

KEITH KEOUGH, CHIEF OF POLICE

October 2, 2023

Sheriff Terry Grice Medina County Sheriff's Office 555 Independence Drive Medina, Ohio 44256

Dear Terry,

On September 6, 2023, my officers were dispatched to 215 Bank Street, on a report that an intoxicated man was barricaded in his garage and armed with a handgun. Initial reports indicated the man, who has a history of mental illness, was making threats to kill himself, or have officers kill him.

Several members of your department responded to the situation and worked closely with our officers in both containment of the area and contacting the subject to convince him to come out of the building peacefully. They were Sergeant Samantha Turner, , Deputy David and Deputy Anthony Manco. Your staff was instrumental in setting up McGurk, a perimeter, use of the drone, and directing citizens away from the area. was one of the officers that made telephone contact with the subject, and I'm told he was able to build a positive rapport with him.

It is always a pleasure working with your staff, especially during a major incident such as the one mentioned. In this incident, the subject was taken into custody without anyone becoming injured.

Please let them know how much we appreciate them and look forward to working with them in the future.

Sincerely,

Keith Keogh

Keith S. Keough, Chief of Police

KSK/

MEDINA COUNTY SHERIFF'S OFFICE



555 Independence Drive Medina, OH 44256 330-725-0028

TERRY GRICE, SHERIFF

MEMORANDUM

То:	Sgt. Dave King Deputy Jared Meredith
	Deputy Eliza Postlethwait
	Deputy Sharon Centner Deputy Travis McCourt
From:	Sheriff Terry Grice
Date:	June 7, 2023
Re:	Thank you

Please find attached a copy of a "Thank You" card I received from Ms. Mary Crabtree regarding a motor vehicle accident on 5/10/23 at 5077 Hamilton Rd. Ms. Crabtree was one of the staff members on the school bus that was involved in the accident. She was very grateful for the job each of you displayed while on scene.

I would also like to commend you for your professionalism during this incident and thank you for a job well done! It is a true compliment to you and to our office when we receive such positive feedback from our citizens. Keep up the excellent work!

cc: Personnel File
Sheriff Shice -I was a staff member on the lus involved in an accident on 5/10 on Harrison uoad I want to commend your staff for their professional apprivach, their understanding of the situation, the guidance to us & parents, & thur patience much our students. They were helpful and so very good at making a stressful moment less stressful. Shanon Centner = inas also very supportive = helpful in her "anal" ->



10



From: Sent: To: Cc: Subject: Scott Schmoll Monday, January 30, 2023 2:21 PM Terry Grice; Douglas Clinage; Kevin Ross; Carol Diekman RE: Letter

Sgt. Clinage,

Thank you for going that extra mile and living up to the core values of this agency. I am proud to serve along side both of you.

Lt. Scott Schmoll

From: Terry Grice <tgrice@ohmedinaco.org> Sent: Monday, January 30, 2023 2:18 PM To: Douglas Clinage <dclinage@ohmedinaco.org>; Constant Constant @ohmedinaco.org> Cc: Scott Schmoll <sschmoll@ohmedinaco.org>; Kevin Ross <kross@ohmedinaco.org>; Carol Diekman <cdiekman@ohmedinaco.org> Subject: Letter

Sgt. Clinage and



I have attached a letter sent from Captain Kiley of Ashland PD. Captain Kiley was very appreciative of the assistance you provided to the Kohler family. Specifically, he noted how you cleaned up the area so the family wouldn't have to deal with the aftermath once they returned home from the hospital.

Thank you both for going above and beyond to help out this family! These actions certainly put you and our Office in a positive light. I asked Carol to place a copy in your personnel files.

