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

2026-2448
Officer Involved Critical Incident - 613 Orange Street, Conneaut, Ohio 44030 Ashtabula County (L)

Investigative Activity:	Personnel File Review – [redacted]
Involves:	[redacted] (S)
Activity Date:	07/29/2026
Activity Location:	BCI – Richfield
Authoring Agent:	**SA Daniel P. Boerner #135**

Narrative:

On Monday, June 29, 2026, Ohio Bureau of Criminal Investigation (BCI) Special Agent (SA) Dan Boerner (SA Boerner) received the personnel file for [redacted] from Conneaut Police Department (CPD) Chief Michael Bertolasio. On Wednesday, July 29, 2026, SA Boerner reviewed the personnel file and noted the following:

Personnel File

[redacted] personnel file consisted of commendation(s), employment records, and training records.

[redacted] was sworn in as a full-time Conneaut Police Department (CPD) police officer on [redacted]

Prior to his employment with the CPD, [redacted] was employed by the Ashtabula County Sheriff's Office and Ashtabula City Police Department.

No discipline related to the use of force was located within the personnel files.

Range Qualification Records

On 06/23/2026, [redacted] completed the annual firearm qualification with a Glock 19, 9mm, SN: [redacted]. This was the same firearm used during the incident.

Ohio Peace office Training Academy/Commission Records

In addition to the records received from CPD, SA Boerner also obtained the Ohio Peace Officer Training Commission (OPOTC) and Ohio Peace Officer Training Academy (OPOTA) records for [redacted]. The OPOTC/OPOTA records indicated the following:

1. Basic Training

This document is the property of the Ohio Bureau of Criminal Investigation and is confidential in nature. Neither the document nor its contents are to be disseminated outside your agency except as provided by law - a statute, an administrative rule, or any rule of procedure.

[redacted] completed the Ohio Peace Officer Training Academy at the Ashtabula County Police Training School [redacted] [redacted] was certified as a peace officer on [redacted] (Cert# [redacted]).

2. Advanced Training

[redacted] completed the following courses:

- Close Quarter Concepts for Patrol, 11/25/2025
- Search and Seizure/Search Warrants, 10/10/2024
- Officer Safety, 10/10/2024
- Responding to Mental Health Issues, 10/10/2024
- Legal Updates, 10/10/2024
- Response to Active Threat, 07/07/2022
- Use of Force, Liability, and Standards, 12/08/2020
- Judgmental Firearms Simulator, 10/02/2014

It should be noted that the above-listed courses are not a complete list. Only those courses deemed to be most relevant were noted above.

The personnel file, OPOTC/OPOTA records, and qualification records were uploaded to Matrix and attached to this report. Please refer to the attachments for further details.

References:

None

Attachments:

1. [redacted] Personnel - OPOTA Records

This document is the property of the Ohio Bureau of Criminal Investigation and is confidential in nature. Neither the document nor its contents are to be disseminated outside your agency except as provided by law - a statute, an administrative rule, or any rule of procedure.

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

[redacted] **Conneaut Police Department, ID:** [redacted]

Appointment History*

Agency	Employee Status	Start Date	End Date	Separation Reason
Conneaut Police Department	Full-time	[redacted]	[redacted]	
Ashtabula County Sheriff's Office	Full-time			
Conneaut Police Department	Full-time			
Ashtabula County Sheriff's Office	Full-time			
Ashtabula Police Department	Full-time			
Conneaut Police Department	Reserve/Auxiliary			

Basic Academy Records

School Number	School	Start Date	End Date	Exam Date	Certificate Number	Certificate Date	Appointed By	Appointed Date
[redacted]	Ashtabula County Police Training School	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
	SACS Consulting and Training Center, Inc.							

Advanced Certifications

Certification Date	Certification	Officer Number	Officer
No Records Found			

OPOTA Advanced Training Records**

Course Title	Start Date	End Date
Close Quarter Concepts for Patrol (16 Hrs.)	11/24/2025	11/25/2025
Human Trafficking Investigations (OCIC)	8/27/2025	8/28/2025
Sexual Assault Investigations (OCIC)	8/26/2025	8/27/2025
Opiate Overdose Death Investigations Training Seminar	11/17/2017	11/17/2017
Policing in the 21st Century	6/21/2016	6/21/2016
Judgmental Firearms Simulator	9/30/2014	10/2/2014
Judgmental Driving Simulator	9/30/2014	10/2/2014
Precision Rifle - Workshop	9/24/2014	9/24/2014
Electronic Surveillance Workshop	9/18/2014	9/18/2014
Precision Rifle Operator	7/22/2013	7/26/2013
Managing Criminal Investigations	5/29/2012	5/30/2012
Electronic Surveillance	1/30/2012	1/31/2012
Law Enforcement Officer Flying Armed	2/25/2011	2/25/2011
State and Local Law Enforcement Training Symposium (SLLETS)	11/2/2010	11/4/2010
Senate Bill 77	8/2/2010	8/2/2010
MCTFC - Interviews and Body Language	4/27/2010	4/27/2010
ADAP/SFST Instructor Update	1/22/2009	1/22/2009
Crime Scene And Evidence Photography	6/23/2008	6/27/2008
Basic Photography	4/7/2008	4/11/2008
Arrest, Search & Seizure	11/19/2007	11/20/2007
Bloodstain Evidence	10/15/2007	10/19/2007
ADAP Instructor (Alcohol Detection And Prosecution)	6/4/2001	6/8/2001
Spanish For Law Enforcement (Level I)	2/7/2001	2/9/2001
Bulletproof Mind	1/22/2001	1/22/2001

Course Title	Start Date	End Date
ODH Alcohol Testing - BAC Datamaster Senior Operator	11/6/2000	11/7/2000
ADAP (Alcohol Detection And Prosecution)	6/5/2000	6/8/2000

LMS Training Records

Date Completed	Course Title	Officer Number	Officer
1/17/2026	Clandestine Drug Lab Recertification/Refresher		
9/8/2025	Ethics Law - 2025		
7/9/2024	Clandestine Drug Lab Recertification/Refresher		
1/4/2021	Clandestine Drug Lab Recertification/Refresher Module 7		
1/4/2021	Clandestine Drug Lab Recertification/Refresher Module 6		
1/3/2021	Clandestine Drug Lab Recertification/Refresher Module 5		
12/30/2020	Clandestine Drug Lab Recertification/Refresher Module 4		
12/30/2020	Clandestine Drug Lab Recertification/Refresher Module 3		
12/30/2020	Clandestine Drug Lab Recertification/Refresher Module 2		
12/30/2020	Clandestine Drug Lab Recertification/Refresher Module 1		
12/10/2020	Procedural Justice and Police Legitimacy		
12/10/2020	Disability Training for First Responders		
12/9/2020	Dose of Reality: We've Got a Problem (Module 2 of 5)		
12/9/2020	Use of Force, Liability and Standards		
12/8/2020	Ethics and Professionalism		
12/8/2020	Terrorism Awareness		
12/8/2020	Street Smart Series: Concealment		
12/8/2020	Missing Children Clearinghouse		
12/8/2020	Crimes Against Children		
12/7/2020	Victims with Special Needs		

Date Completed	Course Title	Officer Number	Officer
12/7/2020	Interviewing the Crime Victim	[redacted]	[redacted]
7/24/2020	OARRS for Law Enforcement		
7/17/2020	CODIS Arrestee and Convicted Offender DNA Collections		
4/20/2020	Trooper Coates Killer Interview		
3/20/2020	Child Abuse and Neglect		
2/14/2020	Medical Fraud		
1/27/2020	Biological Evidence Collection and Retention		
1/17/2020	Investment Fraud		
1/13/2020	Cybercrime		
1/3/2020	Location and Recovery		
12/27/2019	2017 Legal Update: Issues in Interrogations and Confessions		
3/29/2017	Ohio Human Trafficking		
3/29/2017	Responding to Human Trafficking		
3/22/2017	Missing Persons		
3/20/2017	Companion Animal Encounters		
9/21/2016	Awareness of Human Trafficking		
10/16/2015	Domestic Violence Legal Updates: Ohio Domestic Violence Laws		
10/7/2014	Finding Words		

Canine Training Records

Canine School	Certificate Date	Canine Unit	Certificate Type	Specialty	Renewal Date
No Records Found					

***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.**

*****Officer separation reasons are displayed only for separations that occurred on 7/1/2021 or later. For separations prior to 7/1/2021 this information may be obtained by submitting a public records request through the OPOTA Public Records Portal under "Request other records".**

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

June 01, 2026

by completing the following exam:

Inquiry Test

This certificate is good through

June 01, 2027

City of Conneaut
Division of Police
Serving Since 1902

Michael Bertolasio
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelbertolasio@conneautpd.com

Documentation of Boat Training and Operations

On May 13th 2026 the following members of the Conneaut Police and Conneaut Fire Department attended a boat operations training hosted by Ohio Division of Natural Resources / Watercraft. This was to establish dedicated operators of the CPD Marine Vessel and Marine 1. The training was a total of 6.5 hours and held at Geneva State Park:

1. Michael Bertolasio (CPD)
2. Michael Sullivan (CPD)
3. Curt Distel (CPD)
4. [redacted]
5. Chris Gardner (CFD)
6. Chad Carter (CFD)
7. Anthony Nelson (CFD)
8. Nick Colby (CFD)

Michael Bertolasio
Chief of Police
Conneaut Police Department

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

This is to certify that

[redacted]

has successfully met the prescribed program requirements for

Clandestine Drug Lab Recertification/Refresher Course

January 16, 2026

Dave Yost
Ohio Attorney General

Thomas Quinlan, Executive Director
Ohio Peace Officer Training Commission

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

2025 EMPLOYEE ATTENDANCE CALENDAR

Absence Codes

- [T] Tardy
- [H] Holiday
- [P] Partial Hrs. Worked
- [L] Layoff
- [ ] _____
- [V] Vacation

Red number denotes unexcused absence.

Black number denotes excused absence.

No.	Reason
1.	Lack of work
2.	Sick (Employee)
3.	Family sickness
4.	Accident -self or family - out of plant
5.	Plant injury
6.	Personal
7.	Discipline
8.	Leave of absence
9.	Transportation
10.	No call / No show
11.	Death (family)
12.	Jury/Court

No.	Reason
13.	Birthday
14.	Military
15.	Weather
16.	Medical Appt.
17.	FMLA
18.	Termination
19.	Left Early
20.	Suspension
21.	Unexcused
22.	
23.	
24.	
25.	

Name: [redacted]

Employee #:

Address:

City: State: Zip:

Phone: SS#

Dept. Birth Dat[redacted]

Position: Hire Dat[redacted]

Vacation Time:

JANUARY

[redacted]

FEBRUARY

S	M	T	W	T	F	S	Total
						1	
2	3	4	5	6	7	8	
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28		

MARCH

S	M	T	W	T	F	S	Total

[redacted]

APRIL

S	M	T	W	T	F	S	Total
		1	2	3	4	5	
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
20	21	22	23	24	25	26	
27	28	29	30				

MAY

S	M	T	W	T	F	S	Total

[redacted]

JUNE

S	M	T	W	T	F	S	Total

[redacted]

JULY

S	M	T	W	T	F	S	Total

[redacted]

AUGUST

S	M	T	W	T	F	S	Total

[redacted]

SEPTEMBER

S	M	T	W	T	F	S	Total

[redacted]

OCTOBER

S	M	T	W	T	F	S	Total

[redacted]

NOVEMBER

S	M	T	W	T	F	S	Total
						1	

[redacted]

DECEMBER

S	M	T	W	T	F	S	Total

[redacted]

City of Conneaut
Division of Police
Serving Since 1902

Michael Bertolasio
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelbertolasio@conneautpd.com

Dear Lt. Erwin,

Please accept this as a letter of recommendation in support of [redacted] application for the Ashtabula Regional SWAT Team.

Respectfully,

Michael Bertolasio, Chief of Police

RECEIVED
JAN – 5 2026
By: .....

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-5-2026 __New Hire ✓Change Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number XXX-XX [redacted] Employee # [redacted] Dept [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
✓Other	0	$65.00/mo	SWAT

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature _____

Supervisor Signature MP _____

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2026 __New Hire ✓Change __Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$30.33	$31.23	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___ Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional Comments _____

Employee Signature [redacted] [redacted]

Supervisor Signature _____

Payroll Clerk Signature _____

WORKFORCEQA
Your COMPLIANCE Ally

Workforce QA
2200 South Main Street Suite 475
Salt Lake City, UT, 84115
(801) 503-3400

Trista White
University Hospitals - UH
7956 Tyler Blvd.
MENTOR, OH 44060

Company Region/Location:
City of Conneaut

Medical Review Officer Report

Confidential

Donor:	[redacted]	Donor ID:	[redacted]
Reason for Test:	Post Accident	Specimen ID:	[redacted]
Collection Date:	12/17/2025	Collection Site:	Brown Memorial Hospital 158 W Main Rd CONNEAUT, OH 44030
MRO verification date:	12/22/2025	Laboratory:	MEDTOX

Drugs/Drug Metabolites included in this Testing Panel: 89710

1) 6-ACETYLMORPHINE
2) AMPHETAMINES
3) BARBITURATES
4) BENZODIAZEPINES
5) COCAINE METABOLITE
6) CREATININE, URINARY
7) MARIJUANA (THC) METABOLITE
8) MDMA
9) METHADONE
10) METHAQUALONE
11) NITRITES
12) OPIATES
13) PHENCYCLIDINE (PCP)
14) PROPOXYPHENE
15) URINE pH

Verified Test Result: ****NEGATIVE**** Substance(s):

Comments:

Medical Review Officer: Andrew Holtz D.O.

Andrew Holtz D.O.
2200 South Main Street Suite 475
Salt Lake City, UT, 84115
(801) 503-3400

Conneaut Police Department Promotional Exam Rank

This list was certified by Civil Service on November 28, 2025

- This List will be good the following 2 years:
  - November 28th, 2025 – December 28th 2027

1. [redacted]
2. STITT
3. LARDI

I would like to extend my sincere gratitude to each of you for your active participation in this process. Your time, effort, and commitment to shaping the future of our department are truly valued.

Should you wish to review your individual scores related to this process, please feel free to contact me directly.

Once again, thank you for your dedication and engagement throughout this important initiative. I look forward to continuing our collaboration as we work together to achieve our shared goals and strengthen the success of our department.

