



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



2022-1090

Officer-Involved Critical Incident - Cora Baughman

Investigative Activity: Records Obtained, Records Reviewed

Involves: Portage County Deputy ██████████

Activity Date: 6/6/2022

Authoring Agent: Arvin E. Clar #127

Narrative:

On Friday, May 27, 2022, Ohio Bureau of Criminal Investigation (BCI) Special Agent (SA) Arvin Clar (Clar) received the personnel file for Deputy ██████████ (██████) from Portage County Sheriff's Office (PCSO) Detective Trent Springer. SA Clar reviewed the personnel file and noted the following:

Employment

██████ was appointed to a full-time Portage County Deputy Sheriff on September 6, 2021.

Ohio Peace Officer Training Academy/Commission Records received from PCSO reveal that ████████ obtained the Ohio Peace Officer Training Commission (OPOTC) on October 4, 2019.

██████ attended and successfully completed the Peace Basic Training Program at Kent State and graduated on October 4, 2019.

██████ shows that on December 16, 2017, he received a Bachelor of Arts degree from Kent State University.

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

Firearm Qualification Records

On August 31, 2021, ████████ successfully qualified in firearm proficiency, using a Smith and Wesson 9MM, MP semiautomatic handgun.

Disciplinary Records

The personnel records of ████████ received from PCSO, do not indicate any discipline-related issues or complaints involving the use of force.

██████'s personnel file and training records have been attached to this report and placed in this file for future reference.

██████'s 2021 range qualification file has been attached to this report and placed in this file for future reference.

**Portage County Sheriff's Office
Annual Firearms Re-qualification**

Name [REDACTED] Unit # [REDACTED] DOB: 8 / 23 / 94

Handgun Make Smith & Wesson Model M&P9 Serial # [REDACTED] Caliber 9mm

Stage:	Rnd Cnt	Time	Score # 1	Score # 2
1. Reactive Shooting	3	5	3	
2. Failure Drill	3	6	3	
3A. Dominant Hand	4	8	4	
3B. Non Dominant Hand	4	7	1	
4. Emergency Reload	6	12	6	
5. Medium Range	3	8	3	
6. Long Range	2	8	2	

Pistol Total Score 22

Shotgun Make Remington Model 870 Serial # _____ Caliber 12

Stage	Score # 1	Score # 2
1. Contact Distance. 2 rnds 4 sec cond 3	2	
2. 20 Feet 2 rnds 3 sec cond 2	2	
3. 30 feet 2 rnds 3 sec cond 2	2	
4. 50 feet select load two slugs and fire 20 sec	2	

Shotgun Total Score 8

Rifle Make _____ Model _____ Serial # _____ Caliber _____

Stage	Score # 1	Score # 2
1. 15 feet 3 rnds, 4 sec		
2. 20 feet 3 rnds, 4 sec head area		
3. 30 feet 3 rnds, 6 sec 2 rnds chest, 1 rnd head		
4. 50 feet 2 rnds, 5 sec non dominant side		
5. 75 feet 1 rnd, 1.5 sec		
6. 75 feet 5 rnds 12 sec, 2 rnds loaded then reload		
7. 150 feet 3 rnds 10 sec		

Rifle Total Score _____

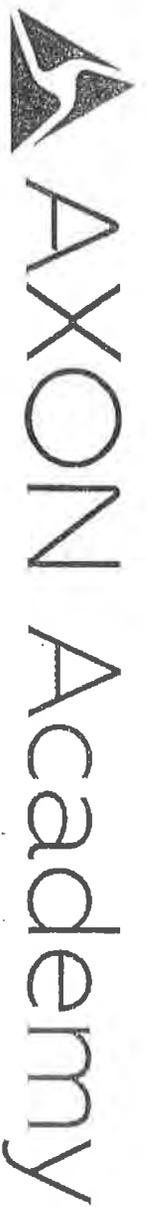
I [REDACTED] (PRINT) have read, understand and will abide by the Portage County Sheriff's