Sheriff Terry Grice Medina County Sheriff's Office 555 Independence Dr. Medina, OH 44256

From: mcsoemailadmin@medinaco.org <mcsoemailadmin@medinaco.org> Sent: Friday, January 27, 2023 4:04 PM To: Terry Grice <tgrice@ohmedinaco.org> Subject:





DIVISION OF POLICE

Ashland Justice Center 1211 E. Main Street Ashland, Ohio 44805 Administrative: (419) 289-1696 Business: (419) 289-3639 Fax: (419) 281-7547

> David A. Lay Chief of Police

Matt Miller Mayor

January 18, 2023

Sheriff Terry Grice Medina County Sheriff's Office 555 Independence Drive Medina, OH 44256

Fire Chief Brian Cavanaugh Westfield Fire & Rescue 6699 Buffham Road Seville, OH 44273

Re: Case 01-23000009

Sir (s)

On behalf of The Ashland Police Division, I would like to express our gratitude for the assistance your staff showed Off Duty Sergeant Jonathan Kohler and his wife, Lizbeth.

On January 2, Jonathan and Lizbeth were turning in for the night, when their newly adopted pit bull attacked Jonathan. Jonathan sustained severe lacerations to his left hand, as well as numerous punctures and cuts to his right hand. Jonathan, a dog lover, was forced to shoot his dog to protect himself and Lizbeth. Jonathan was ultimately transported to Medina Hospital by Westfield EMS Personnel.

When I spoke with Jonathan and Lizbeth, they shared how much they appreciated the professionalism and care shown by the deputies and EMS personnel. On the ride home from the hospital, Jonathan thought of the mess they would have to clean up. Jonathan learned that his fellow first responders sealed up the animal in a garbage bag, placed it in his barn and cleaned up the mess. A few days after the incident, I went to their home to transport the K9 to the veterinarian for further testing. They both again shared how much they appreciated the first responders who came to their aid.

Please extend our thanks to your EMS personnel, Sgt Clinage and

or their help.

Sincerely,

#157

Captain Craig Kiley # 151

Carol Diekman

From: Sent: To: Cc: Subject: Scott Schmoll Friday, September 30, 2022 1:08 PM Terry Grice; Douglas Clinage; Carol Diekman: Kevin Ross RE: Letter

Matthew Montgomery

Gentlemen.

Thank you for the excellent service you continue to provide to the residents of Medina County. Your professionalism does not go un-noticed. Your actions during this incident are a true reflection of your attention to detail and your professionalism. Please continue to do the excellent work you do,



Lt. Scott A. Schmoll #107 Medina County Sheriff's Office Dispatch: 330-725-6631 Office: 330-764-3623 Cell: 330-591-5913

From: Terry Grice <tgrice@ohmedinaco.org> Sent: Friday, September 30, 2022 11:07 AM To: Douglas Clinage <dclinage@ohmedinaco.org>; @medinaco.org>; Matthew Montgomery <mmontgomery@medinaco.org> Cc: Carol Diekman <cdiekman@ohmedinaco.org>; Scott Schmoll <sschmoll@ohmedinaco.org>; Kevin Ross <kross@ohmedinaco.org> Subject: Letter

Sgt. Clinage, Dep. Montgomery, and

Please see the attached letter sent from the Metro Parks thanking you for your assistance. Great work! Carol has placed a copy of this in your personnel file.

We appreciate you representing the Office in such a professional manner. Keep up the good work.

Sheriff Terry Grice Medina County Sheriff's Office 555 Independence Dr. Medina, OH 44256 Administrative- (330)764-3637 Dispatch- (330)725-6631



Police Headquarters 4600 Valley Parkway Fairview Park, Ohio 44126 440-331-5530 FAX 440-331-5502 clevelandmetroparks.com

Board of Park Commissioners Debra K. Berry

Dan T. Moore Bruce G. Rinker

Chief Executive Officer Brian M. Zimmerman

Chief of Police Kelly J. Stillman 21, September 2022

Terry Grice Sheriff Medina County Sheriff's Office 555 Independence Drive Medina, Ohio 44256

Dear Sheriff Grice,

This letter formally and publicly commends Sergeant Douglas Clinage, Deputies Matthew Montgomery, and **Control of the Medina County Sheriff's Office for** their exceptional collaboration in providing mutual assistance to the Cleveland Metroparks police department. On September 8, 2022, Officer Gunkelman of the Cleveland Metroparks police department was conducting surveillance of the area in the Hinckley Reservations at Whipp's Ledges due to reports of several incidents regarding the damage of signs and other park property due to gunshots.