"The best executive is the one who has sense enough to pick good men to do what he wants done, and self-restraint enough to keep from meddling with them while they do it." — **Theodore Roosevelt**

V/R,

Michael Bertolasio

Lieutenant / Interim Chief

Conneaut Police Department

Trent [redacted]

EMPLOYEE INCIDENT REPORT

Name of Employee [redacted]

Home address [redacted]

Age [redacted] Sex M ✓ F ____ Job Title [redacted]

Department Connect police

Date of Injury 2-7-24 Time 1547 AM ____ PM ✓

Last day worked 2-6-24 Returned to work 2-8-24

If not returned, estimated lost time NA

Date reported if different than date of injury NA

To whom was injury reported? Sullivan

Description of injury (Be specific - name any objects or substances involved)

While Trying To Assist Preston Hall. Hall Bite [redacted] IN The [redacted]

Part(s) of body injured [redacted]

Name(s) of witness(s) Sullivan, Delisle, Landi, Keasling

Was any medical or emergency treatment necessary? Yes ____ No X

If yes, state name of physician and/or hospital NA

Is this an aggravation of a previous injury? Yes ____ No X

Have you ever had a similar injury? Yes X No ~~X~~ MS

By signing this form I expressly waive all provisions of law which forbid any person or persons who heretofore did or who hereafter may medically attend, treat or examine me or who may have information of any kind which may be used to render a decision in my claim for injury/disease of ____, 20 24, from disclosing such knowledge to my employer and/or Comp Management, Inc. (representative of employer). A copy of this form will serve same as the original.

Employee signature [redacted] Date 2-8-24

Printed name [redacted]

Supervisor's signature [redacted] SS Date 2-7-24

Printed name Michael T. Sullivan

Supervisor's signature does not constitute certification of a claim.

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

January 12, 2024

MEMO TO: Sgt. Curtis Distel, [redacted] Det. Jesse Lardi, Ptl. Daniel Pinkett, Ptl. Johnathan Ball

RE: Incident [redacted]

I would like to take this opportunity to commend each of you for your hard work and dedication to Law Enforcement in the apprehension and arrest of Gary Ratliff. Mr. Ratliff, a career criminal, was taken into custody before committing a crime that most-likely would have went unsolved.

Apprehending Mr. Ratliff so quickly most likely prevented the potential of a more dangerous scenario, taking into account he was concealing a firearm. Your efforts will not be forgotten.

Very truly yours,

Michael Colby, Chief

Michael Colby
Chief of Police

COPY

Cc: James Hockaday, City Manager

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

To: Sgt. Distel, Sgt. Sullivan, [redacted] Det. Lardi

From: Chief Colby

Date: January 4, 2022

Re: Robert Van Alphen

Gentlemen,

I wanted to commend each of you for the thorough investigation into the above noted matter. As indicated, Van Alphen will be sentenced to a 25-year prison term as a result of his actions. It's disturbing to think of how many more children may have been victimized had you not taken the time to complete this investigation properly and without haste. Again, nice job!

Sincerely,

Michael Colby, Chief

Michael Colby
Chief of Police

Cc. City Manager
file

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

[redacted]

[redacted]
City of Conneaut Police Department
294 Main St.
Conneaut, OH 44030

Dear [redacted]

I am writing to indicate that you have successfully completed your one (1) year probationary period for the position of Patrolman for the City of Conneaut Police Department.

Effective [redacted] you are hereby granted your permanent appointment as Patrolman for the City of Conneaut Police Department.

Congratulations, and I will look forward to continuing to work with you.

Sincerely,

Michael Colby, Chief

Michael Colby
Chief of Police

Cc: James Hockaday, City Manager
Finance Office
File

checkr

Report completed on Nov 19, 2024 5:06 PM UTC

Consumer Report for [redacted]

Requestor Company
City of Conneaut, Ohio

Status
Clear

California Candidates/Employees Only: The report does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records, and information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report. An investigative consumer reporting agency shall provide a consumer seeking to obtain a copy of a report or making a request to review a file, a written notice in simple, plain English and Spanish setting forth the terms and conditions of his or her right to receive all disclosures, as provided in Section 1786.26.

Sólo para los Candidatos/Empleados de California: En el informe no se garantiza la exactitud o veracidad de la información en cuanto al tema de la investigación, sino sólo que se ha copiado exactamente de los registros públicos, y la información generada como resultado del robo de identidad, incluyendo las pruebas de una actividad delictiva, podría estar incorrectamente asociada con el consumidor que sea el sujeto del informe. Una agencia investigadora de informes de crédito deberá suministrarle a un consumidor que trate de obtener una copia de un informe o solicite revisar un archivo una notificación por escrito en inglés y español lisos y llanos, en la que se establezcan los términos y las condiciones de su derecho a recibir toda la información, como se dispone en la Sección 1786.26.

Report Summary

Motor Vehicle Report	Nov 19, 2024	Clear

Report information

Clear

First name
[redacted]

Middle name
[redacted]

Last name
[redacted]

Date of birth
[redacted]XXXX

Phone number
[redacted]

Zipcode

Email
[redacted]

Social Security Number
-

Driver license
[redacted]

Previous driver licenses
-

Compliance Geos
OH

Work Locations
US - OH

Created at
Nov 19, 2024 5:06 PM UTC

Completed at
Nov 19, 2024 5:06 PM UTC

Motor Vehicle Report

Clear

[redacted] (OH)

License Status	VALID
License Type	PASSENGER
License Class	D
License Expiration Date	[redacted]
License Issued Date	-
License First Issued Date	

Restrictions

NONE

Conneaut City Police

Serving Since 1902

Michael Bertolasio
Acting Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelbertolasio@conneautpd.com

Human Resource Department
06-16-2025
Ref: ***Employee discipline action***

Please be advised June 16th, 2025; [redacted] is serving a **One (1) day unpaid suspension** for an infraction of the Conneaut Police Department Polices and Procedures.

V/R

Michael Bertolasio
Acting Chief / Lieutenant
Conneaut Police Department

DAVE YOST
OHIO ATTORNEY GENERAL

Civilian Identification
Office 877-224-0043
Fax 740-845-2633

P.O. Box 365
London, OH 43140
www.OhioAttorneyGeneral.gov

April 28, 2022

BB

CONNEAUT POLICE DEPARTMENT
CHIEF COLBY
294 MAIN ST
CONNEAUT OH 44030

CRIMINAL HISTORY RECORD CHECK
AUTHENTICATION NO. [redacted]
ICN. [redacted]

A criminal history record check was conducted on the applicant listed below.

There are no convictions on file for this applicant.

Applicant Name: [redacted]
Date of Birth:
Social Security Number:
Completion Date: April 27, 2022
Reason Fingerprinted: LAW

Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI is authorized to provide only information relating to criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication meets specific criteria listed in Ohio Revised Code section 109.57(E)(2) & (3).

4QL509

DAVE YOST
OHIO ATTORNEY GENERAL

Civilian Identification
Office 877-224-0043
Fax 740-845-2633

P.O. Box 365
London, OH 43140
www.OhioAttorneyGeneral.gov

April 28, 2022

BB

CONNEAUT POLICE DEPARTMENT
CHIEF COLBY
294 MAIN ST
CONNEAUT OH 44030

CRIMINAL HISTORY RECORD CHECK
NO BCI CONVICTIONS ON FILE
AUTHENTICATION NO. [redacted]

The Ohio Bureau of Criminal Investigation (BCI) has completed a criminal history record check on the applicant listed below.

When authorized by law, an individual may have their criminal history sealed. In the event that an applicant has a sealed record, certain parties are permitted to receive such information to determine whether an applicant is legally disqualified from performing specific work.

Sealed records are disclosed based upon the **Reason Fingerprinted**, as submitted on the background check transaction and listed below. Sealed criminal histories will be provided in a manner consistent with the reason that the records are requested, regardless of the destination of the result.

There are no convictions on file with this office for this applicant.

Name: [redacted]
Date of Birth:
SSN:
BCI Completion Date: April 27, 2022
Reason Fingerprinted: LAW

This letter is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI is authorized to provide only information relating to criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication meets specific criteria listed in Ohio Revised Code section 109.57(E)(2) & (3).

4QL509

2024 EMPLOYEE ATTENDANCE CALENDAR

Absence Codes

- [T] Tardy
- [H] Holiday
- [P] Partial Hrs. Worked
- [L] Layoff
- [ ] _____
- [V] Vacation

Red number denotes unexcused absence.

Black number denotes excused absence.

No.	Reason
1.	Lack of work
2.	Sick (Employee)
3.	Family sickness
4.	Accident -self or family - out of plant
5.	Plant injury
6.	Personal
7.	Discipline
8.	Leave of absence
9.	Transportation
10.	No call / No show
11.	Death (family)
12.	Jury/Court

No.	Reason
13.	Birthday
14.	Military
15.	Weather
16.	Medical Appt.
17.	FMLA
18.	Termination
19.	Left Early
20.	Suspension
21.	Unexcused
22.	_____
23.	_____
24.	_____
25.	_____

Name: [redacted]

Employee #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ SS# _____

Dept. _____ Birth Date [redacted]

Position: _____ Hire Date: [redacted]

Vacation Time: _____

JANUARY

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28	29	30	31				

FEBRUARY

[redacted]

MARCH

S	M	T	W	T	F	S	Total
					1	2	

[redacted]

APRIL

[redacted]

MAY

[redacted]

JUNE

[redacted]

JULY

[redacted]

AUGUST

[redacted]

SEPTEMBER

[redacted]

OCTOBER

[redacted]

NOVEMBER

[redacted]

DECEMBER

[redacted]

Please fill out and return to JoAnn by 10-11-2024

Name: [redacted]

Physical Address: [redacted]

Mailing Address (if different from above):

City: [redacted] State: OH Zip: [redacted]

Cell Phone Number: [redacted]

Emergency Contact #1: [redacted]

Relationship: [redacted]

Phone Number: [redacted]

Emergency Contact #2: [redacted]

Relationship: [redacted]

Phone Number: [redacted]

Conneaut City Police

Serving Since 1902



RECEIVED 9/24/24

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: Michaelcolby@conneautpd.com

September 23, 2024

Re: Sergeant's Examination

Dear Chief,

Please let this letter serve as notice that I intend to take the upcoming Sergeant's examination.

Respectfully,

[redacted]

SEP 23 PM 5:21

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

To: Sergeant Michael Bertolasio, Officer Timothy Rose, Officer Jesse Lardi, [redacted] Officer Kristin Keasling, Dispatcher Julius Petro

From: Chief Michael Colby

Re: Pursuit

Date: October 3, 2024

I am writing to express my sincere gratitude for you exceptional dedication and and professionalism during your response to the pursuit involving your quick thinking, composure under pressure, and commitment to protecting our community were truly exemplary. The Conneaut Police Department is fortunate to have officers like you who consistently go above and beyond to ensure our safety and well-being.

Thank you once again for your outstanding service.

Sincerely,

Michael Colby, Chief

Michael Colby, Chief of Police

Cc: City Manager

2023 EMPLOYEE ATTENDANCE CALENDAR

Absence Codes

- [T] Tardy
- [H] Holiday
- [P] Partial Hrs. Worked
- [L] Layoff
- [ ] _____
- [V] Vacation

Red number denotes unexcused absence.

Black number denotes excused absence.

No.	Reason
1.	Lack of work
2.	Sick (Employee)
3.	Family sickness
4.	Accident -self or family - out of plant
5.	Plant injury
6.	Personal
7.	Discipline
8.	Leave of absence
9.	Transportation
10.	No call / No show
11.	Death (family)
12.	Jury/Court
13.	Birthday
14.	Military
15.	Weather
16.	Medical Appt.
17.	FMLA
18.	Termination
19.	Left Early
20.	Suspension
21.	Unexcused
22.	_____
23.	_____
24.	_____
25.	_____

Name: [redacted]

Employee #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ SS# _____

Dept. _____ Birth Date: [redacted]

Position: _____ Hire Date: _____

Vacation Time: _____

JANUARY

S	M	T	W	T	F	S	Total
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30	31					

FEBRUARY

[redacted]

MARCH

S	M	T	W	T	F	S	Total
			1	2	3	4	
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30	31		

APRIL

[redacted]

MAY

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	
7	8	9	10	11	12	13	

[redacted]

JUNE

S	M	T	W	T	F	S	Total
				1	2	3	

[redacted]

JULY

[redacted]

AUGUST

[redacted]

SEPTEMBER

[redacted]

OCTOBER

[redacted]

NOVEMBER

S	M	T	W	T	F	S	Total
			1	2	3	4	

[redacted]

DECEMBER

S	M	T	W	T	F	S	Total
					1	2	

[redacted]

William R. Niemi
Sheriff

Ashtabula County Sheriff's Office

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047
ashtabulacountysheriff.org

Non Emergency (440) 576-0055
Emergency 911
County 911 FAX (440) 576-5915
Civil Division FAX (440) 576-3573

July 28, 2023

To: Chief Michael Colby

RE: ***Letter of Appreciation***

I want to recognize and commend your agency for your assistance in the investigation into the shooting that occurred on Eureka Rd. on June 14, 2023. The shooting took the life of Wheeler and injured Wesley Moore. Members of your department assisted detectives with the Ashtabula County Sheriff's Office in locating suspects, gathering evidence and interviewing witnesses.

I want to specifically recognize [redacted] and Jesse Lardi who worked tirelessly in assisting the Ashtabula County Sheriff's Office on this investigation. As a result, the case was presented to the Grand Jury and five individuals, Vincent Ballard, Douglas Montgomery, Alexander Hoke, Melissa Hickerson, and Olivia Peters were indicted on a number of charges. The investigation is not completed and charges against others may be forthcoming.

Respectfully,

Sheriff William Niemi
Ashtabula County Sheriff's Office

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

January 12, 2024

MEMO TO: Sgt. Curtis Distel, [redacted] Det. Jesse Lardi, Ptl. Daniel Pinkett, Ptl. Johnathan Ball

RE: Incident [redacted]

I would like to take this opportunity to commend each of you for your hard work and dedication to Law Enforcement in the apprehension and arrest of Gary Ratliff. Mr. Ratliff, a career criminal, was taken into custody before committing a crime that most-likely would have went unsolved.

Apprehending Mr. Ratliff so quickly most likely prevented the potential of a more dangerous scenario, taking into account he was concealing a firearm. Your efforts will not be forgotten.

Very truly yours,

Michael Colby, Chief

Michael Colby
Chief of Police

Cc: James Hockaday, City Manager

2022 EMPLOYEE ATTENDANCE CALENDAR

Absence Codes

- T Tardy
- H Holiday
- P Partial Hrs. Worked
- L Layoff
- ☐ _____
- V Vacation

Red number denotes unexcused absence.

Black number denotes excused absence.