Office Response to Resistance Policy [REDACTED]

Officer: [REDACTED] Date: 8/31/21

Instructor: Det Frank Springer Date: 08 31 21

Instructor: _____ Date: _____



CERTIFICATE OF
COMPLETION

AWARDED TO



OF
The Trumbull County Sheriff's Office

IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF
TASER X26 & X26P CEW V.21
USER CERTIFICATION COURSE
TRAINING CERTIFICATE

ISSUED March 25th, 2020

Instructor: 
Raymond A. Deluga





PRINCIPLES · ACCOUNTABILITY

INTEGRITY · HONOR · RESPECT

PORTAGE COUNTY SHERIFF'S OFFICE

Bruce D. Zuchowski

May 16, 2022

Deputy [REDACTED]

Warren, Ohio 44483

Deputy [REDACTED]

As a result of the incident that occurred on Saturday, May 14, 2022, you are being placed on paid administrative leave until further notification of your status.

If you have any questions, please feel free to contact me.

Sincerely,

Bruce D. Zuchowski
Sheriff

COPY



PORTAGE COUNTY SHERIFF'S OFFICE

CONFIDENTIALITY AGREEMENT

As an Employee/ Intern of the Portage County Sheriff's Office, I understand that I may learn of or have access to information (verbal, written, or electronic) which is personal, safety-sensitive or otherwise confidential in nature. Such information includes, but is not limited to incident reports, NCIC information, Computer Aided Dispatch, and other law enforcement or Police Services related information. I agree to maintain the confidentiality of such information and will not divulge it to anyone for any purpose without the express consent or direction of my supervisor or other management of the Sheriff's Office personnel, nor will I present anything I will see, hear or read through any form of social media.

I further understand and agree that I am prohibited from using any of this information for my personal use or benefit or for any other non-Police Services business related purposes.

I understand and agree that my failure to comply with the confidentiality requirement set forth in this Confidentiality Agreement is grounds for discipline up to and including termination of employment or of any Internship commitment. Additionally, the County may seek other criminal or civil sanctions or damages as may be allowed by law.

The restrictions of the Confidentiality Agreement regarding disclosure and use of information shall continue to apply after termination of employment or conclusion of an internship program with the Portage County Sheriff's Office.

I have read and understand this agreement and agree to comply with it in every respect.

Dated this 19th day of August, 2021.

Signature

Printed Full Name

Witness

PORTAGE COUNTY SHERIFF'S OFFICE

Law Enforcement

1.02

RECEIPT FOR POLICIES & PROCEDURES MANUAL

I, _____, hereby acknowledge receipt of one (1) CD copy of the *Portage County Sheriff's Office Policies & Procedures Manual*.

It is understood that this CD copy of the Portage County Sheriff's Office manual is entrusted to me for safekeeping, study, and compliance. The updating, maintenance, and safe storage of this manual are my personal responsibility.

I understand this manual contains restricted law enforcement data, and that release of its contents to anyone not having an official need to know may place residents of this community, and officers and employees of this agency at risk.

I will retain this manual in my possession or safekeeping, and will not allow it to be copied or reproduced in any manner without prior authorization from a superior authorized to permit such duplication. Further, I will immediately report to the Sheriff or Sheriff's Designee any attempt made by those outside of the agency to borrow, acquire a copy, view, or use this manual. Likewise, I will immediately report the loss of this manual or portions of its contents to the Sheriff or the Sheriff's Designee.

I affirm my commitment to honor this agreement this 19th day of August, 2021.

Printed name

Signature

Printed name of Witness

Witness' Signature





PORTAGE COUNTY SHERIFF'S OFFICE
Law Enforcement

Policies and Procedures UPDATE

Subject: UPDATED Firearms/Non-Lethal Training & Proficiency Demonstration	Policy Number: 3.08
Issue Date: 9-15-2014	Revision Date: 1-7-2019
Approval Authority Title and Signature: Sheriff David W. Doak	

The attached Policy & Procedure will replace Firearms Training & Proficiency Demonstration (3.08).