While patrolling the area, he observed a vehicle with four individuals exiting the vehicle and proceeding to open the trunk of the vehicle. From his position at the northwestern corner of the retaining wall, he heard gunshots and placed a call to dispatch for mutual aid. After a series of shots, Officer Gunkelman was able to secure the vehicle and the individuals at gunpoint while waiting for additional units to respond promptly.

Due to the unfortunate incident, our department required additional officers and resources to assist in easing the violent interactions of the four suspects involved in the multi-shots fired at the Hinckley Reservations. Sergeant Clinage's, Deputies Montgomery's, and proactive patrol techniques and professionalism deserve to be recognized for their support and assistance in de-escalating the situation without incident.

The actions of your officers reflect the officers' character, training, and experience, as well as the caliber of personnel employed by the Medina County Sheriff's Office. Please extend our heartfelt congratulations on a job well done. Their commitment to assisting others in challenging times did not go unnoticed.

Respectfully,

K. My J Stillman

Kelly J. Stillman Chief of Police

Subject: Church at the Lake From: Kevin Ross <kross@ohmedinaco.org> Date: 8/23/2021, 12:55 PM To: Ben Taylor <btaylor@ohmedinaco.org>, _____@medinaco.org> CC: Terry Grice <tgrice@ohmedinaco.org>, Carol Diekman <cdiekman@medinaco.org>

Gentlemen,

I received a call from Keith Reidel today. He wanted to let me know what a great job both of you did Friday night, handling the homeless female at the Church on the Lake. Thank you for your Professionalism and Determination to help this young lady in need. Mr. Reidel was impressed with the way you handled this incident. Keep up the great work. This will be placed in your personnel files.

Respectfully,

Captain Kevin J. Ross

RE: Outside Employment

Terry Grice <tgrice@ohmedinaco.org> Fri 7/5/2024 2:30 PM

To @ohmedinaco.org> Cc:Jodi Mitchell <jmitchell@ohmedinaco.org>

Dep.

These are all approved. I will ask Jodi to place this in your file.

Thanks.

Sheriff Terry Grice Medina County Sheriff's Office 555 Independence Dr. Medina, OH 44256

From: @ohmedinaco.org> Sent: Thursday, July 4, 2024 12:09 AM To: Terry Grice <tgrice@ohmedinaco.org> Subject: Outside Employment

Sheriff,

Following our conversation in person, my outside employments are as follows.

Trailer repair, service and sales.

Ice Cream Consession sales

I also have a few investment properties. Let me know if those need specified.

With respect,

Patrol Division Medina County Sheriff's Office 330-725-6631

Sent via the Samsung Galaxy Note10+ 5G, an AT&T 5G smartphone Get <u>Outlook for Android</u>

Medina County Sheriff's Office COUNTY SELF-INSURED WORKERS' COMPENSATION

TO: All MCSO Employees

The Medina County Commissioners have implemented a County Self-Insured Workers' Compensation Program.

If you are injured on the job, your supervisor will provide you with an *Injury Reporting Kit* with includes a *Workers' Compensation Identification Card*. You will also find an *INSTANT ACCESS Card* in the kit, this card is to be used for initial medications prescribed for your workers compensation injury.



Date

Copy to Employee Original to Personnel File



EMPLOYEE RIGHTS AND RESPONSIBILITIES UNDER THE FAMILY AND MEDICAL LEAVE ACT

Basic Leave Entitlement

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- for incapacity due to pregnancy, prenatal medical care or child birth;
 to care for the employee's child after birth, or placement for adoption or foster care;
- to care for the employee's spouse, son, daughter or parent, who has a serious health condition, or
- for a serious health condition that makes the employee unable to perform the employee's job

Military Family Leave Entitlements

Eligible employees whose spouse, son, daughter or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered servicemember during a single 12-month period. A covered servicemember is: (1) a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness*, or (2) a veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness.*

*The FMLA definitions of "serious injury or illness" for current servicemembers and veterans are distinct from the FMLA definition of "serious health condition".