No. Reason

1. Lack of work
2. Sick (Employee)
3. Family sickness
4. Accident -self or family - out of plant
5. Plant injury
6. Personal
7. Discipline
8. Leave of absence
9. Transportation
10. No call / No show
11. Death (family)
12. Jury/Court

No. Reason

13. Birthday
14. Military
15. Weather
16. Medical Appt.
17. FMLA
18. Termination
19. Left Early
20. Suspension
21. Unexcused
22. _____
23. _____
24. _____
25. _____

Name [redacted]

Employee #:

Address:

City: State: Zip:

Phone: SS#

Dept. Birth Date [redacted]

Position: Hire Date:

Vacation Time:

JANUARY

S	M	T	W	T	F	S	Total
						1	
2	3	4	5	6	7	8	
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28	29	
30	31						

FEBRUARY

S	M	T	W	T	F	S	Total
		1	2	3	4	5	
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
20	21	22	23	24	25	26	
27	28						

MARCH

S	M	T	W	T	F	S	Total
		1	2	3	4	5	
6	7	8	9	10	11	12	
[redacted]						19	
						26	

APRIL

S	M	T	W	T	F	S	Total
					1	2	
3	4	5	6	7	8	9	
[redacted]							

MAY

S	M	T	W	T	F	S	Total
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
[redacted]							

JULY

S	M	T	W	T	F	S	Total
					1	2	
[redacted]							

AUGUST

S	M	T	W	T	F	S	Total
[redacted]							
28	29	30	31				

SEPTEMBER

S	M	T	W	T	F	S	Total
				1	2	3	
[redacted]							

NOVEMBER

S	M	T	W	T	F	S	Total
[redacted]							

DECEMBER

S	M	T	W	T	F	S	Total
				1	2	3	
[redacted]							

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

TO: **All Police Department Personnel**

FROM: **Chief Colby**

RE: **Police Officer of the year**

I would like to take this opportunity to congratulate [redacted] on being chosen 2021's Officer of the Year. In addition to the effort and quality he asserts as a [redacted] is always willing to assist others when asked. His dedication to this department cannot go unrecognized.

Again, congratulations and keep up the good work. I look forward to your continued dedication and continued years of service.

Michael Colby. Chief

Michael Colby
Chief of Police

2021 EMPLOYEE ATTENDANCE CALENDAR

Absence Codes

- T Tardy
- H Holiday
- P Partial Hrs. Worked
- L Layoff
- ☐ _____
- V Vacation

Red number denotes unexcused absence.

Black number denotes excused absence.

No.	Reason
1.	Lack of work
2.	Sick (Employee)
3.	Family sickness
4.	Accident -self or family - out of plant
5.	Plant injury
6.	Personal
7.	Discipline
8.	Leave of absence
9.	Transportation
10.	No call / No show
11.	Death (family)
12.	Jury/Court

No.	Reason
13.	Birthday
14.	Military
15.	Weather
16.	Medical Appt.
17.	FMLA
18.	Termination
19.	Left Early
20.	Suspension
21.	Unexcused
22.	_____
23.	_____
24.	_____
25.	_____

Name: [redacted]

Employee #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ SS# _____

Dept. _____ Birth Date [redacted]

Position: _____ Hire Date

Vacation Time: _____

JANUARY

S	M	T	W	T	F	S	Total
[redacted]							

FEBRUARY

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28							

MARCH

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28	29	30	31				

APRIL

S	M	T	W	T	F	S	Total
				1	2	3	
4	5	6	7	8	9	10	
11							
18							
25							

MAY

S	M	T	W	T	F	S	Total
						1	
2	3	4	5	6	7	8	

JUNE

S	M	T	W	T	F	S	Total
		1	2	3	4	5	
27	28	29	30				

JULY

S							
				1	2	3	
4	5	6	7	8	9	10	

AUGUST

S	M	T	W	T	F	S	Total
	2	3	4	5	6	7	
8	9	10	11	12	13	14	
				19	20	21	
				26	27	28	

SEPTEMBER

S	M	T	W	T	F	S	Total
			1	2	3	4	

OCTOBER

S	M	T	W	T	F	S	Total
					1	2	

NOVEMBER

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	
7						13	
14						20	
21						27	
28							

DECEMBER

S	M	T	W	T	F	S	Total
			1	2	3	4	
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	

Please fill out and return to JoAnn by 7-16-2021

Name: [redacted]

Physical Address: [redacted]

Mailing Address (if different from above): _____

City: _____ State: _____ Zip: _____

Phone Number: [redacted]

Cell Phone Number: Same

Birthdate: [redacted]

Emergency Contact #1: [redacted]

Relationship: [redacted]

Phone Number: [redacted]

Emergency Contact #2: _____

Relationship: _____

Phone Number: _____

Allergies: _____

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

To: Sgt. Distel, Sgt. Sullivan, [redacted], Det. Lardi

From: Chief Colby

Date: January 4, 2022

Re: Robert Van Alphen

Gentlemen,

I wanted to commend each of you for the thorough investigation into the above noted matter. As indicated, Van Alphen will be sentenced to a 25-year prison term as a result of his actions. It's disturbing to think of how many more children may have been victimized had you not taken the time to complete this investigation properly and without haste. Again, nice job!

Sincerely,

Michael Colby
Chief of Police

Cc. City Manager
file

2020

T = Tardy
P = Partial hrs. Worked
H = Holiday
L = Layoff
V = Vacation

- Red number denotes unexcused absence.
- Black number denotes excused absence.

#	Reason
1	Lack of Work
2	Sick (Employee)
3	Family Sickness
4	Accident – self or family – not at work.
5	Work Injury
6	Personal
7	Discipline
8	Leave of Absence
9	Transportation
10	Unknown (AWOL)

#	Reason
11	Death (Family)
12	Jury - Court
13	Birthday
14	Military
15	Weather
16	Medical
17	Dental
18	Recognition
19	_____
20	_____
21	_____

Employee Name & #: [redacted]

Address: _____

City: _____ ST: ____ Zip: _____

Phone: _____ SSN: _____

Dept. _____ DOB: _____

Position: _____ Hired [redacted]

January

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

February

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

March

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	[redacted]				
15	16					
22	23					
29	30	31				

April

S	M	T	W	T	F	S
		[redacted]				
5	6					
12	13					
19	20					
26	27	28	29	30		

May

S	M	T	W	T	F	S
		[redacted]			1	2
					16	
					23	
					30	

June

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	[redacted]					
14						
21						
28						

July

S	M	T	W	T	F	S
	[redacted]		1	2	3	4
5					10	11
12					17	18
19					24	25
26	27	28	29	30	31	

August

S	M	T	W	T	F	S
						1
2	[redacted]					
9						
16						
23						
30						

September

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

October

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	[redacted]	
25	26	27	28	29		

November

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	[redacted]				
22	23					
29	30					

December

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	[redacted]					
20						
27						

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

[redacted]

[redacted]
City of Conneaut Police Department
294 Main St.
Conneaut, OH 44030

Dear [redacted]

I am writing to indicate that you have successfully completed your one (1) year probationary period for the position of [redacted] for the City of Conneaut Police Department.

Effective [redacted] you are hereby granted your permanent appointment as [redacted] for the City of Conneaut Police Department.

Congratulations, and I will look forward to continuing to work with you.

Sincerely,

Michael Colby, Chief

Michael Colby
Chief of Police

Cc: James Hockaday, City Manager
Finance Office
File

2019

T = Tardy
P = Partial hrs. Worked
H = Holiday
L = Layoff
V = Vacation

- Red number denotes unexcused absence.
- Black number denotes excused absence.

#	Reason
1	Lack of Work
2	Sick (Employee)
3	Family Sickness
4	Accident -- self or family -- not at work.
5	Work Injury
6	Personal
7	Discipline
8	Leave of Absence
9	Transportation
10	Unknown (AWOL)

#	Reason
11	Death (Family)
12	Jury - Court
13	Birthday .
14	Military
15	Weather
16	Medical
17	Dental
18	Recognition
19	_____
20	_____
21	_____

Employee Name & #: [redacted]

Address: _____

City: _____ ST: ____ Zip: _____

Phone: _____ SSN: _____

Dept. _____ DOB [redacted]

Position: _____ Hire[redacted]

January

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

February

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

March

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24 31	25	26	27	28	29	30

April

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June

S	M	T	W	T	F	S
						1
2	[redacted]					
9						
16						
23 30						

July

S	M	T	W	T	F	S
	[redacted]					
7						
14						
21						
28						

August

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

November

S	M	T	W	T	F	S
					1	2
[redacted]						

December

S	M	T	W	T	F	S
1	2	3	4	5	6	7
					13	14
					20	21
					27	28

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

February 19, 2020

MEMO TO: Sgt. Curtis Distel, Sgt. Christopher Mackensen, Ptl. Joseph Schor, Det. Michael Sullivan, Ptl. Daniel Patriarco, Ptl. David Vendetti, [redacted], Ptl. Burlingham, Ptl. Sharpnack, Disp. Carli Gerics and Admin. Asst. Hogle.

SUBJECT: [redacted]

I would like to take this opportunity to commend each of you for your hard work and dedication to law enforcement regarding the traffic crash on Interstate 90 that occurred on February 14th, 2020.

I realize I am late in getting this written notice to each of you, but your efforts have not been forgotten, especially those of you that came in well ahead of your normally scheduled shift. I feel that we were lucky that the crash wasn't more severe than it actually was, but I'm confident in your efforts that it would have been handled the same.

Thank you and keep up the good work.

Sincerely,

Michael M. Colby
Chief of Police

Cc: City Manager
file

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

Steve Hall
771 Mill St.
Conneaut, Ohio
44030

January 15, 2020

Mr. Hall,

Since our discussion at Snap Fitness, I've had the opportunity to sit down and speak with [redacted]. From what I've come to understand your main grievance is to be [redacted] viewing your son's personal file at the Conneaut High School, which he according to you, he readily admitted to.

Rather than write down what [redacted] informed me, I've taken the liberty of attaching his correspondence pertaining the issue. Viewing that letter it would appear to me that he can explain just about all of your concerns, most specifically about viewing the actual file, rather than one incident form. I'm unaware if anyone else was present when [redacted] was alleged to have said he viewed your son's complete file, but an uninvolved independent witness would need to step forward to corroborate your accusation.

The one oversite [redacted] does acknowledge, and takes full responsibility for, is not knowing the employment status of Mr. Holden within the Conneaut Area City Schools District. Other than that, I do not see any mention of anything remotely egregious enough to merit any form of discipline to [redacted] I hope this will settle the matter concerning his allegation of improperly viewing your son's complete file with the school. If you feel it doesn't, or if you're not satisfied with my response in dealing with the matter, please feel free in contacting me at my office.

Sincerely,

Michael Colby, Chief

Michael Colby,
Chief of Police

UNFOUNDED

DAVE YOST
OHIO ATTORNEY GENERAL

Civilian Identification
Office 877-224-0043
Fax 740-845-2633

P.O. Box 365
London, OH 43140
www.OhioAttorneyGeneral.gov

September 10, 2019

RECEIVED
SEP 13 2019
BY:

CONNEAUT POLICE DEPT.
294 MAIN STREET
CONNEAUT OH 44030

CRIMINAL HISTORY RECORD CHECK
NO BCI CONVICTIONS ON FILE
AUTHENTICATION NO [redacted]

The Ohio Bureau of Criminal Investigation (BCI) has completed a criminal history record check on the applicant listed below.

When authorized by law, an individual may have their criminal history sealed. In the event that an applicant has a sealed record, certain parties are permitted to receive such information to determine whether an applicant is legally disqualified from performing specific work.

Sealed records are disclosed based upon the **Reason Fingerprinted**, as submitted on the background check transaction and listed below. Sealed criminal histories will be provided in a manner consistent with the reason that the records are requested, regardless of the destination of the result.

There are no convictions on file with this office for this applicant.

Name:	[redacted]
Date of Birth:	
SSN:	XXX-XX-[redacted]
BCI Completion Date:	September 09, 2019
Reason Fingerprinted:	LAW

This letter is valid for one year from the record check completion date. This letter may be photocopied by the prospective employer and retained by the applicant.

Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI is authorized to provide only information relating to criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication meets specific criteria listed in Ohio Revised Code section 109.57(E)(2) & (3).

4QL509

DAVE YOST
OHIO ATTORNEY GENERAL

Civilian Identification
Office 877-224-0043
Fax 740-845-2633

P.O. Box 365
London, OH 43140
www.OhioAttorneyGeneral.gov

September 10, 2019

RECEIVED
SEP 13 2019
BY:_____

CONNEAUT POLICE DEPT.
294 MAIN STREET
CONNEAUT OH 44030

CRIMINAL HISTORY RECORD CHECK
AUTHENTICATION NO. [redacted]
ICN. [redacted]

A criminal history record check was conducted on the applicant listed below.

There are no convictions on file for this applicant.

Applicant Name:	[redacted]
Date of Birth:	
Social Security Number:	
Completion Date:	September 09, 2019
Reason Fingerprinted:	LAW

Superintendent
Ohio Bureau of Criminal Investigation

Pursuant to Ohio Revised Code section 109.57(E)(2), BCI is authorized to provide only information relating to criminal convictions and guilty pleas. BCI is also only permitted to provide information regarding juvenile adjudications if the adjudication meets specific criteria listed in Ohio Revised Code section 109.57(E)(2) & (3).

4QL509

Officer Name (Last)	(First)	(Middle)	Social Security Number
[redacted]	[redacted]	[redacted]	[redacted]

3. 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.

[redacted] [redacted]
Appointee

Signature of Appointing Authority

JAMES HOCKADAY
Name of Appointing Authority (Typed or Printed Legibly)

CITY MANAGER
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): CONNEAUT POLICE ASHTABULA	25. From(mm/dd/yyyy): [redacted] To(mm/dd/yyyy):
26. Appointment Status (Check Appropriate Box) ____ Full-Time ____ Part-Time ✓ Auxiliary ____ Reserve ____ Special ____ Seasonal	
27. Appointed By (Agency Name and County): ASHTABULA CITY POLICE ASHTABULA	28. From(mm/dd/yyyy): [redacted] 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): ASHTABULA COUNTY S.O. ASHTABULA	31. From(mm/dd/yyyy): [redacted] 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): CONNEAUT POLICE ASHTABULA	34. From(mm/dd/yyyy): [redacted] To(mm/dd/yyyy):
35. Appointment Status (Check Appropriate Box) ✓ Full-Time ____ Part-Time ____ Auxiliary ____ Reserve ____ Special ____ Seasonal	
36. Appointed By (Agency Name and County): ASHTABULA COUNTY S.O. ASHTABULA	37. From(mm/dd/yyyy): [redacted] To(mm/dd/yyyy):
38. 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 ____ Reserve ____ Special ____ Seasonal	

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

OATH OF OFFICE

I, [redacted] do solemnly swear, that I will support the Constitution of the United States of America, the Constitution and Laws of the State of Ohio, and the Charter and Ordinances of the City of Conneaut, Ohio and will, to the best of my ability, perform all of the duties incumbent upon me as Patrolman for the City of Conneaut, so help me God.