This updated policy is effective as of 1-7-19.

Please sign and date below acknowledging you have received a copy.

Thank you.

Signature

8/19/21

Date

Print Name

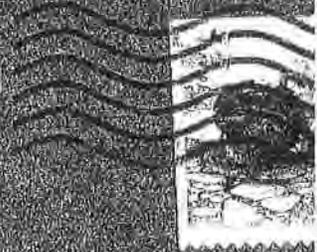
RESTRICTED LAW ENFORCEMENT DATA

This data is proprietary and shall not be duplicated, disclosed, or discussed, without the written permission of this agency. Data subject to this restriction is contained throughout this publication.



Mr. and Mrs. Frank Casper
11935 Mantua Center Road
Mantua, OH 44255

CLEVELAND OH 440
18 JAN 1966 PM 1



Chief Deputy Ralph Spedden
Portage County, Washington
6240 In person PH
RAVENNA, OH
44066

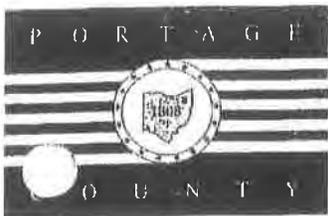
POSTAGE WILL BE PAID BY ADDRESSEE

I would like to Thank Deputy [REDACTED] # [REDACTED] for his kindness & comforting words on 12-30-00. My Mom, who was 90, passed away and Deputy [REDACTED] was patient, professional, and kind, and really helped me.

A Deputies profession is chosen not because it is easy, but because it is hard, challenging and honorable. You and your fellow officers put your lives on the line every day, and yet are capable of empathy & kindness. You all deserve a raise! Thank - you for making the world a better place!!

Sincerely,

Tami Casper



PORTAGE COUNTY EMPLOYMENT APPLICATION

EQUAL OPPORTUNITY EMPLOYER

APPLICANTS REQUIRING REASONABLE ACCOMMODATION WITH THE APPLICATION AND/OR INTERVIEW PROCESS, PLEASE NOTIFY THE PERSON FROM WHOM YOU OBTAINED THIS APPLICATION. ALL APPLICANTS ARE CONSIDERED FOR POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, MEDICAL CONDITION OR DISABILITY, VETERAN/RESERVE/NATIONAL GUARD STATUS, GENETIC INFORMATION OR ANY OTHER LEGALLY PROTECTED STATUS.

DO NOT USE "SEE RESUME" IN LIEU OF COMPLETING THIS APPLICATION. RESUMES MAY BE INSERTED.

PORTAGE COUNTY MAY REFUSE EMPLOYMENT CONSIDERATION IF THE APPLICATION IS NOT FILLED OUT COMPLETELY AND ACCURATELY. PLEASE SUBMIT ONE APPLICATION PER POSITION. NOTE THAT THIS APPLICATION FORM WILL BECOME A PUBLIC RECORD UPON SUBMISSION TO PORTAGE COUNTY AND WILL BE SUBJECT TO APPROPRIATE RECORDS REQUESTS. THE COUNTY DOES NOT MAINTAIN ON FILE UNSOLICITED APPLICATIONS. APPLICATIONS ARE FILED ACCORDING TO SPECIFIC JOB OPPORTUNITIES.

PLEASE TYPE OR PRINT CLEARLY USING INK

POSITION APPLIED FOR: Deputy Sheriff DATE OF APPLICATION: 8/11/21

HOW DID YOU LEARN OF THIS OPENING? Online

TYPE OF EMPLOYMENT DESIRED: FULL-TIME PART-TIME SEASONAL TEMPORARY INTERNSHIP

SALARY DESIRED: _____ DATE AVAILABLE: As Soon As Possible

SHIFT DESIRED: Any Available ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