Benefits and Protections

During FMLA leave, the employer must maintain the employee's health coverage under any "group health plan" on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave

Eligibility Requirements

Employees are eligible if they have worked for a covered employer for at least 12 months, have 1,250 hours of service in the previous 12 months*, and if at least 50 employees are employed by the employer within 75 miles.

*Special hours of service eligibility requirements apply to airline flight crew employees.

Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition Other conditions may meet the definition of continuing treatment.

Use of Leave

An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the employer's operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

Substitution of Paid Leave for Unpaid Leave

Employees may choose or employers may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with the employer's normal paid leave policies.

Employee Responsibilities

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days notice is not possible, the employee must provide notice as soon as practicable and generally must comply with an employer's normal call-in procedures.

Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

Employer Responsibilities

Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

Unlawful Acts by Employers

FMLA makes it unlawful for any employer to:

- interfere with, restrain, or deny the exercise of any right provided under FMLA, and
- discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

Enforcement

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

FMLA section 109 (29 U.S.C. § 2619) requires FMLA covered employers to post the text of this notice. Regulation 29 C.F.R. § 825.300(a) may require additional disclosures.



For additional information: 1-866-4US-WAGE (1-866-487-9243) TTY 1-877-889-5627 WWW.WAGEHOUR.DOL.GOV



Acknowledgement of Receipt of Auditor of State

Fraud Reporting System Information

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

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

By signing below you are acknowledging the **Medina County Sheriff's Office** has provided you information about the Fraud-Reporting System as described by Section 117.103(A) of the Revised Code, and that you read and understand the information provided. You are also acknowledging that you have received and read the information regarding Section 124.341 of the Revise Code and the protections you are provided as a classified or unclassified employee if you use the before-mentioned Fraud Reporting System.

I, ______ have read the information provided by my employer regarding the Fraud-Reporting System operated by the Ohio Auditor of State's office. I further state that the undersigned signature acknowledges receipt of this information.

Printed Name / Unit Number



Effective 5/14/2008

Medina County Network Use Policy Including Network, Internet, & Email Access

A copy of this document is available at: http://intraweb.medinaco.net/listings/email/internet_email_policy.pdf

Medina County strongly recommends to all department heads, supervisors, and elected officials that their departments and offices use a County email address for all County business. As outlined in the document below, Medina County has implemented a retention policy which adheres to the Public Records Act in effect as of September 29, 2007.

Medina County provides computer equipment, software, and internet access to its employees for governmental purposes only. Users of equipment must adhere to strict guidelines, outlined in the following document. Medina County may modify these regulations at any time, providing proper notification to all users.

1) On-Line Conduct / Use of the System

- The user agrees not to publish on or over the system any information which violates or infringes upon the rights of any other person, or any information which would be abusive, profane, or sexually offensive to the reasonable person.
- The user agrees not to publish any advertising or solicitation of other members to use goods or services.
- The user agrees not to use the facilities and capabilities of the system to conduct any business or solicit the performance of any activity which is prohibited by law or which is contrary to this or any other County policy.
- Internet access shall not be used for the solicitation of money for religious or political purposes.
- The user will not seek to benefit personally or permit others to benefit personally by any confidential information which has come to said user by virtue of his/her position in the County.
- Internet access is for County business only. The user is granted permission to utilize the County's
 internet/Intranet access account only on County-owned equipment, for County purposes.
- Internet access shall not be used for recreational purposes, including computer games.
- Medina County does not condone the use of objectionable materials. The user therefore specifically
 agrees not to submit, publish, or display any defamatory, inaccurate, abusive, obscene, profane,
 sexually oriented, threatening, racially offensive, or otherwise illegal materials.
- The user will not encourage the use, sale, or distribution of controlled substances.
- Transmission of material, information, or software in violation of any local, state, or federal law is also prohibited.
- The user agrees to indemnify Medina County for any losses, costs, or damages, including attorney fees
 incurred relating to, or arising out of, any breach of this agreement by said user.
- System administrators, office holders, and department heads reserve the right to monitor all activity on County-owned computers.
- All requests to monitor web usage must be submitted via the form located at: <u>http://intraweb.medinaco.net/backbone/request.html</u>.
- System administrators, office holders, and department heads reserve the right to immediately terminate the account of a user who misuses the system.
- All requests to terminate/block any account must be submitted via the form located at: <u>http://intraweb.medinaco.net/backbone/request.html</u>.