[redacted]

STATE OF OHIO)
) SS.
COUNTY OF ASHTABULA)

Sworn and subscribed to in my presence, this [redacted]

[redacted]

Carl L. DiFranco, Judge

City of Conneaut
Office of the City Manager

James Hockaday
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

[redacted]

[redacted]

RE: Appointment to [redacted]

Dear [redacted]:

Effective immediately, I am hereby appointing you to the Police Department [redacted] for the City of Conneaut. You will continue to work under the direction of Police Chief Michael Colby, or his designee

Congratulations and I look forward to working with you.

Sincerely,
CITY OF CONNEAUT

James Hockaday
City Manager

JH/ag

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: mcolby@conneautpd.com

Date: June 3, 2019

To: [redacted]

From: Chief Colby

Re: Appointment to [redacted]

I am writing to appoint you to the Police Department [redacted] effective immediately. Your work hours will be need to be either [redacted] with [redacted]off. You will report your activity directly to me on a weekly basis.

You will also be required to carry your phone and respond to investigative call-outs at unusual times other than your regular duty hours. Additionally, you will be required to attend various training classes and continuing education seminars related to investigative principles and tactics.

I am confident that with your training and years of experience that will do a fine job in this position and I am looking forward to working with you in this capacity.

Thank you for taking on this responsibility and if you have any questions, feel free to contact me.

Michael Colby, Chief

C. City Manager ✓
Law Director

City of Conneaut
Office of the City Manager

James Hockaday
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

[redacted]

[redacted]

RE: [redacted] **Appointment**

Dear [redacted]

Effective [redacted] I am hereby appointing you to the position of [redacted] for the City of Conneaut. You will be paid at the rate of $25.53 per hour payable bi-weekly and $58.00 per month as per union agreement for holding a Bachelor's Degree. You will work under the direction of Police Chief Michael Colby, or his designee

Congratulations and I look forward to working with you.

Sincerely,
CITY OF CONNEAUT

James Hockaday
City Manager

By signing this offer of employment, I am hereby acknowledging that I have read and understand the terms of this letter.

Accepted by: [redacted] [redacted]
Printed Name

Date Signed: [redacted]

Witnessed by: M. Colby
Printed Name

Signature

Date Signed: 5/20/19

JH/ag
Payroll, Personnel File, Chief Colby

City of Conneaut
Office of the City Manager

James Hockaday
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

[redacted]

[redacted]

RE: Conditional Appointment

Dear [redacted]:

Effective [redacted] I am hereby appointing you to the position of [redacted] for the City of Conneaut. You will be paid at the rate of $25.53 per hour payable bi-weekly and $58.00 per month as per union agreement for holding a Bachelor's Degree. You may transfer a maximum of 400 hours of sick time that you have accrued from the Ashtabula County Sheriff's Office upon providing documentation from the Sheriff's Office.

Chief Colby will provide you with Departmental Rules and Regulations and other applicable policies and schedules. He will also notify you of the date and time for your examination. Please report to the Finance Department to fill out employment forms prior to your starting date.

Congratulations and I look forward to working with you.

Sincerely,
CITY OF CONNEAUT

James Hockaday
City Manager

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: mcolby@conneautpd.com

May 13, 2019

James Hockaday
City Manager
City of Conneaut
294 Main St.
Conneaut, Ohio 44030

Re; Patrolman Recommendation

Mr. Hockaday,

This letter is to serve as my formal recommendation of hiring [redacted] as a [redacted] with the City of Conneaut Police Department. I've known [redacted] the majority of my life and find him to be an outstanding Police Officer, and upstanding member of this Community. [redacted] work ethic speaks for its self, and I have no doubt his impact to this department would be felt from the start. In addition to his abilities as a Police Investigator, [redacted] is very knowledgeable when it comes to grant writing and other areas such as forfeiture guidelines. I foresee [redacted] being assigned to the [redacted] soon after starting, if approved, and would request his beginning wage be that of a [redacted].

Sincerely,

Michael Colby, Chief

Michael Colby
Chief of Police

Cc. City Manager
file

[redacted]

EDUCATION

Batchelor of Science Justice Studies [redacted]
Kent State University
Ashtabula, OH

Associate of Science Criminal Justice [redacted]
Lakeland College
Kirtland, OH

O.P.O.T.C. Basic Police Academy [redacted]
Ashtabula County Sheriff's Office
Jefferson, OH

Nationally Regist [redacted]
University H
Conne

Rate: $25.53
Batchelor: $158.00 per month.

[redacted]

EMPLOYMENT

L [redacted]
As
Jeff

Achievements

- SWA unty Overdose Taskforce
- Super nforcement Administration
- Task Fo
- Labor Ma ator
- Range and Construction Coordinator
- Assistant G Coordinator
- Drug Free Communities representative
- Nine Meritorious Citations

[redacted]

City of Conneaut Fire Department [redacted]
Conneaut, OH

Achievements

-Lieutenant
-Training Officer
-Arson Investigator
-Swift Water Rescue Technician

-Auto Extrication Technician
-Ten Meritorious Service Citations

Police Officer

Ashtabula Police Department
Ashtabula, OH

[redacted]

Achievements
- Head of Narcotics Division, APD
- Detective
-Entry Team Ashtabula County SWAT
-Labor Management Negotiator
-Certified Corrections Officer
-Grant Technician
-Communications Coordinator
-Officer of the Year 2001
-Four Meritorious Service Citations

[redacted]

Achievements

[redacted]

COMMUNITY SERVICE

Cub Scout Leader Conneaut Pack 34 [redacted]

Our Lady of Peace Parish Religious Education Instructor [redacted]

Soccer Coach Conneaut Middle School [redacted]

TRAINING

194 Certificated Police, Fire and EMS Courses
91 Non-Certificated Police, Fire and EMS Courses

REFERENCES

Gladly provided upon your request

EXPERIENCE DOCUMENTATION

Gladly provided upon your request

MIKE DEWINE
* OHIO ATTORNEY GENERAL *

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

P.O. Box 309
London, OH 43140
www.OhioAttorneyGeneral.gov

NOTICE OF PEACE OFFICER TERMINATION

Complete all blanks. Type or Print Legibly. Enter N/A if not applicable.
Please Email (SF400@ohioattorneygeneral.gov), Fax, or Mail this document within ten days of the termination.

OFFICER INFORMATION

1. Name (Last)	(First)	(Middle)	2. Social Security Number
[redacted]	[redacted]	[redacted]	[redacted]

3. Alias (Last)	(First)	(Middle)

4. Birth date (mm/dd/yyyy)	5. Email Address
[redacted]	

6. Home Mailing Address (#/Street/PO Box)	(City)	(State)	(Zip Code)	(County Name)
[redacted]	[redacted]	Ohio	[redacted]	

AGENCY INFORMATION

7. Agency Name	
Conneaut Police Department	

8. Agency Email Address	9. Agency Phone Number
conneautpd@suite224.net	440-593-7440

10. Agency Mailing Address (#/Street/PO Box)	(City)	(State)	(Zip Code)	(County Name)
294 Main St	Conneaut	Ohio	44030	Ashtabula

TERMINATION INFORMATION

11. Appointment Date (mm/dd/yyyy)	12. Termination Date (mm/dd/yyyy)
[redacted]	

13. Reason for Termination (check appropriate box)

☑ Resigned ☐ Discharged ☐ Retired ☐ Deceased ☐ Other

☐ Felony Conviction (please explain below) ☐ Misdemeanor plea with Agreement to Surrender Certificate (please explain below)

ATTESTATION OF LAW ENFORCEMENT AGENCY ADMINISTRATOR

I attest that the information provided on this form is true and correct and is based on my personal knowledge or inquiry.

14. Signature of Law Enforcement Agency Administrator	15. Name and Title	16. Date
[signature]	Charles Burlingham, Acting Chief of Police	06/16/2011

Conneaut Police Department
294 Main St. Conneaut, Ohio 44030 440-593-7440

FAX

To: Ohio Peace Officer Training Commission	**From: Acting Chief Burlingham**
Fax: 740-845-2675	**Pages: 2**
Phone: 800-346-7682	**Date: June 16, 2011**
Re: Termination Notice	**cc:**

☐ **Urgent** ☐ **For Review** ☐ **Please Reply** ☐ **Please Comment**

To follow is the Notice of Termination- SF401adm for [redacted]

I am also mailing a copy

Dispatch Fax – 440-593-6582

Records Fax – 440-593-6966

Print Form

RICHARD CORDRAY
OHIO ATTORNEY GENERAL

NOTICE OF PEACE OFFICER APPOINTMENT

Complete all blanks. Type or Print Legibly. Enter N/A if not applicable. Complete both pages one and two for a new appointment. Complete only page one for a status change. Email, Fax or Mail this document within ten days of the appointment or status change. For Correction to Record information, enter correct information on this form and send a letter of explanation surrounding the changes.

OFFICER INFORMATION

1. Name (Last) [redacted] (First) (Middle)
2. Social Security Number [redacted]
3. Alias (Last) (First) (Middle)
4. Birth date (mm/dd/yyyy) [redacted]
5. Email Address
6. Home Mailing Address (#/Street/PO Box) [redacted] (City) [redacted] (State) OH (D [redacted]
7. Basic Training Academy (Academy Name) (Academy Number)
(Only complete if this is the officer's first appointment)

AGENCY INFORMATION

8. Agency Name: CONNEAUT POLICE DEPT.
9. Agency Email Address: conneautpd@suite224.net
10. Agency Phone Number: 440-593-7440
11. Agency Mailing Address (#/Street/PO Box): 294 MAIN ST. (City): CONNEAUT (Zip Code): 44030 (County Name): ASHTABULA

APPOINTMENT INFORMATION (check the appropriate boxes)

12. [X] New Appointment [ ] Status Change
13. Appointment Date [redacted]
14. Select New Status: [X] Full-Time [ ] Part-Time [ ] Auxiliary [ ] Reserve [ ] Special [ ] Seasonal

[X] City/Municipality Full-Time/Part-Time (737.02) [ ] City/Municipality Auxiliary/Reserve/Special 737.051)
[ ] Sheriff (311) [ ] Deputy Sheriff (311.04) [ ] Township Police Officer (505.49) [ ] Township Constable (509.01)
[ ] Village Chief (737.15) [ ] Village Full-Time/Part-Time/Special (737.16) [ ] Village Auxiliary/Reserve (737.161)
[ ] Other (Indicate the correct ORC/Charter Number _____

ATTESTATION OF LAW ENFORCEMENT AGENCY ADMINISTRATOR

I attest that the information provided on this form is true and correct and is based on my personal knowledge or inquiry.

15. Signature of Law Enforcement Agency Administrator
16. Name and Title: JON J. ARCARO, CHIEF OF POLICE
17. Date: 08-30-2010

NOTARY
Sworn to and subscribed before me this 30th day of AUGUST, 20 10 in the county of ASHTABULA, Ohio.

Signature of Notary

My commission expires 5-2-11.

Affix Seal Here

SF400adm Revised 08/05/2009

P.O. Box 309 London, Ohio 43140
Phone: (740) 845-2700/ (800) 346-7682
Fax: (740) 845-2675
Email:sf400@ohioattorneygeneral.gov

Officer Name (Last)	(First)	(Middle)	Social Security Number
[redacted]	[redacted]	[redacted]	[redacted]

19. 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.

Sig[redacted]

Signature of Appointing Authority

Date [redacted]

ROBERT SHAUMLEFFEL

Name of Appointing Authority and Title (Typed OR Printed Legibly)

Date [redacted]

OHIO PEACE OFFICER APPOINTMENT HISTORY

All appointments must be listed. Use additional pages if needed to complete the entire work history.

20. Appointed By (Agency Name and County):	21. From(mm/dd/yyyy):	To(mm/dd/yyyy):
Conneaut Police Ashtabula County	[redacted]	

22. Appointment Status (Check Appropriate Box)
☒ Full-Time ☐ Part-Time ☐ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

23. Appointed By (Agency Name and County):	24. From(mm/dd/yyyy):	To(mm/dd/yyyy):
Ashtabula County S.O.	[redacted]	

25. Appointment Status (Check Appropriate Box)
☒ Full-Time ☐ Part-Time ☐ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

26. Appointed By (Agency Name and County):	27. From(mm/dd/yyyy):	To(mm/dd/yyyy):
Ashtabula Police Ashtabula County	[redacted]	

28. Appointment Status (Check Appropriate Box)
☐ Full-Time ☐ Part-Time ☐ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

29. Appointed By (Agency Name and County):	30. From(mm/dd/yyyy):	To(mm/dd/yyyy):
Conneaut Police Ashtabula County	[redacted]	

31. Appointment Status (Check Appropriate Box)
☐ Full-Time ☐ Part-Time ☒ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

32. Appointed By (Agency Name and County):	33. From(mm/dd/yyyy):	To(mm/dd/yyyy):

34. Appointment Status (Check Appropriate Box)
☐ Full-Time ☐ Part-Time ☐ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

P.O. Box 309 London, Ohio 43140
Phone: (740) 845-2700/ (800) 346-7682
Fax: (740) 845-2675
sf400@ohioattorneygeneral.gov

City of Conneaut
Office of the City Manager

Robert Schaumleffel, Jr.
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

August 27, 2010

[redacted]

Dear [redacted]:

Effective [redacted] I am hereby appointing you to the position of [redacted] for the City of Conneaut. You will be paid at the rate of $20.46 per hour payable bi-weekly.

You will be required to pass the Conneaut Police Department's field training program, a pre-employment physical and drug screening. This appointment is in the classified service and requires a one (1) year probationary period. Chief Jon J. Arcaro will provide you with Departmental Rules and Regulations and other applicable policies and schedules. He will also notify you of the date and time for your examinations. Please report to the Finance Department to fill out employment forms prior to your starting date.

Congratulations and I look forward to working with you.

Sincerely,
CITY OF CONNEAUT

Robert Schaumleffel, Jr.
City Manager

RS/pb

cc: Chief Arcaro
Finance/Payroll
Civil Service Commission
Personnel File

JON J. ARCARO
CHIEF OF POLICE

Conneaut City Police

Serving Since 1902

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: conneautpd@suite224.net

Date: **August 10, 2010**

To: **Acting City Manager John Williams**

From: **Chief Arcaro**

Re: **Police Department Vacancies**

Dear John:

I am writing to recommend the appointment of the following individuals to fill vacancies that currently exist within the Police Department.

Jeff Raisian of [redacted] as a part-time Dispatcher. I intend to have him trained and ready to fill the vacancy that will be created by the pending retirement of Gayle Gurto. Mr. Raisian will not be compensated until he completes his training. He will also be required to undergo a pre-employment drug screen as well.