NAME: _____
LAST FIRST MI

ADDRESS: _____ HOME PHONE: (____) _____
Warren OH 44483 CELL PHONE: _____
CITY STATE ZIP

HAVE YOU EVER BEEN EMPLOYED BY A GOVERNMENT AGENCY IN THE STATE OF OHIO? YES NO

IF SO, WHEN? _____ PREVIOUS AGENCY: _____
(ATTACH ADDITIONAL SHEETS IF NECESSARY) PREVIOUS JOB TITLE: _____

DO YOU HAVE RELATIVES EMPLOYED BY PORTAGE COUNTY? YES NO
IF YES, PROVIDE NAMES AND RELATIONSHIP TO YOU: _____

(HIRING OF RELATIVES MAY BE PRECLUDED WHEN ONE RELATIVE WOULD SUPERVISE OR HAVE DISCIPLINARY AUTHORITY OVER ANOTHER, WOULD AUDIT THE WORK OF ANOTHER OR WHEN A CONFLICT OF INTEREST WOULD EXIST BETWEEN THE RELATIVE AND THE EMPLOYEE.)

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A MINOR TRAFFIC OFFENSE OR A MINOR MISDEMEANOR VIOLATION? (DO NOT REPORT ANY SEALED CONVICTIONS UNLESS IT BEARS A DIRECT AND SUBSTANTIAL RELATIONSHIP TO THE POSITION FOR WHICH YOU ARE APPLYING.) YES NO
(A CONVICTION MAY NOT AUTOMATICALLY EXCLUDE YOU FROM CONSIDERATION.)
IF YES, PLEASE EXPLAIN: _____

Unit
 *Start date*
8/11/21

FOR COUNTY USE ONLY:
APPLICATION REVIEWED BY: _____
DATE RECEIVED: _____
Meets Min Requirements: Yes _____ No _____
Interview: Yes _____ No _____
Interviewed by: _____



DAVE YOST
OHIO ATTORNEY GENERAL



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

Copy to Col & Clerk 9/1/21

NOTICE OF PEACE OFFICER APPOINTMENT

Check Box if: Correction to Record Name Change OSHP Trooper to Peace Officer
(OSHP certificate must be attached)

1. 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.
4. 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		1. Name (Last) (First) (Middle)	2. Social Security Number (last 5 only)
3. Previous Name(s) or Alias (Last) (First) (Middle)			
4. Birth date (mm/dd/yyyy) 08-23-1994	5. Officer's Individual Email Address		6. Phone Number
7. Home Mailing Address (#/Street/PO Box) (City) (State) (Zip Code) (County Name) Warren Ohio 44483 Trumbull			
8. Basic Training Academy (Academy Name) (Academy Number) (Dates of Training) (Only complete if this is the officer's first appointment or OSP)			

AGENCY INFORMATION		9. Agency Name Portage County Sheriff's Office	
10. Reporting Authority's Email Address smcglathlin@portageco.com		11. Agency Phone Number 330-298-2055	
12. Agency Mailing Address (#/Street/PO Box) (City) (Zip Code) (County Name) 8240 Infirmary Road Ravenna 44266 Portage			

APPOINTMENT INFORMATION (Complete Date, Status and ORC)		13. New Appointment Date 09 / 06 / 2021	14. Status Change Date / /
15. Select New Status <input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxiliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal For the purpose of this form, full-time means those in active pay status (including those on vacation, sick, bereavement, personal or administrative leave; on compensatory time or holidays) receiving compensation and benefits for 40 hours in a work week or 80 hours in a 14-day period.			
16. Select New ORC			
<input type="checkbox"/> City Full-Time/Part-Time (737.02)	<input type="checkbox"/> City Auxiliary/Reserve/Special (737.051)	<input type="checkbox"/> City Chief (737.02)	
<input type="checkbox"/> Village Full-Time/Part-Time/Special (737.16)	<input type="checkbox"/> Village Auxiliary/Reserve (737.161)	<input type="checkbox"/> Village Chief (737.15)	
<input type="checkbox"/> Township Police Officer (505.49)	<input type="checkbox"/> Township Constable (509.01)	<input type="checkbox"/> Other Chief - List ORC/Charter	
<input type="checkbox"/> Other - List ORC/Charter	<input checked="" type="checkbox"/> Deputy Sheriff (311.04)	<input type="checkbox"/> Sheriff (311.01)	

ATTESTATION OF REPORTING AUTHORITY

I have carefully read this document and fully understand its contents and I sign it of my own free will and volition. I attest that the information provided on this document is true and correct and is based on my personal knowledge or inquiry. I further understand and acknowledge that submission of falsified records is a criminal violation.