2) Electronic Discovery and E-mail Retention

- Please refer all questions pertaining to Records Retention to your Office's appointed Public Records Officer.
- All employees handling County records, including electronic records, must be mindful of legal standards imposed upon their office in matters of records retention and electronic discovery.
- Any County public official or County employee who reasonably anticipates the office, or any of its
 officials or employees becoming a party or who is a party to a lawsuit "must suspend [the office's] routine
 document retention/destruction policy [in as far as it pertains to the employee and/or official] and put in

Effective 5/14/2008

place a 'litigation hold' to ensure the preservation of **relevant documents**," even where such documents may be of benefit to an adversary in the pending or threatened litigation. Zubulake IV. The appropriate County official should contact the email administrator immediately to facilitate the 'litigation hold' on email, at <u>mailadmin@medinaco.org</u>.

- Accessible archives to relevant electronic evidence (i.e., actively used for information retrieval) should be subject to the litigation hold. Zubulake IV.
- Any archives containing the documents of a key player to existing or threatened litigation must be preserved and accessible. Zubulake IV.
- Since the penalties for the wrongful destruction of relevant evidence in pending or threatened litigation, including electronic evidence, can be sizable, any employee who violates this policy by wrongfully destroying electronic evidence which may be subject to pending or anticipated litigation may be subject to disciplinary action in addition to any penalties imposed by a court of law for the wrongful spoliation (destruction) of evidence.
- Medina County will automatically archive a copy of every incoming and outgoing email transmitted on/via the County email system for a minimum period of two years. At yearly intervals the email archives will be purged after consulting both the County Commissioner's and County Prosecutor's Offices in order to preserve any archives under 'litigation hold'.
- All County Departments and/or individuals not utilizing the County email system must make similar arrangements with their email service provider to provide access to all sent and received email for a minimum period of two years, and beyond according to the applicable statute of limitations. To obtain verification of whether a particular email address utilizes the County email system please visit: http://intraweb.medinaco.net/listings/email/new_email.htm or email mailadmin@medinaco.org.
- All email not falling under the categories of "Unsolicited Unrelated to office functions" or "Personal -Unrelated to office functions" must be retained for a minimum of two years.

3) Licensed Software / Copyrighted Materials

- The user shall not install, upload, or download any software on County equipment without prior approval of the elected official or department head.
- Copyrighted materials, not owned or licensed by the County must not be placed on any computer or system without authorization from the elected official or department head. All copyright laws must be observed. Any violation of applicable copyright law is an express violation of this policy.

4) Additional Allowances for Email and Messaging Services

- County computers and their software are owned or licensed by the County, including the words written
 with them and time spent using them.
- Email transmissions can and will be monitored by the elected official, department head, or other appropriate government official.
- Any request for the monitoring of email must be submitted via the form located at: <u>http://intraweb.medinaco.net/backbone/request.html</u>.
- Any request for the retrieval of email archives must be submitted via the form located at: <u>http://intraweb.medinaco.net/backbone/request.html</u>. All retrieved archives, excluding those for monitoring purposes, will be forwarded to the County employee who was the originator or intended recipient of the original email for review against this policy. It is the responsibility of the employee to forward any pertinent correspondence to other parties.
- The Email system will be administered according to the policies developed by the Computer Department, County Engineer's Office in cooperation with the Medina County Commissioner's Office and Medina County Data Processing Board.