[redacted] of [redacted] as a [redacted]. [redacted] is a highly trained certified [redacted] with prior employment with the City. He has been laid off from the County Sheriff's Office for some time now, and should be a good fit for the department and community based on his background.

[redacted] will be required to undergo the pre-employment pension physical and drug screening. I would anticipate minimal field training time before he is ready for active duty. Based on [redacted] level of training and experience, I recommend that he begin at the top rate of pay for a [redacted] (20.46/hr.)

Please make both of these appointments effective [redacted] Thank you for your time in this matter and if you have any questions feel free to contact me.

OATH OF OFFICE

I, [redacted] *do solemnly swear, that I will support the Constitution of the United States of America, the Constitution and Laws of the State of Ohio, and the Charter and Ordinances of the City of Conneaut, Ohio and will, to the best of my ability, perform all of the duties incumbent upon me as Patrolman for the City of Conneaut, so help me God.*

[redacted]

STATE OF OHIO)
) SS.
COUNTY OF ASHTABULA)

Sworn and subscribed to in my presence, this [redacted]

[redacted]

Thomas E. Harris, Judge

Chief Jon Arcaro
Conneaut Police Department
294 Main St.
Conneaut, Ohio 44030

Chief Arcaro,

This letter is to advise you that I have had the opportunity to evaluate [redacted]. I feel that [redacted] showed good judgment in his daily activities, and always conducted himself as a professional. I feel [redacted] will make an immediate contribution to the Conneaut Police Department, and look forward to working with him. I will monitor [redacted] progress in the coming months, and assist him as needed in the event I am made aware of any problems. With [redacted] experience taken into consideration, I reviewed the policies unique to the Conneaut Police Department, such as our Pursuit Policy, Extradition, L.E.C.I. escape response, Junk Vehicles, Use of Force, Critical Incident, Alarm responses, Districts (including sections), Patrol Preparation and Video Operation, Property. I feel the only obstacle facing [redacted], would be jail duties, which can only come in time.

Respectfully
Michael Colby
Ptl. Michael Colby 0052
Field Training Officer

Cc: Lt. Robert Zimmerman
Field Training Supervisor, Sgt. Distel
[redacted]

Application for Employment

Please Print

City of Conneaut
294 Main Street
Conneaut, Ohio 44030
440-593-7401

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the City Manager's Office.

Position(s) applied for: Police Officer — Date of application: 08-12-2010

Name: [redacted] (Last / First / Middle) — Applicant ID #:

Address: [redacted] (Street / City / State / Zip Code)

Telephone #: [redacted] — Cellular/Other #: [redacted] — E-mail Address: [redacted]

Referral Source (How did you hear about us?):

If you are under 18, and it is required, can you furnish a work permit? ☐ Yes ☐ No

If **no**, please explain:

Have you ever been employed here before? If **yes**, give dates and positions: Yes. [redacted] ☒ Yes ☐ No

Is this application a request for reemployment following an exteneded military leave of absence from this company? ☐ Yes ☒ No
If yes, additional information may be requested.

Are you legally eligible for employment in this country? ☒ Yes ☐ No

Date available for work: 8-30-2010 — What is your desired salary range? $

Type of employment desired: ☒ Full-Time ☐ Part-Time ☐ Temporary ☐ Seasonal ☐ Educational Co-Op

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?
This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

☒ Yes ☐ No ☐ Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in position for which you are applying: [redacted] State OH

Answering "yes" to either part of the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of, a crime? ☐ Yes ☒ No

If **yes**, please provide date(s) and details:

Employment History

Starting with your most recent employer, provide the following information.

Employer: Ashtabula County S.O. — **Telephone #:** 440-576-0055
Street Address: 25 W. Jefferson St. — **City:** Jefferson — **State:** OH
Starting job title/final job title: Deputy
Immediate supervisor and title (for most recent position held): Van Robison
May we contact for reference? ☒ Yes ☐ No ☐ Later — **E-mail:** VRobison@AshtabulaCounty.us
Why did you leave? Laid off
Summarize the type of work performed and job responsibilities. Police Officer

Dates employed: [redacted]
Compensation (Starting): ☒ Hourly ☐ Salary $ per hr
Commission/Bonus/Other Compensation $
Compensation (Final): ☒ Hourly ☐ Salary $ 23.46 per hr
Commission/Bonus/Other Compensation $

Employer: Ashtabula City Police — **Telephone #:** 440-992-7174
Street Address: 110 W. 44th St. — **City:** Ashtabula — **State:** OH
Starting job title/final job title: Detective
Immediate supervisor and title (for most recent position held): John Kosk.
May we contact for reference? ☒ Yes ☐ No ☐ Later — **E-mail:**
Why did you leave? New Job
Summarize the type of work performed and job responsibilities. Detective

Dates employed: [redacted]
Compensation (Starting): ☒ Hourly ☐ Salary $ 23.00 per hr.
Commission/Bonus/Other Compensation $
Compensation (Final): ☒ Hourly ☐ Salary $ 23.00 per hr
Commission/Bonus/Other Compensation $

Employer: City of Conneaut — **Telephone #:** 440-593-7445
Street Address: 294 Main St. — **City:** Conneaut — **State:** OH
Starting job title/final job title: Dispatcher
Immediate supervisor and title (for most recent position held): John Arcaro
May we contact for reference? ☒ Yes ☐ No ☐ Later — **E-mail:**
Why did you leave? New Job
Summarize the type of work performed and job responsibilities. Dispatcher

Dates employed: [redacted]
Compensation (Starting): ☒ Hourly ☐ Salary $ 12.00 per hr
Commission/Bonus/Other Compensation $
Compensation (Final): ☒ Hourly ☐ Salary $ 12.00 per hr
Commission/Bonus/Other Compensation $

Ashtabula County Sheriff's Office

William R. Johnson, Sheriff
25 West Jefferson St. Jefferson Ohio 44047
Non-Emergency 440-576-9046 Fax: 440-576-3573

Criminal Investigations Division
[redacted] [redacted]

9/22/2009

WORK EXPERIENCE

City of Conneaut Fire Department
[redacted]

- [redacted]
- Conducted numerous in service and State training classes for EMS, Fire Operations and Technical Rescue as a training officer
- Responded to and provided patient care on over 2000 Emergency Medical Service calls
- Arson Investigator
- Responded to and assisted in over 100 technical, collapse, high angle, or water rescues
- Responded to and conducted operations on over 150 structure fires
- Conducted logistical and contingency planning and pre-planning for natural disasters, fire department operations, and homeland security scenarios
- Conducted numerous safety classes on fire prevention to the public
- Helped research, create and implement CFD response plan for Water Supply and Hydrant Operations

City of Conneaut Police Department
[redacted]

- Conducted facility and inmate security operations in a State of Ohio Certified five day holding facility
- Conducted Fire and EMS dispatching operations for two political subdivisions
- Conducted Police dispatching operations for two municipalities
- Conducted road patrol duties under direction of a field training officer
- Conducted National Crime Information Center and Ohio Law Enforcement Automated Data System entries and queries for two municipalities
- Conducted Enhanced 911, and Computer Aided Dispatch Operations for two municipalities

City of Ashtabula Police Department

[redacted]

- Lead Alcohol Detection Apprehension and Prosecution (ADAP/OVI) instructor
- Lead Narcotics Detective. Responsible for undercover narcotics purchases, development handling of confidential informants and the investigation and prosecution of street level drug cases
- Wrote and executed over 30 search warrants
- Conducted investigations into and oversaw processing of over 5 methamphetamines laboratories
- Ohio Organized Crime Task Force member, responsible for the investigation of complex multi jurisdictional criminal organizations, specializing in gambling and narcotics organizations. Responsible for the investigation and prosecution of State RICO Conspiracy and Gang cases.
- Major Crimes detective. Conducted investigations into five homicides, multiple rapes, numerous felony assaults and other various felony cases
- Responsible for the development, implementation and funding formula for the enhanced police communications system
- Assisted in developing and implementing the Computer Aided Dispatching and records system
- Conducted extensive police patrol operations including traffic enforcement and crash investigation, felony and misdemeanor case investigation, extensive courtroom testimony, OVI enforcement and narcotics interdiction
- Responsible for developing and implementing APD Narcotics Operating Procedures involving Operational Plans, Confidential Informants and Undercover Drug Purchases
- Gave testimony to the Ashtabula City Counsel and Safety Committee regarding communications requirements
- Ashtabula City Police representative to the Ashtabula County Homeland Security Committee

[redacted]

- [redacted]

- [redacted]

Ashtabula County Sheriff's Office
[redacted]

- Conducted extensive police patrol operations including traffic enforcement and crash investigation, felony and misdemeanor case investigation, courtroom testimony, and OVI enforcement
- Conducted extensive interdiction operations resulting in significant cash and narcotics seizures, as well as multiple felony arrests and convictions
- Conducted investigations into over 7 methamphetamines laboratories
- Ashtabula County Special Weapons and Tactics team member since 2000, entry team member and sniper.
- Conducted over 50 SWAT operations to include high risk warrant service, barricaded individuals, hostage situations and active shooters
- Assigned to Detective division. Responsible for conducting complex felony investigations, homicide investigations, narcotics investigations and crime scene processing.

Instructor Positions

- National Highway Traffic Safety Administration ADAP (OVI) instructor
- Tactical Element Combat Life Saver Instructor
- [redacted]
- Ohio Department of Public Safety Special Topics EMS instructor
- Ashtabula County SWAT team Response to Active Shooter Instructor

Education

Associate of Applied Science. Criminal Justice Law Enforcement
Lakeland Community College
[redacted]

Batchelor of Science. Justice Studies
Kent State University
[redacted]

Awards

Battalion Chief's Award
Conneaut Fire Department
Re: Meritorious Service
[redacted]

Hard Charger Award
Conneaut Fire Department
Re: Superior Service
[redacted]

Assistant Battalion Chief's Award
Conneaut Fire Department
Re: Outstanding Achievement
[redacted]

Hard Charger Award
Conneaut Fire Department
Re: Superior Service
[redacted]

Hard Charger Award
Conneaut Fire Department
Re: Superior Service
[redacted]

Letter of Commendation
Conneaut Police Department
Re: Active Shooter
[redacted]

Letter of Commendation
Conneaut Fire Department
Re: Superior Service Squad Nights
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: Attempted Suicide
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: Violent Fugitive
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Clark [redacted] Drug Trafficking
[redacted]

Letter of Appreciation
Ashtabula County Head Start
Re: Class Instruction
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: [redacted] Drug Operation
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: [redacted] Drug Arrest
[redacted]

Kent State University
Deans List
[redacted]

Assistant Battalion Chief's Award
Conneaut Fire Department
Re: Valor while performing a rescue
[redacted]

Letter of Appreciation
Conneaut Police Department
Re: DUI Demonstration
[redacted]

Letter of Appreciation
Ashtabula City Fire Department
Re: Meth Lab
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Combs [redacted] Aggravated Robbery
[redacted]

Special Proclamation
Ohio House of Representatives
Re: Meritorious Police Service
[redacted]

Officer of the Year
Ashtabula Police Department
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Charles Newman [redacted] Quadruple Homicide
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Alan Welker et al [redacted] Multi-jurisdictional Marijuana Trafficking
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Ross [redacted] omicide
[redacted]

[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Richard Corpening et al [redacted] Homicide
[redacted]

Graduate Cum Laude
Kent State University
B.A. Justice Studies
[redacted]

[redacted]

Special Proclamation
City of Ashtabula
Re: Meritorious Service
[redacted]

Battalion Chief's Award
Conneaut Fire Department
Re: Meritorious Service
[redacted]

[redacted]

Letter of Appreciation
Trumbull Ashtabula Geauga County Drug Taskforce
Re: International Marijuana Trafficking case
[redacted]

Certificate of Appreciation
Ashtabula County Safe Communities
Re: Outstanding Traffic Safety Enforcement
[redacted]

Letter of Appreciation
Ashtabula County Sheriff's Office
Re: Multi-Agency Criminal Interdiction for Conneaut City
[redacted]

Letter of Commendation
Ashtabula County Sheriff's Office
Re: State v. Dioneff Marijuana Trafficking
[redacted]

Letter of Appreciation
Ashtabula County Joint Vocational School
Re: Instructional Assistance Reality Day
[redacted]

Letter of Commendation
Ashtabula County Sheriff's Office
Re: Steven Anzells Officer involved shooting
[redacted]

Certificated Police Courses Completed by [redacted]

Communications Ashtabula County Emergency Medical Services Advisory Council. February 1994

Stress Management Ashtabula County Emergency Medical Services Advisory Council. March 1994

Sensitivity Awareness Ashtabula County Emergency Medical Services Advisory Council. March 1994

Disaster/Mass Casualty Ashtabula County Emergency Medical Services Advisory Council. April 1994

Alcohol and Drug Emergencies Ashtabula County Emergency Medical Services Advisory Council. January 1995

Hazardous Materials Awareness Ohio Fire Academy. March 1995

Radiation Emergencies Conneaut Rescue Squad. August 1996

Domestic Violence EMS Issues Conneaut Rescue Squad. August 1996

Law Enforcement Automated Data System Operator Ohio LEADS Steering Committee. October 1996

Perry Nuclear Power Plant Procedures Conneaut Rescue Squad. September 1996

Certified Jailer- 5 Day Facility SACS Training Academy. November 1996

Responding to 911 TDD Calls Ashtabula County 911 Commission. March 1997

Bombs and Bombings Federal Bureau of Investigation. March 1997

[redacted]

Law Enforcement Dispatching Power Phone. July 1997

Defensive Driving Ashtabula County Basic Academy. July 1997

Basic Telecommunicator Association of Public Safety Communications Officials. October 1997

Lawsuits Against Police, Fire and EMS Law Advisory Group. January 1998

Nationally Registered Paramedic Brown Memorial Hospital. January 1998

Crime Scene First Responder Powerphone. May 1998

Investigation of Appliance Fires Fire Findings. May 1998

Ohio Basic Peace Officer's Training Ashtabula County Basic Academy. August 1998

Rail Transportation of Hazardous Materials Norfolk and Southern Railroad. October 1998

Bombs, Bomb Threats and Booby Traps Explosive Device Technologies. August 1999

Street Sense University Hospitals Brown Memorial. September 1999

Shaken Baby Syndrome Pennsylvania Medical Society. October 1999

Managing Hanging or Strangulation Injuries NY College for Trauma and Emergency Care. October 1999

Drowning Homicide Investigations Lifeguard Systems. February 2000

Alcohol Detection and Prosecution Ohio Peace Officer's Training Academy June 2000

Bulletproof Mind Lt. Col. Dave Grossman, Ohio Peace Officer's Training Academy. January 2001