17. Signature of Reporting Authority <i>Bruce D. Zuchowski</i>	18. Printed Name and Title Bruce D. Zuchowski, Sheriff	19. Date 09, 06, 2021
20. Signature of Witness <i>Sherri L. McGlothlin</i>	21. Printed Name (First, Middle, Last) Sherri L. McGlothlin	22. Date 09, 06, 2021

Officer Name (Last)

(First)

(Middle)

SSN (last 5 only)

23. OATH OF OFFICE

I do solemnly swear or affirm that I will support the Constitution and Laws of the United States of America, the Constitution and Laws of the State of Ohio, and Laws and Ordinances of the political subdivision to which I am appointed and to the best of my ability will discharge the duties of this office.



Bruce D. Zuchowski
Signature of Appointing Authority

Bruce D. Zuchowski

Name of Appointing Authority (Typed or Printed Legibly)

Sheriff

Title of Appointing Authority (Typed or Printed Legibly)

OHIO PEACE OFFICER APPOINTMENT HISTORY

Please list all prior appointments. Use additional copies of page 2, as needed, to list the entire appointment history.

24. Appointed By (Agency Name and County): Trumbull County Sheriff's Office	25. From(mm/dd/yyyy): 10 / 07 /2019	To(mm/dd/yyyy): 09 / 03 /2021
26. Appointment Status (Check Appropriate Box) <input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxilliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal		
27. Appointed By (Agency Name and County):	28. From(mm/dd/yyyy): / /	To(mm/dd/yyyy): / /
29. Appointment Status (Check Appropriate Box) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxiliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal		
30. Appointed By (Agency Name and County):	31. From(mm/dd/yyyy): / /	To(mm/dd/yyyy): / /
32. Appointment Status (Check Appropriate Box) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxiliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal		
33. Appointed By (Agency Name and County):	34. From(mm/dd/yyyy): / /	To(mm/dd/yyyy): / /
35. Appointment Status (Check Appropriate Box) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxiliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal		
36. Appointed By (Agency Name and County):	37. From(mm/dd/yyyy): / /	To(mm/dd/yyyy): / /
38. Appointment Status (Check Appropriate Box) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxiliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal		
39. Appointed By (Agency Name and County):	40. From(mm/dd/yyyy): / /	To(mm/dd/yyyy): / /
41. Appointment Status (Check Appropriate Box) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Auxiliary <input type="checkbox"/> Reserve <input type="checkbox"/> Special <input type="checkbox"/> Seasonal		



PORTAGE COUNTY SHERIFF'S OFFICE

Bruce D. Zuchowski

Letter of Accommodation

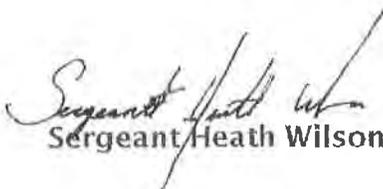
To: Deputy [REDACTED] # [REDACTED]

Date: December 29th, 2021

On December 29th, 2021, you were dispatched to an active house fire. Upon your arrival you learned that a woman was still inside, half of the house would soon be fully engulfed. Quick in your actions you sprinted to a neighboring house and grabbed a ladder with the hopes of helping the trapped woman escape through a second story window. Upon your return with the ladder, the smoke generated by the fire, was too great for you to see or to even breathe. The Fire Department soon arrived and relieved you of your efforts. You, continued to help with the concerned family members who were on scene.