5) Additional Allowances for Mobile Systems Including Laptop Computers

- Any access to the Medina County Network is restricted to County owned equipment only, including any and all remote access to County network services.
- · All County supplied laptop computers must also be configured as such to comply with the stipulations of

Effective 5/14/2008

the Medina County Telecommuting Policy, available at http://intraweb.medinaco.net/listings/remote_access/R-A_Policy.pdf, as such devices are easily removed and used beyond the reach of the implemented County network security and protection.

Any computer system capable of connecting to a wireless network must also have a County Data Board
approved client installed and properly configured to prevent communication on both wired and wireless
networks concurrently, such as, <u>"Cisco Secure Services"</u>. While it is not the intent of Medina County to
provide wireless access, the existence of wireless networks external to the County mandates this step.
The installation and configuration of the software will be performed by the current network support
contractor for a per-incident charge.

6) Alternate Internet Access Provision

- In an attempt to provide Internet access to conduct County business for devices owned by entities
 outside of Medina County or by persons not employed by Medina County. The Alternate Internet Access
 connection is not for public use.
- · Access is for individuals not employed by Medina County.
- All use must be for the purposes of daily County business and requires adherence to the current Network Use Policy, excluding sections 2, 4, 5, & 7.
- Any wireless access point and client connections must adhere to the current Medina County Data Board Wireless Access Policy or WPA2 16 random character PSK changed quarterly.
- Any connection must be by way of a network switch port that is properly provisioned for Alternate Internet Access.
- All network traffic utilizing Alternate Internet Access will share a limited, maximum bandwidth of 10% of the current County Internet connection or 2Mb/s, whichever is less.
- The Alternate Internet Access connection is for Internet access only, all other access is prohibited.
- All connections may be subject to monitoring without further notice.

7) VIOLATIONS OF THE POLICY MAY RESULT IN DISCIPLINARY ACTION!

I have read and I understand Medina County's Internet and Email Policy, and agree to assume the responsibilities as outlined

Employee Printed Name ERMA+

Elected Official / Dept Supervisor

Employee Signature

-1 5 2021 Date

Supervisor Signature

Department

MADY

MEDINA COUNTY COMMISSIONERS Human Resources Department



NOTICE OF STATE LAW CHANGE

To:	All Employees
From:	Holly Muren, HR Director
Date:	September 2, 2016
Re:	Medical Marijuana & Medina County Alcohol and Drug Policy

On June 8, 2016, Ohio Sub HB 523 was enacted, which authorizes certain health providers to prescribe limited types of medicinal marijuana to qualifying patients. Ohio's medical marijuana law that takes effect on September 8, 2016. Medina County has established and maintains an Alcohol and Drug Policy that is unaffected by the Ohio Sub HB 523 or Ohio's medical marijuana law taking effect.

Medina County has a zero-tolerance policy for employees who are under the influence of illegal drugs or alcohol while at work. Employees who are using marijuana with a valid prescription or authorized by Ohio law <u>are not exempt</u> from this policy in any way. The use of marijuana with or without a valid prescription or as authorized by law will be treated the same as the use of all other illegal drugs or the abuse of legal drugs. Employees using illegal drugs, including marijuana for any purpose including medicinal, are still subject to all provisions of this policy and may be terminated for such use.

Employees are advised of the following:

1. Medina County does not permit or accommodate an employee's use, possession, or distribution of medical marijuana;

2. Medina County may refuse to hire or may discharge, discipline or take other action against an individual because of that person's use, possession, or distribution of medical marijuana;

3. An employee who tests positive for or refuses to submit to a drug test may be disqualified for compensation and benefits under the Ohio Workers' Compensation Act;

4. Because use, possession or distribution of marijuana is a violation of the Alcohol and Drug Policy, employees who are discharged for those reasons will be considered to have been discharged for just cause for purpose of unemployment compensation or other post-termination pay or benefits.

The Alcohol and Drug Policy continues to apply regardless of whether the employee's use, possession, or distribution of marijuana was obtained/conducted in Ohio or other states.