Psychological Disorders Journal of Emergency Medicine. January 2001

Spanish for Law Enforcement Ohio Peace Officer's Training Academy. February 2001

WMD Domestic Preparedness City of Conneaut Fire Department. May 2001

WMD First Responder City of Conneaut Fire Department. May 2001

ADAP Instructor Ohio Peace Officer's Training Academy. June 2001

RAVE Drug Seminar Great Lakes International Gang Investigators. August 2001

Basic Fire Investigation Ohio State Fire Marshal. October 2001

School Shooting First Responder HSS International. July 2002

Basic SWAT Tactical Defense Training. October 2002

Response to Active Shooter Jefferson Police Department. October 2003

BAC Datamaster Senior Operator Ohio Department of Health. November 2004

Highway Interdiction Training Ohio Highway Patrol. June 1997

Basic Sniper Ohio Department of Public Safety, Ohio Highway Patrol. August 2007

Courtroom Testimony Multijurisdictional Counterdrug Taskforce Training. August 2007

National Incident Management System Federal Emergency Management Agency August 2007

Elder Abuse Kent State University. September 2007

Blood Stain Pattern Analysis Ohio Peace Officer's Training Academy. October 2007

Weapon Retention Alliance Training Group. November 2007

Search Warrants, Laws of Arrest and Search and Seizure Ohio Peace Officer's Training Academy. November 2007

Identifying Armed Persons and Investigating Gun Crimes Bureau of Alcohol Tobacco and Firearms. March 2008

Basic Photography Ohio Peace Officers Training Academy. April 2008

Crime Scene Photography Ohio Peace Officer's Training Academy, June 2008

Outlaw Motorcycle Gang Overview Bureau of Alcohol Tobacco and Firearms October 2008

ADAP Instructor Update Ohio Peace Officer's Training Academy, January 2009

Introduction to Conspiracy Investigations Multijurisdictional Counterdrug Task Force May 2009

Sniper Observer School Federal Bureau of Investigation, May 2009

Interviews and Body Language Ohio Peace Officer's Training Academy, April 2010

Advanced Sniper School Federal Bureau of Investigation, May 2010

Senate Bill 77 Update Ohio Peace Officer's Training Academy, August 2010

			date	course	hours		
[redacted]							
			03/07/07	swat training	4		4
			03/21/07	swat training	4		8
			04/18/07	swat training	4		12
			05/01/07	mobile data terminal certification	4		16
			05/03/07	electronic crime trends training seminar	4		20
			05/13/07	in service training use of k-9	0.5		20.5
			06/01/07	highway interdiction school	14		34.5
			05/22/07	FATS shoot/don't shoot training	1		35.5
			06/03/07	review search & seizure	0.5		36
			06/13/07	swat training	4		40
			06/27/07	land based patrol training	2		42
			07/20/07	32 round night fire course	1		43
			08/01/07	swat training	2		45
			08/17/07	basic sniper course	40		85
			08/29/07	courtroom testimony	16		101
			09/19/07	swat training	4		105
			09/24/07	elderly abuse	5		110
			09/21/07	handgun qualifications	1		111
			09/21/07	shotgun qualifications	1		112
			10/19/07	bloodstain evidence	40		152
			11/08/07	weapons retention	3		155
			10/11/07	tactical carbine qualification	1		156
			11/13/07	swat training	4		160
			11/20/07	arrest,search warrants, search & seizure	16		176
			08/14/06	nims training 100	3		
			08/14/06	nims training 700	3		
			12/12/07	swat training	3		179
			2008	2008			
			02/20/08	swat training	4		4
			04/11/08	basic photography	40		44
			03/18/08	firearms investigations training	8		52
			05/20/08	qualifications flash bangs	0.5		52.5
			05/20/08	qualifications bean bags	0.5		53
			05/20/08	swat training	3		56
			04/17/08	swat training	4		60
			05/24/08	shotgun qualifications	1		61
			06/27/08	crime scene & evidence photography	40		101
			08/15/08	swat training	2.5		103.5
			07/26/08	tactical shoot	1		104.5
			09/24/08	day handgun qualification	1		105.5
			10/15/08	night handgun qualifications	0.5		106
			10/16/08	outlaw motorcycle gang overview	8		114
			10/21/08	swat training	4		118
			12/04/08	marcs radio training	1		119
			12/18/08	sniper rifle qualifications	1		120
			2009				2009
			01/22/09	adap/sfst instructor updates	8		8
			01/30/09	swat training	4		12
			02/05/09	blood spatter analysis in-service	2		14
			02/10/09	swat training	2		16
			02/19/09	swat training	3		19
			03/19/09	swat training	4		23

STATE OF OHIO
ATTORNEY GENERAL'S OFFICE

June 23, 2008

Sheriff William Johnson
Ashtabula County Sheriff's Office
25 West Jefferson Street
Jefferson, OH 44047

Re: Break in service update training evaluation for [redacted]

Dear Sheriff Johnson:

The purpose of this letter is two-fold: First, this letter shall serve to acknowledge receipt of a "Notice of Peace Officer Appointment/Termination" (OPOTC SF400adm) form, whereby you reported an appointment, status change, or record correction for the above-referenced officer pursuant to R.C. § 109.761. Second, this letter shall serve as notice that pursuant to O.A.C. 109:2-1-12, **no break in service update training is required.**

The Commission provides break in service update training determinations as a service to Ohio's peace officers and the agencies they serve. This determination is based solely upon the appointment/termination information reported to the Commission, and does not relieve the officer or the appointing authority of any obligation to comply with the reporting requirements of R.C. § 109.761 or the break in service update training requirements of O.A.C. 109:2-1-12. If you believe this determination has been made in error, we will be happy to work with you to identify the documents necessary to correct our records. Please note that this determination should not be construed to relieve the above-referenced officer of the annual in-service firearms re-qualification requirements of R.C. § 109.801. Should you have questions or concerns regarding this determination, please feel free to contact me at the numbers provided below.

Sincerely,

Sarah D. Thomas

Sarah Thomas
Certification Officer
Certification & Standards Division

cc: OPOTC Officer File
SJT/vf

Ohio Peace Officer Training Academy

P.O. Box 309
London, OH 43140
Telephone: (740) 845-2700
(800) 346-7682
Facsimile: (740) 845-2675

An Internationally Accredited
Law Enforcement Training Academy

4055 Highlander Pkwy., Ste. B
Richfield, OH 44286
Telephone: (888) 436-7282
(330) 659-2311
Facsimile: (330) 659-2401

Ashtabula County Sheriff's Department

William R. Johnson
Sheriff

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047

Non Emergency (440) 576-9046
Emergency 911
FAX (440) 576-5915

02/13/08

Letter of Commendation

[redacted]

During the early morning hours of [redacted] was participating as a member of the entry team with the Ashtabula County SWAT Team in the City of Conneaut. During the entry the suspect brandished a handgun and pointed it in the direction of [redacted] and other team members. [redacted] responded without delay to the suspect's actions and was able to stop the threat without injuries to himself, other team members or residents of the household.
With these actions [redacted] showed his extreme bravery under fire and his dedication to duty. His commitment to his team and to training most likely prevented serious injury or death to fellow team members and for this he should be highly commended.

William R. Johnson
Sheriff, Ashtabula County

Lt. Greg Leonhard
Uniform Division Commander

Cc
[redacted]
file

Ashtabula County Sheriff's Office

William R. Johnson, Sheriff

Inter – Office Memo

12 09 07

To: [redacted]

From: Sgt. Kemmerle

Re: [redacted]

Letter of Commendation

[redacted]

On [redacted] you assisted with an assault complaint on Dunbar Ave. in Saybrook Twp. You located and arrested the assailant and, during and interview with him, you gathered information on an indoor marijuana growing operation at the victim's garage. A search warrant was obtained for a safe, in which a large quantity of marijuana was discovered. Additional information gathered during the investigation led to your discovery of another indoor marijuana growing operation in Ashtabula City. In total, over 5,000 grams of marijuana and a vehicle was seized and two individuals were charged with multiple felony offenses.

Without the information you gathered during your interview of the assault suspect, this operation would have gone undiscovered. Additionally, you obtained the suspect's consent to search his residence, leading to the discovery of his own marijuana growing operation. Your diligence to your duties and thorough investigation made these arrests possible. Your assistance in obtaining the search warrant and processing the evidence efficiently brought the matter to close. I commend you for your actions.

Sgt. James Kemmerle

Pc: Lt. Leonhard, file

Ashtabula County Sheriff's Department

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047

Non Emergency (440) 576-9046
Emergency 911
FAX (440) 576-5915

William R. Johnson
Sheriff

10/02/07

Letter of Appreciation

Sgt. Jim Kemmerle
Deputy Tony Mino
Deputy Mike Roach
[redacted]
Detective Bryan Rose

On [redacted] you participated in a joint Criminal Patrol Operation with the Conneaut Police Department and the Ohio State Patrol in Conneaut. Through your efforts the operation was a complete success and resulted in numerous arrests. Your professionalism and dedication to duty during this detail reflects highly on not only your personal abilities but on the Ashtabula County Sheriff's Office as a whole and for this your efforts are appreciated.

Lt. G.B. Leonhard
Uniform Division Commander
Ashtabula County Sheriff's Office

Cc
File
Kemmerle
Mino
Roach
[redacted]
Rose

Phone: 440-632-9799
Fax: 440-632-9557
Email: tagohio@windstream.net
Drug Tip Line: 1-877-835-4375
WebSite: www.tagohio.com

TAG LAW ENFORCEMENT TASK FORCE

P.O. Box 239
Middlefield, OH 44062-0239
USA

August 8, 2007

Ashtabula County Sheriff's Office
25 West Jefferson St.
Jefferson, Ohio 44047

Dear Sheriff Johnson:

As you are aware over the last five weeks TAG along with other law enforcement agencies has been involved in the investigation of multiple indoor marijuana grows involving Asian individuals. These investigations have taken a toll on our small agency and forced us to seek assistance from our parent agencies on several occasions.

I was on vacation during three of the five weeks and when I returned I was briefed by TAG personnel about the assistance received. I was made aware that [redacted] was assigned to assist our task force at search warrants in Trumbull County. During my law enforcement career it has not been unusual to receive assistance from others but in many cases that assistance is minimal or lacking any effort on the part of the assisting officer.

I'm sure you are aware of the work required with the dismantling of indoor marijuana grows. Personnel here at our office recognized the effort made by [redacted] as he worked hand in hand with others carrying heavy materials from the basements of these homes. Besides thanking you for providing [redacted] I believe he needs to be recognized for his untiring efforts in assisting the task force.

I can only hope that should we need assistance in the future that you would assign someone with the same work ethic as [redacted].

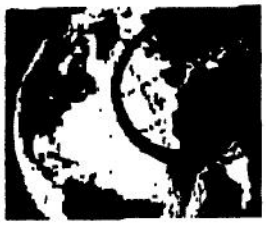
Sincerely,

Sgt. Jeff Orr
Project Commander

Advisory Board – Sheriff Thomas L. Altiere – Trumbull County Sheriff
Sheriff William R. Johnson – Ashtabula Sheriff - Sheriff Daniel C. McClelland – Geauga County Sheriff

Greg





ELECTRONIC CRIME TRENDS TRAINING SEMINAR

May 03, 2007
THURSDAY, 9:00 AM TO 12:00 NOON

Commissioner's Meeting Room
Second Floor-Commissioner's Building
25 West Jefferson Street
Jefferson, Ohio 44047

The United States Secret Service, Cleveland Field Office, will be presenting a three hour training seminar regarding the best practices for recognizing and processing electronic media/evidence by first responding law enforcement authorities.

Our Electronic Crimes Task Force (ECTF) agents will provide training that includes the following topics:

-recognizing electronic media/devices and how they are used to commit crimes

-current trends in electronic crimes investigations in the United States

-proper procedures ("best practices") to utilize during search warrants, arrest warrants, felony car stops, and interviews/interrogations, when electronic media/devices are involved (Best Practices manuals will be available for attendees)

All Police Chiefs, County Sheriffs, and County Prosecutors are asked to submit the names of the members of their departments/staff that they wish to attend this training. With the limited number of training slots available for this training seminar, supervisors should be aware that not all of their employees will be able to attend this event.

The names of training attendees should be forwarded to ASAIC Darrell D. Deerberg at the U. S. Secret Service, 6450 Rockside Woods Blvd. South, Suite 200, Independence, Ohio, 44131, or by e-mail at darrell.deerberg@usss.dhs.gov, by COB on 04/20/07.

Any questions regarding the above training should be directed to ASAIC Darrell. D. Deerberg, at 216/525-6511.

Sincerely,

Smokey Everett, SAIC
Cleveland Field Office

	1/16/2007	1/24/2007	1/29/2007	2/28/2007	3/7/2007	3/21/2007	4/18/2007
	training	honor g.	call out	meeting	training	training	training
Barger		X			X	X	X
Brodsky		X			X	X	X
[redacted]					X	X	X
Emmett	X		X			X	X
Febel		X	X		X	X	X
Felt			X			X	
Fenton	X	X	X	X	X	X	
Nelson	X		X	X	X	X	X
Palinkas	X				X		X
Parkomaki			X	X	X	X	X
Pearce	X		X		X	X	X
Rose	X		X	X		X	X
Saunders			X			X	
Siebeneck			X	X	X	X	X
Simons	X		X		X	X	X
Thomas	X	X			X	X	X
Tobie	X		X		X	X	X
Tulino	X		X		X	X	X
Zetlaw	X	X			X		X
Oatman							
Allen							
	classroom on night vision thermal and positive pressure mask	john marrison's honor guard for funeral	512 w. 34 two story house drug search warrant	leader meeting on future training	old harbor school breaching rounds on doors flash bang room and building clearing	old harbor breaching use of shield & pole camera room and building clearing oc use & exposure	west ave. school breaching room and building searches

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
CATHERINE R. COLGAN
HOLLY J. GRANT
ROBERT L. HERMAN
BRENDA S. KAMINSKY
NORA M. MASTERSON
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
JASON M. TOTH
TAMARA A. WETHERHOLT

TELEPHONE
(440)576-3662

FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)

TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
CYNTHIA VANALLEN
(440)576-3223
BONNIE ELLIOTT
(440)576-3523

October 15, 2003

Chief Raymond Mattson
Ashtabula Police Department
110 West 44th Street
Ashtabula, Ohio 44004

RE: State of Ohio vs. Richard Corpening, et al.
Ashtabula County Court of Common Pleas Case No. [redacted] Kenneth Curry [redacted] Bryant Mendenhall [redacted], Marcus Colbert [redacted]

Dear Chief Mattson:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically [redacted], Det. Sean Ward, Det. Joe Cellitti, Det. Alan Altonen, Sgt. James Oatman and Capt. Phillip Varckette for their efforts during the prosecution of Richard Corpening, et al., in the above referenced cases. Their thorough investigation greatly assisted this office in bringing the appropriate conclusion to these cases. Richard Corpening pled guilty to Murder with a Gun Specification and received a sentence of (18) eighteen years to life in prison. The defendants, Bryant Mendenhall, Kenneth Curry and Marcus Colbert each plead guilty to complicity to Manslaughter and Participating in Gang Activity charges, each receiving a (10) ten year sentence in prison.