Eventually, the Fire Department would recover the woman in a second story bedroom. I want you to know that your efforts did not go unnoticed, and I am proud of the commitment and courage that you displayed during this critical incident.

Respectfully,

 #112
Sergeant Heath Wilson #112

Cc: Sheriff Zuchowski #101
Chief Ralph Spidalieri #102
Personnel File



PORTAGE COUNTY SHERIFF'S OFFICE

Bruce D. Zuchowski

Letter of Accommodation

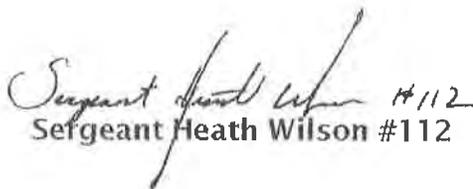
To: [REDACTED] # [REDACTED]

Date: January 27th, 2022

On January 27th, 2022, you came upon a traffic crash where a SUV was overturned and on its roof. After learning that there was an unresponsive female inside you, without hesitation, made entry into the car through the driver's side window, and began CPR. You performed CPR until the Mantua-Shalersville Fire Department arrived at the scene and relieved you. You further assisted in the extrication of the victim from the vehicle.

Sadly, I learned that the victim passed away that evening. Considering this tragedy, I would like to take a moment to applaud your efforts in rendering aid to a helpless victim in critical need.

Respectfully,


Sergeant Heath Wilson #112

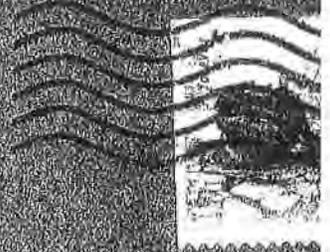
Cc: Sheriff Zuchowski #101
Personnel file



Mr. and Mrs. Frank Casper
 11935 Mantua Center Road
 Mantua, OH 44255

CLEVELAND OH 44102

15 JUL 2003 PM 6 L



Chief Deputy Ralph Spedden
 Portage County Jail
 6740 Imperial Way Rd
 Ravenna, OH

4/4/03

NO POSTAGE
 NEEDED
 IF MAILED
 IN THE
 UNITED STATES

POSTAGE WILL BE PAID BY ADDRESSEE

STATE OF OHIO RAVENNA TICKET NUMBER: 06700166040620221254
REFERENCE # 1G5YAFW
PHONE NUMBER (330) 990-2625
James V Czerpak COUNTY OF RESIDENCE: Summit
STREET 3256 Mogadoro Rd
CITY, STATE Akron, OH ZIP 44312

DATE OF ARREST MONTH/DAY/YEAR TIME am/pm

COURT ACTION
[] GUILTY [] RELEASED TO OTHER AUTHORITY
[] NOT GUILTY []

OFFICER'S NOTES

Operator License table with columns: OPERATOR LICENSE #, STATE ID, BIRTH DATE, ISSUE DATE, STATE, CLASS, EXPIRES, ENDORSEMENT, RESTRICTIONS, SSN#, SEX, HEIGHT, WEIGHT, EYES, HAIR, RACE, FINANCIAL RESPONSIBILITY PROOF.

Redar # Cal. Times
Laser # Cal. Times
AV Record #
If juvenile, parents names:
Address: , OH
School: Grade:

TO DEFENDANT: COMPLAINT ON Apr 06, 2022 AT 1120 AM, YOU
Created Passenger/Parked/Walked Passenger Motorcycle Bicycle Other
VEHICLE: YEAR 2006 MAKE Ford MODEL 2Door
COLOR White LICENSE # P136820 STATE OH
UPON A PUBLIC HIGHWAY, NAMED SR-303 DIRECTION Westbound
AT/NEAR TR LIMERIDGE (M.P)
IN THE Township OF Freedom IN Portage
COUNTY (NO.), 67 STATE OF OHIO AND COMMITTED THE FOLLOWING OFFENSE(S):

The defendant was driving westbound on State Route 303, near Limeridge Road and appeared to be driving faster than the 55MPH speed limit. Python Radar #1349 was activated and a reading of 70MPH was obtained. A traffic stop was then initiated. Upon speaking with the defendant he was observed to not be using a seat belt and confirmed that he was driving without one. A LEADS inquiry of the vehicle also revealed that the license plate had expired on 03/28/22. The defendant was then issued a citation for no seat belt and the expired tags and was given a warning for the speed violation.