ACKNOWLEDGMENT

By signing below, I acknowledge that I have read and understand this Memorandum regarding Medical Marijuana & the Alcohol and Drug Policy. I also reaffirm my acknowledgement of the Alcohol and Drug Policy and agree

0113-20

Signature

Date

Medina County Sheriff's Office

LOCKER ISSUE AND RECEIPT



Combination l	_ock#	_
Comb Right	Left	Right _

Application for Medina County Sheriff's Office Photo ID

Name	-
Division	KOAD PATROC
Unit Number	
Position	Deputy Shariff
DOB	
Height	
Hair Color	
Eye Color	
ls this a new issu	ne? Yes No
	lying for a replacement card, please turn in your old card at the time of the Please return this form to administration, and they will schedule you time for your ID to be processed.

Please complete the following:

Thank you,

The Administration



Office of Ohio Attorney General Ohio Peace Officer Training Academy Officer Record



OPOTA London Campus 1650 State Route 56 SW P.O. Box 309 London, OH 43140 Phone: 740-845-2700

Medina County Sheriff's Office, ID

Appointment History*

Agency	Employee Status	Start Date	End Date	Separation Reason	
Medina County Sheriff's Office	Full-time				

Basic Academy Records

School Number	School	Start Date	End Date	Exam Date	Certificate Number	Certificate Date	Appointed By	Appointed Date
	Medina County Law Enforcement Training Academy				1		Medina County Sheriff's Office	

OPOTA Advanced Training Records**

Course Title	Start Date	End Date	
	No Records Found		

LMS Training Records

Date Completed	Course Title	Officer Number	Officer	
6/12/2024	NIBIN Overview			
6/5/2023	Part 3 - Legal Updates 2023			
6/4/2023	Part 2 - Legal Updates 2023			
6/4/2023	National Center for Missing & Exploited Children Harnessin Resources Seminar	g		

Date Completed	Course Title	Officer Number	Officer	
6/4/2023	Response to Mass Violence and Mass Protest Seminar			
6/3/2023	Arrest, Search, and Seizure 2023			
6/3/2023	Part 1 - Legal Updates 2023			
2/27/2023	Ohio School Threat Assessment			
12/15/2022	Vicarious Trauma			
11/28/2022	Effective Communication and Safe Interaction with Persons in Crisis			
10/26/2022	Mental Health Response			
10/3/2022	Ohio Public Records Law			
10/3/2022	Domestic Violence Legal Updates			
10/3/2022	New and Updated Criminal Charges			
9/27/2022	Ohio Forfeiture Laws			
9/27/2022	Medical Marijuana			
9/27/2022	Hazing			
9/27/2022	Hate Crimes			
9/17/2022	Use of Restraints			
9/17/2022	Custodial Interrogation			
9/17/2022	Concealed Firearm Carry Changes			
9/4/2022	Officer Wellness Seminar			
8/31/2022	Use of Deadly Force and Legal Guidelines			
8/31/2022	Trauma and the Brain			
8/31/2022	Qualified Immunity			
8/26/2022	Objective Reasonableness			
8/25/2022	Critical Thinking in Use of Force Situations			
8/21/2022	BCI Lethal Use of Force and OIS Investigations			

Date Completed	Course Title	Officer Number	Officer	
8/2/2022	Sexual Assault Investigations			
8/2/2022	Responding to Sexual Assault			
7/29/2022	Crisis Intervention			
7/29/2022	Biological Evidence Collection for Sexual Assaults			

Training Records

Certificate Date	Unit	Certificate Type	Specialty	Renewal Date
		Patrol Related	Criminal Apprehension,	11/1/2024
		Special Purpose	Tracking, Article Search, Cocaine, Heroin, Methamphetamines and their derivatives	11/1/2024

*The appointment records listed above reflect the appointed and separation information reported to OPOTC pursuant to section 109.761 of the Revised Code. Neither OPOTC, nor its staff, has independent knowledge of the information contained in these records.

**The advanced training records listed above reflect ONLY THOSE trainings the peace officer scheduled through OPOTA. Records reflecting advanced training conducted by the peace officer's agency, or conducted by another organization, are not maintained by OPOTC. Requests for any such records should be directed to the peace officer's employing agency or the organization who conducted the training.