As always, my office appreciates the professional relationship we have with your entire Department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

Ariana E. Tarighati,
Chief Assistant Prosecutor

TLS/ah

cc: [redacted]
Det. Sean Ward
Det. Joe Cellitti
Det. Alan Altonen
Sgt. James Oatman
Capt. Phillip Varckette

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
BRENDA S. KAMINSKY
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
JASON M. TOTH
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440)576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
CYNTHIA VANALLEN
(440)576-3223
BONNIE ELLIOTT
(440)576-3523

July 18, 2003

Chief Phillip Varckette
Ashtabula Police Department
110 West 44th Street
Ashtabula, Ohio 44004

RE: State of Ohio vs. Joseph Ross
Ashtabula County Court of Common Pleas Case No. [redacted]

Dear Chief Varckette:

I would like to take this opportunity to extend my appreciation to you as well as to a number of employees of your Department, specifically [redacted] Det. Joe Cellitti, Det. Allen Altonen, Det. Robert Pouska, Det.James Oatman, Det. Sean Ward, Ptlm. Chad Brown, Ptlm. James Rantamaki, Ptlm. Adam Simons, Ptlm. William Parkomaki, Ptlm. Thomas Perry, Captain DiAngelo, and Sgt. Gerald Cornelius, for their efforts during the investigation and prosecution of this case. (Please apologize to anyone whose name I omitted.) Obviously this was a team effort and you should be very proud of all of the members of your department. As you know the defendant was convicted of two counts of murder and was sentenced on July 18, 2003 to a mandatory prison term of 15 years to life.

As always, we appreciate, the professional relationship we have with you and your entire department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

Ariana E. Tarighati
Chief Assistant Prosecutor

Teri L. Burnside
Assistant Prosecutor

AET/am

cc: [redacted] Det. Joe Cellitti, Det. Allen Altonen, Det, Robert Pouska, Det James Oatman, Det. Sean Ward, Ptlm. Chad Brown, Ptlm. James Rantamaki, Ptlm. Adam Simons, Ptlm. William Parkomaki, Ptlm. Thomas Perry, Captain DiAngelo and Sgt. Gerald Cornelius

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
ROGER S. KRAMER
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN R. THOMAS
JASON M. TOTH
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440)576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
CYNTHIA VANALLEN
(440)576-3223
BONNIE ELLIOTT
(440)576-3523

May 8, 2003

Chief Philip Varkette
Ashtabula Police Department
110 West 44th Street
Ashtabula, Ohio 44004

RE: State of Ohio vs. Jeffery Westfall
Ashtabula County Court of Common Pleas Case No [redacted]

State of Ohio vs. William Westfall
Ashtabula County Court of Common Pleas Case No [redacted]

State of Ohio vs. Allan Welker
Ashtabula County Court of Common Pleas Case No [redacted]

State of Ohio vs. William Rogers
Ashtabula County Court of Common Pleas Case No [redacted]

Dear Chief Varkette:

I would like to take this opportunity to extend my appreciation to an employee of your Department, specifically [redacted], for his efforts during the prosecution of Jeffrey Westfall, Westfall, Allen Welker and William Rogers in the above referenced cases. His thorough investigation greatly assisted this office in bringing the appropriate conclusion to this case. The Westfalls and Welker pled guilty to Possession of Marijuana and Conspiracy to Commit Felony Drug Trafficking and, where applicable, agreed to forfeiture of property. William Rogers is scheduled to plead guilty on May 12, 2003 to the same charges.

A sentencing hearing will be scheduled by the court at a later date following the completion of pre-sentence investigations

As always, this office appreciates the professional relationship we have with your entire Department

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

Ariana E. Tarighati
Chief Assistant Prosecutor

AET/am

cc: [redacted]

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
ROGER S. KRAMER
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN R. THOMAS
JASON M. TOTH
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440)576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
CYNTHIA VANALLEN
(440)576-3223
GLEN V. OSBURN
(440)576-3523

August 12, 2002

Chief David Colucci
Ashtabula City Police Department
110 West 44th Street
Ashtabula, Ohio 44004-6915

RE: State of Ohio vs. Christopher P. Combs
Ashtabula County Court of Common Pleas Court No. [redacted]

Dear Chief Colucci:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically Capt. Phillip Varkette, Ptlm. Aaron Greenberg, [redacted] Det. Robert Pouska, Ptlm. James Rantamaki, Det. Alan Altonen and Ptlm. David O. Clemens for their efforts during the prosecution of Christopher Combs in the above referenced case. Their hard work and thorough investigation greatly assisted this office in bringing the appropriate conclusion to this case. The defendant was convicted of Aggravated Robbery, Receiving Stolen Property and Failure to Comply With a Signal of a Police Officer. Although we requested eleven years, the Defendant did receive a total of six years in prison.

I look forward to a continuing relationship of mutual cooperation with your department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

TLS/pas

cc: Capt. Phillip Varkette
Det. Robert Pouska
Ptlm. Aaron Greenberg
[redacted]
Ptlm. David O. Clemens
Ptlm. James Rantamaki
Det. Alan Altonen

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
ROGER S. KRAMER
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN R. THOMAS
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440) 576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
GLEN V. OSBURN
(440)576-3523
CYNTHIA VANALLEN
(440)576-3223

February 8, 2002

Chief David Colucci
Ashtabula City Police Department
110 W. 44th Street
Ashtabula, OH 44004

RE: State of Ohio vs. Charles Newman, Sr.
Ashtabula County Court of Common Pleas Case No [redacted]

Dear Chief Colucci:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically Captain Philip Varckette, Sergeant Jeffrey Bradley, Detective James Oatman, Detective Robert Pouska, Detective Alan Altonen and [redacted] for their efforts during the prosecution of Charles Newman, Sr. in the above referenced case. Their thorough investigation and outstanding efforts throughout the pendency of the case, greatly assisted this office in bringing an appropriate conclusion to this case. The defendant plead guilty to four counts of aggravated murder and four counts aggravated arson and was sentenced to life in prison without the possibility of parole for 80 years.

I look forward to a continuing relationship of mutual cooperation with your department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

TLS/vjc
cc: Captain Philip Varckette
Sergeant Jeffrey Bradley
Detective James Oatman
Detective Robert Pouska
Detective Alan Altonen
[redacted]

ASHTABULA FIRE DEPARTMENT

Chief Rick Balog

Station One ♦ 4326 Main Avenue ♦ Ashtabula, OH 44004 ♦ USA
Office (440)992-7192 ♦ Fax (440)992-2691 ♦ Chiefs (440)992-7190 ♦ Email rickb@aimanagers.com

June 28, 2001

Acting Police Chief Phil Varckette
City Hall Annex
Ashtabula, Ohio 44004

Phil,

I would like to take this opportunity to express my appreciation to several of your departments officers, particularly Detective Pouska and [redacted]. Their response to the alarm at 5601 Adams Avenue in the early morning of June 23rd; and subsequent interactions with fire personnel was exemplary.

Because of the excellent cooperation between your officers and the fire department, a very dangerous crime scene was abated. No one was injured, and the responsible person(s) were taken into custody.

Law enforcement and firefighting, as you are aware, are dangerous jobs but also very different jobs. It was rewarding for me to observe the professionalism displayed by both services. I am sure this did not go unnoticed by the other responding agencies (DEA, EPA, BCI).

Thank you.

Yours' in Safety,

Rick Balog

cc: city manager

ROCCO N. RUSSO
CHIEF OF POLICE

JON J. ARCARO
DEPUTY CHIEF OF POLICE



City of Conneaut

Ohio's Sharpest Corner

A Resort Ar

294 Main Street
Conneaut, Ohio 4403
Telephone (440) 593-74
Fax (440) 593-6966

May 30, 2001

To: [redacted], **Lt. Lonnie Hutchens, FF. Kirk Hutchens, FF. Bob Dibell, FF. Andy Specht, FF. Jeremy Young, FF. Mark Powers, FF. Sondra Smith**

From: **Deputy Chief Arcaro**

Re: **Mock D.U.I. Crash Demonstration**

I would like to take this opportunity to thank you for participating in the mock D.U.I. crash demonstration at Conneaut High School.

Your professionalism and skill was evident and appreciated by those that attended the demonstration. I'm sure that you made an impact on many of the students that attended.

Again, fine job and keep up the good work.

c.
Batt. Chief Gildone
City Manager
file

NORTHWEST AMBULANCE DISTRICT

Serving AUSTINBURG TOWNSHIP, HARPERSFIELD TOWNSHIP, GENEVA CITY AND TOWNSH

1324 HARPERSFIELD ROAD
GENEVA, OHIO 44041

FAX
(440) 466-9469

TELEPHONE
(440) 466-490

February 10, 2001

Conneaut Station No. Three
392 Furance Rd.
Conneaut, Ohio 44030

Attn: Jon Arcaro, [redacted], and Jeremy Young

Dear Jon, [redacted], and Jeremy,

We want to thank you for your prompt and professional response with Conneaut Station No. Three's airboat to our call for mutual aid for a river rescue on the Grand River today.

Without your airboat and your expertise, the rescue would have been infinitely more dangerous and potentially life-threatening for both victims and rescuers alike. Believe us, we both gave a collective sigh of relief when our dispatcher radioed that you were enroute.

We are lucky indeed to have such a rescue craft with a well trained crew available in Ashtabula County to respond to emergency water rescues. We surely appreciate it and we hope the city of Conneaut and its citizens realize how lucky they are to have such dedicated and talented people in their community.

The three men that were stranded soaking wet, freezing cold and definitely suffering from exposure on that island in the the middle of the racing, icy cold Grand River, we're sure, will never forget you. All three men were doing well after getting dry and warm and extremely grateful, if not albeit, a tad embarassed.

Thanks again,

Sandy Lehman, EMT-P Tim Parks, EMT-P
C Shift Duty Crew

cc: Vincent T. Gildone, Asst. Chief, Conneaut Fire Dept. Station
Bim Orrenmaa, Fire Chief, Conneaut Fire Dept.
Robert Herron, Conneaut City City Manager

CITY OF ASHTABULA

OFFICE OF THE POLICE CHIEF

110 WEST 44TH STREET
ASHTABULA, OHIO 44004-6915

DAVID M. COLUCCI
CHIEF OF POLICE

(440) 992-7125
(440) 992-7172
FAX (440) 998-4523

To: [redacted]

Re: West 43 rd Street & West Avenue [redacted]

Date: 10/20/00

[redacted]

Early this morning, while on patrol, you took the time to check out a couple individuals which resulted in a foot chase and subsequent arrest on an individual for drug related charges and resisting arrest. It is comforting for both the public and this city to know that officers are being observant and diligent in their duties. Thank you for taking your duties seriously.

David M Colucci
Chief of Police

cc: Operations



CITY OF ASHTABULA

OFFICE OF THE POLICE CHIEF

110 WEST 44TH STREET
ASHTABULA, OHIO 44004-6915



DAVID M. COLUCCI
CHIEF OF POLICE

(440) 992-7125
(440) 992-7172
FAX (440) 998-4523

To: Captain Varckette [redacted]
Captain DiAngelo — Ptlm. Greenberg
Det. Ptlm. Pouska — Ptlm. Janek
Det. Ptlm. Altonen — Ptlm. Koski
Det. Ptlm. Oatman — Ptlm. Tulino
Aux. Ptlm. Collins — Aux. Ptlm. Perry

Re: Drug Operation [redacted] 9/20/00

Date: 9/27/00

Our drug problem, like in many communities, takes not only and individual effort in combating, but collective initiatives are important for safety reasons and hopefully sends a message. The drug problem will never be completely driven out but continued efforts such as this operation have to be done from time to time, when sufficient information is available. Cooperative efforts amongst all of you is what makes it all worth while. Teamwork, initiative and volunteering to help do this type of operation is so important today. It is easy to complain about the problem or say it is someone else's problem and turn your head. Keep up the good work no matter if some feels we are not trying to make a difference. Thank you.

Sincerely,

David M Colucci
Chief of Police

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
KATHERINE S. RIEDEL
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN F. THOMAS
TAMARA A. WETHERHOLT

TELEPHONE
(440) 576-3642
FACSIMILE
(440) 576-3692
TAX UNIT
(440)576-3734
VICTIMS/WITNESS ASSISTANCE
GLEN V. OSBURN
(440) 576-3523

January 24, 2000

Ashtabula Police Department
Chief David Colucci
110 West 44th Street
Ashtabula, OH 44004

RE: State of Ohio vs. Terance Lamont Clark: Case No. [redacted]
Ashtabula County Court of Common Pleas

Dear Chief Colucci:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically [redacted] for their efforts during the prosecution of Terance Lamont Clark in the above referenced case. [redacted] thorough investigation greatly assisted this office in bringing the appropriate conclusion to this case. The defendant was found guilty by a jury of Trafficking in Cocaine, with sentencing at a later date.

I look forward to a continuing relationship of mutual cooperation with your department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

TLS/pas

cc: [redacted]

184th

Captain Pasquale F. DiAngelo

Division of Police

October 27, 1999

TO: Ptlm. Aaron Greenberg
[redacted]

RE: [redacted]
Wanted Person

Gentlemen;

I reviewed the above-cited incident report. You exhibited the traits of aggressive, conscientious police officers, thus preventing a potentially dangerous situation from occurring.

Your actions and performance are commendable, reflecting positively on the Ashtabula City Police Department. Keep up the good work.

Very truly yours,

P.F. DiAngelo, Captain
Operations Commander

110 W. 44th • Ashtabula, Ohio 44004 • (216) 998-1141 • (216) 998-2221 • Fax: (216) 998-4523

CITY OF ASHTABULA

OFFICE OF THE POLICE CHIEF

110 WEST 44TH STREET
ASHTABULA, OHIO 44004-6915

DAVID M. COLUCCI
CHIEF OF POLICE

(440) 992-7125
(440) 998-1141
FAX (440) 998-4523

To: [redacted]

Re: *Letter of Commendation*
Attempted Suicide [redacted]

Date: August 23, 1999

I extend a commendation to you for the fine job that you did concerning Cheryl Dombroski. You were able to keep her from jumping off the bridge at Lake Avenue & West 19th, due to being calm and showing great poise in the handling of this situation. Keep up the good work. As you know, our primary job is to protect life.