Offense details form including: SPEED, OVI, DRIVER LICENSE, SAFETY BELT, OTHER OFFENSE, PAVEMENT, VISIBILITY, WEATHER, TRAFFIC AREA, CRASH, and ACCOMPANYING CRIMINAL CHARGE.

*GREAT JOB!
1ST PCSO
E-CITE

WITNESSES:
Name Address Telephone
Name Address Telephone

ARREST NOTIFICATION
VIOLATION: R.C. SECTION:
SCALE LOCATION: [] PLATFORM [] PORTABLE
AMOUNT OF OVERLOAD:
OVERLOADED ON: [] Single Axle [] Tandem [] Inner Bridge
[] Gross - Length if gross FL
PUCO #
DOT #
10
Street Address
City
State
Zip
Permit Holder or Company Name or Vehicle Owner Name

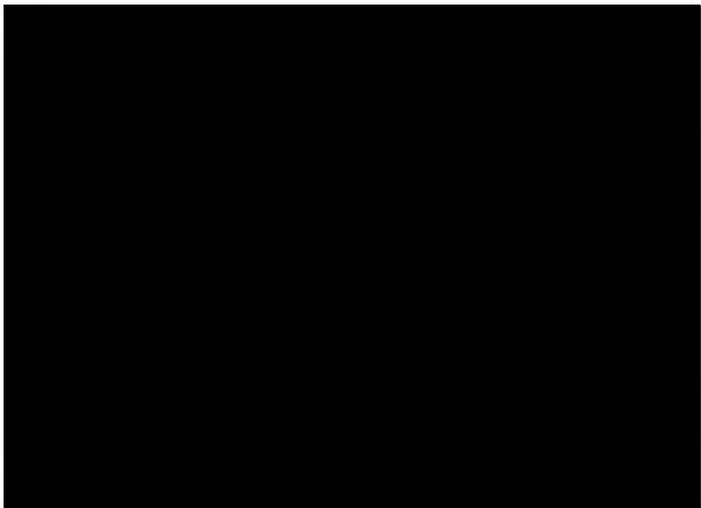
NOTIFICATION OF ARREST ONLY.
NO FURTHER ACTION IS NECESSARY

TO DEFENDANT: SUMMONS You are summoned and ordered to appear on 04/20/2022 at 1315 PM in Ravenna Portage Mun Court at 203 W. Main Street, RAVENNA, OH, 44266.

If you fail to appear at this time and place you may be arrested or your license may be cancelled. This summons served personally to the defendant on Apr 06, 2022. This issuing/charging law enforcement officer states under the penalties of perjury and falsification that he/she has read the above complaint and that it is true.

PERSONAL APPEARANCE REQUIRED [] Yes [X] No
Duty []
Issuing Law Enforcement Officer
Name AS ABOVE

Table with columns: Court Code, Badge, Precinct, Zone. Values: 6720, PCSO, NORTH.





OHIO PEACE OFFICER TRAINING COMMISSION & THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that



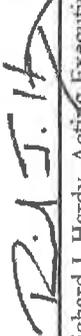
has completed the Ohio
Peace Officer Basic Training Program
Conducted by
Kent State University

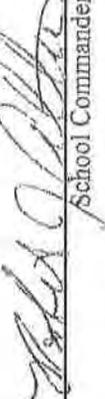
Awarded On
October 04, 2019


Dave Most
Attorney General


Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission




Richard J. Hardy, Acting Executive Director
Ohio Peace Officer Training Commission


School Commander

BAS19-010 191267

Kent State University

This is to certify that
the Board of Trustees of Kent State University,
upon the recommendation of the Faculty, has conferred upon

[REDACTED]

the degree of
Bachelor of Arts

with all the honors, rights and privileges of that degree.
Presented this sixteenth day of December
two thousand and seventeen.

Lang Rallock
Chairman, Board of Trustees

Edw. M. Roberts
University Registrar



Frank Wane
President of the University

W. H. Hall
Dean, College of Arts and Sciences

Franklin Senior High School

Teacher General

School District

Cromwell County Public Schools



has satisfactorily completed the course of study prescribed by the State of Ohio for this institution, a certificate of the same rank and is therefore entitled to the

Diploma

In whose presence and signature are persons affixed at Cincinnati, Ohio, this month of May, one thousand two hundred

Anthony J. [unclear]
Rosa [unclear]

Paul H. Small
Paul G. [unclear]

Michael W. [unclear]

County Superintendent of Schools

KENT STATE
UNIVERSITY
TRUMBULL



August 10, 2021

RE: [REDACTED]

TO WHOM IT MAY CONCERN:

It is with great pleasure and much pride that I write this letter of recommendation for former Cadet and now Deputy [REDACTED]

[REDACTED] is a wonderful young man who comes from a family with a long line of law enforcement history from his grandfather, his father and his brothers. He has more than proudly carried on that tradition in his training with me here at the Kent State Police Academy, Class BAS 19-010 where he was an outstanding student and example to his fellow cadets to his service with the Trumbull County Sheriff's Office where he proudly serves the citizens of Trumbull County.

[REDACTED] was a strong student and a pleasure to have in the academy and would be an asset to you and your department should you chose to hire him. I cannot recommend him strongly enough as he is a wonderful young man and excellent person overall.

If you would like further information please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Sallie Kurilchick".

Sallie Kurilchick
Clerical Specialist
Kent State Police Academy
and Public Safety Training
(330) 675-7666

SK/



PORTAGE COUNTY SHERIFF'S OFFICE

Bruce D. Zuchowski

The Portage County Sheriff has offered full-time Deputy Sheriff employment to [REDACTED]

As Austin will be a lateral transfer from Trumbull County Sheriff's Office, Sheriff Zuchowski is at this time waiving the polygraph for [REDACTED]



Bruce D. Zuchowski, Sheriff

8-19-2021
Date



PORTAGE COUNTY SHERIFF'S OFFICE

Bruce D. Zuchowski

August 20, 2021

[REDACTED]
Warren, Ohio 44483

RE: Appointment as Full-time Deputy Sheriff

Dear Deputy [REDACTED]:

Welcome to the Portage County Sheriff's Office! We are pleased you have agreed to join our agency as a **full-time Deputy Sheriff**, at a rate of pay of \$28.64 per hour. Your starting date will be September 6, 2021, at 8:00 a.m., and your unit number will be [REDACTED].

To qualify with your firearm, you need to contact Detective Trent Springer at 330-351-2821. Keep in mind that you **cannot carry a firearm** until you have been sworn in and qualified with your weapon.

You will serve a one-year probationary period. While on probation and during your course of employment, it will be necessary for you to abide by the department's operating policies and procedures as well as general rules of conduct, etc. while carrying out your sworn duty as a Peace Officer. Also, during your employment, you are required to maintain a valid Ohio driver's license and a telephone number known to your supervisor, Personnel, and Dispatch.

You will need to contact Ron Rost, Finance Manager, regarding your uniform allowance. He will also provide you with tax and retirement forms to complete for payroll purposes. Also, contact CCW to get fingerprinted.

As a full-time employee, you are eligible for county health benefits, effective your first full-time day of work. You will need to make an appointment with Susan Lynn at the County Human Resources Department (330-297-5326) to discuss the various programs.
Good luck in your career.

Sincerely,

Bruce D. Zuchowski
Sheriff

cc: Supervisor Det. Trent Springer
Ron Rost, Finance Manager Personnel File