Sincerely,

David M Colucci
Chief of Police

CC: File

Ohio's Sharpest Corner A Resort A

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 440
Telephone (440) 593-
Fax (440) 593-696

May 6, 1998

MEMO TO: [redacted] Roger Litwiler and Steve Perkio
Dispatchers Gayle Gurto and [redacted]

SUBJECT: Incident of [redacted]

Dear Taylor:

I would like to take this opportunity to thank you for coming out to assist on [redacted] n the incident involving the shooting of two firemen in Monroe Township.

Whether it was to handle other calls or to assist dispatch, however you helped made a difference and was appreciated.

Once again, thank you.

Very truly yours,

Rocco N. Russo

Rocco N. Russo
Chief of Police

RNR/las

Cc: Robert Herron, City Manager

SDI SCUBA DIVING INTERNATIONAL

International Training
Verification Letter

2025-06-09

This letter is to verify that [redacted] (Number: [redacted]) has successfully completed the course requirements for:

SDI Open Water Scuba Diver

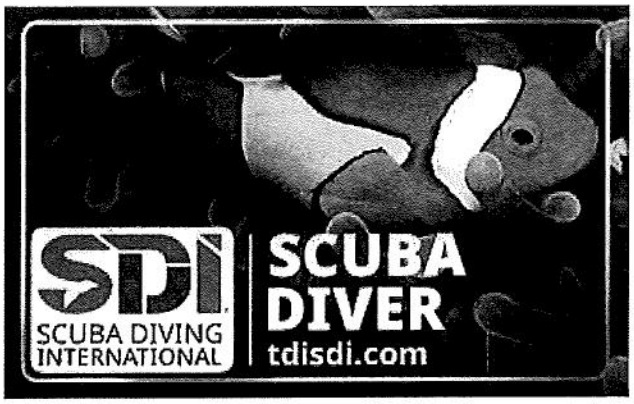
On: 2025-06-07

The instructor was Nicole Tupek, Member: #32424 at the location: Diver's World of Erie, Inc..

If you have any questions, please contact World HQ at +1-207-729-4201 or +1-888-778-9073 or by e-mail at worldhq@tdisdi.com

Thank you,

Scuba Diving International
International Training
www.tdisdi.com



[redacted]

SDI

Has completed the course requirements for the rating of:

Cert: [redacted]
Date: 2025-06-07

SDI Open Water Scuba Diver

Facility: Diver's World of Erie, Inc.
Erie, Pennsylvania United States
Inst: Nicole Tupek Member: #32424
Asst: Jason Travitz Member: #27566

RSTC Member | EUF/ISO #9001 Certified | www.tdisdi.com

diver's world

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE CONFERENCE COURSE INDICATED BELOW

High-Risk Unified Commander (HRUC)

June 12, 2024

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE CONFERENCE COURSE INDICATED BELOW

Search Warrant Planning Ops by Dayton PD

June 13, 2024

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

July 11, 2023

by completing the following exam:

Inquiry Test

This certificate is good through

July 11, 2025



- OHIO ATTORNEY GENERAL -

RECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

[redacted]

has completed the Ohio Attorney General's online training course

OHLEG Security
Training 2022

Dave Yost

DAVE YOST, OHIO ATTORNEY GENERAL

April 25, 2022

DAVE YOST
OHIO ATTORNEY GENERAL

AXON Academy

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

CONNEAUT POLICE DEPARTMENT

IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

TASER(enter CEW) CEW V.21
USER CERTIFICATION COURSE

TRAINING CERTIFICATE

ISSUED 12-10-2019

AXON TRAINING
CERTIFIED



- OHIO ATTORNEY GENERAL -

RECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

[redacted]

has completed the Ohio Attorney General's online training course

OHLEG Security
Training 2022

Dave Yost

DAVE YOST, OHIO ATTORNEY GENERAL

April 25, 2022

DAVE YOST
OHIO ATTORNEY GENERAL

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

COVID-19 FOR LOCAL GOVERNMENT PERSONNEL

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 07, 2020

Starlet Franz
Training Coordinator

PRAETORIAN DIGITAL

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

INFECTIOUS AND COMMUNICABLE DISEASES

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 07, 2020

Starlet Franz
Training Coordinator

PRAETORIAN DIGITAL

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

LICENSES/CERTIFICATES: EMT 72429

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

AIRBORNE AND BLOODBORNE PATHOGENS

COURSE # 18-PRAE-F3-1380

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 07, 2020

David K. Tan, M.D., EMT-T, FAAEM
Medical Director, Online Training

This continuing education activity is approved by the Commission on Accreditation for Pre-Hospital Continuing Education (CAPCE)
Course #: 18-PRAE-F3-1380, CEH Number and Type: 1 CEH of .
You have participated in a continuing education program that has received CAPCE approval for continuing education credit.

CEH Type: First Responder, Basic or Advanced
This document must be retained for a period of four years.

CAPCE Provider: Lexipol Learning, Provider No.: Prae1999
200 Green Street, Suite 200, San Francisco, CA 94111
Internal ID Provider: Lexipol Learning, Provider No.:
200 Green Street, Suite 200, San Francisco, CA 94111

If you have any comments regarding the quality of this program and/or your satisfaction with it, please contact CAPCE at: 12300 Ford Road, Suite 350, Dallas, Texas 75234 - 972.247.4442- iscott@capce.org

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

COVID-19 FOR LAW ENFORCEMENT

COURSE # 20238-2003

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 06, 2020

Starlet Franz
Training Coordinator

IADLEST Certified

PRAETORIAN DIGITAL





This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Trooper Coates Killer Interview

Completed on: April 20, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Child Abuse and Neglect
Completed on: March 20, 2020

BoatU.S. Foundation for Boating Safety & Clean Water

NASBLA

This Certificate is Awarded to

[redacted]

In acknowledgement of successful completion of the BoatU.S. Foundation's Online Boating Safety Course on:

September 08, 2019

This course is an interactive, non-proctored exam provided at no cost on the Internet by the BoatU.S. Foundation for Boating Safety and Clean Water, 147 Old Solomon's Island Rd. Suite 513, Annapolis, MD 21401 (703)461-2878 www.BoatUS.org

The Online Boating Safety Course is approved by the National Association of Boating Law Administrators (NASBLA) and recognized by the US Coast Guard.

State Test: Ohio

By signing this certificate, I certify that I successfully completed the BoatU.S. Foundation's Online Boating Safety Course on my own and without the assistance of others. (Failure to sign this certificate invalidates its authenticity.)

[redacted]

Signature [redacted]

NASBLA approved in: Ohio

[redacted]

OH NASBLA

BoatU.S. Foundation for Boating Safety & Clean Water

Award Date: September 08, 2019

- OHIO ATTORNEY GENERAL -
RECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

[redacted]

For successfully completing the Webcast course

OHLEG Security Training

Issued on
July 10, 2019
Expires in 2 years

Joseph A. Morbitzer, BCI SUPERINTENDENT

* No CPT Hours
84f6a96ab815f3100b8a41a886f0618426c8e010

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

June 12, 2019

by completing the following exam:

Inquiry Test

This certificate is good through

June 12, 2021

Certificated Rescue Courses Completed by [redacted]

Emergency Medical Technician Ohio Department of Public Safety. April 1994

Medical Issues Ashtabula County Emergency Medical Services Advisory Council. March 1994

Haz Mat Ashtabula County Emergency Medical Services Advisory Council. April 1994

Head Injury Ashtabula County Emergency Medical Services Advisory Council. May 1994

Trauma, a General Approach Ashtabula County Emergency Medical Services Advisory Council. May 1994

Respiratory Emergencies Ashtabula County Emergency Medical Services Advisory Council. June 1994

Abdominal Injuries Ashtabula County Emergency Medical Services Advisory Council. July 1994

Crane Operations Conneaut Fire Department. August 1994

Environmental Injuries Ashtabula County Emergency Medical Services Advisory Council. August 1994

Pediatric Emergencies Ashtabula County Emergency Medical Services Advisory Council. August 1994

Trauma Airway Ashtabula County Emergency Medical Services Advisory Council. August 1994

Geriatrics Ashtabula County Emergency Medical Services Advisory Council. August 1994

Chest Decompression Ashtabula County Emergency Medical Services Advisory Council. September 1994

Childbirth and OB Emergencies Ashtabula County Emergency Medical Services Advisory Council. September 1994

Esophageal Intubation Ashtabula County Emergency Medical Services Advisory Council. October 1994

Firefighter 1A Ohio Department of Public Safety. April 1995

Fire Education Conference Kent State University. March 1995

CPR Update Ashtabula County Emergency Medical Services Advisory Council. March 1995

CPR Update Conneaut Rescue Squad. February 1996

C-Spine Immobilization Conneaut Rescue Squad. June 1996

Heavy Rescue Conneaut Fire Department. September 1996

Esophageal Intubation Course Ashtabula County Emergency Medical Services Advisory Council. November 1996

Ashtabula County EMS Conference Ashtabula County Emergency Medical Services Advisory Council. November 1996

Emergency Medical Technician Intermediate National Registry of Emergency Medical Technicians. December 1996

Managing Company Tactical Operations National Fire Academy. May 1997

Farm Rescue County Emergency Medical Services Advisory Council. September 1997

Fire Service Dispatching Power Phone. November 1997

Pediatric Airway County Emergency Medical Services Advisory Council. November 1997

EMS Special Conference University of Pittsburgh Medical Center Center for Emergency Medicine. February 1998

IV Equipment University Hospitals Brown Memorial. March 1998

Legal Aspects of EMS Ashtabula County Emergency Medical Services Advisory Council. November 1998

Advanced Cardiac Life Support Review University Hospitals Brown Memorial. March 1999

Managing Cardiothoracic Trauma NY College for Trauma and Emergency Care. September 1999

Clinical Training Session Brown Memorial Hospital Emergency Department. October 1999

Chemical Injuries Journal of Emergency Medicine. December 1999

Chronic Care Journal of Emergency Medicine. December 1999

GI Bleeds Journal of Emergency Medicine. December 1999

Wound Assessment Journal of Emergency Medicine. December 1999

EMS Symposium (Bariatrics, DNR, MRSA, Geriactrics, People Care) Conneaut Rescue Squad. January 2000

Hazardous Materials Operations Ohio Fire Academy. January 2000

Crush Syndrome Journal of Emergency Medicine. January 2000

RSV Journal of Emergency Medicine. February 2000

Hepatitis Journal of Emergency Medicine. June 2000

Arthritis Journal of Emergency Medicine. June 2000

Hyperbaric Journal of Emergency Medicine. June 2000

Esophageal Varicies Journal of Emergency Medicine. September 2000

Warm Weather Journal of Emergency Medicine. September 2000

Spinal Cord Injuries Journal of Emergency Medicine. September 2000

Ocular Trauma Journal of Emergency Medicine. January 2001

Advanced Cardiac Life Support Review University Hospitals Brown Memorial Hospital. January 2001

Hypertensive Emergencies Journal of Emergency Medicine. January 2001

Subcutaneous Emphysema Journal of Emergency Medicine. June 2001

Cardiac Tamponade Journal of Emergency Medicine. June 2001

Patient Assessment Journal of Emergency Medicine. June 2001

Issues in Hypothermia Journal of Emergency Medicine. June 2001

Air Bag Rescue University Hospital Medivac. November 2001

Trauma University Hospitals Medivac. November 2001

Pediatric Skills Station University Hospitals Medivac. November 2001

Pediatric Medical Emergencies University Hospitals Medivac. November 2001

Unresponsive Patients Journal of Emergency Medicine. November 2001

Airway Management Ashtabula County Emergency Services Council. November 2001

Septic Shock Journal of Emergency Medicine. December 2001

Aneurysm Journal of Emergency Medicine. January 2002

Cancer Journal of Emergency Medicine. February 2002

Confined Space Rescue Cleveland State University. April 2002

Confined Space Entry Cleveland State University. May 2002

Acute Abdominal Emergency Journal of Emergency Medicine. June 2002

Chest Pain Journal of Emergency Medicine. August 2002

Transient Eschemic Attack Journal of Emergency Medicine. August 2002

Anaphylaxis Journal of Emergency Medicine. August 2002

Congestive Heart Failure and COPD Journal of Emergency Medicine. September 2002

Pediatric Emergencies University Hospitals of Cleveland. November 2002

Pulse Oximetry University Hospitals of Cleveland. November 2002

[redacted]

Advanced Cardiac Life Support Review University Hospitals of Cleveland. January 2003

Seizures Journal of Emergency Medicine. February 2003

[redacted]

Traumatic Brain Injury Journal of Emergency Medicine. August 2003

Femur Fracture Journal of Emergency Medicine. August 2003

[redacted]

Radiological Training Conneaut Fire/EMS. October 2003

[redacted]

Fire Extinguisher Training Ashtabula Fire Department. March 2004

Basic Life Support Health Care Provider American Heart Association. September 2004

[redacted]

Triage Assessment Community Care Ambulance. October 2005

Triage Assessment Community Care Ambulance. January 2006

Pediatric Emergencies University Hospitals EMS and Disaster Preparedness. November 2006

Disaster Medicine D-Mat University Hospitals EMS and Disaster Preparedness. November 2006

EMS Street Survival University Hospitals EMS and Disaster Preparedness. November 2006

Non-certificated Classes and Periods of Instruction

Water Rescue and Air Boat Operations Conneaut Fire Department. 1995

Vehicle Extrication Conneaut Fire Department 1995

Interpreting LEADS Terminal Printout Ohio Bureau of Motor Vehicles. February 1999

Cell Extraction and Inmate Restraint Ashtabula Police Department. Ptl. J. Makey January 1999

Spinal Immobilization Adult and Pediatric Pulse Emergency Medical Video. 2000

Pediatric Asthma Pulse Emergency Medical Video. 2000

Hazardous Materials Decontamination Pulse Emergency Medical Video. 2000

Stroke Pulse Emergency Medical Video. 2000

Acute Myocardial Infarction Pulse Emergency Medical Video. 2000

Ectopic Pregnancy Pulse Emergency Medical Video. 2000

Ventricular Tachycardia in Geriatric Patients Pulse Emergency Medical Video. 2000

Emphysema Pulse Emergency Medical Video. 2000

Airway Management Basic and Advanced Pulse Emergency Medical Video. 2000

Clot busting drugs and defibrillation Pulse Emergency Medical Video. 2000

SIDS Pulse Emergency Medical Video. 2000

Pediatric Respiratory Emergencies Pulse Emergency Medical Video. 2000

ACLS Update and Changes Pulse Emergency Medical Video. 2000

Cardiac Drugs Pulse Emergency Medical Video. 2000

Geriatric Hip Fractures Pulse Emergency Medical Video. 2000

EMS Considerations in Hostage Situations Federal Bureau of Investigation, SA Ken Wersak. June 2001

Computerized Criminal History Operator Ohio LEADS Control. 2001

Hazardous Materials Technician Ashtabula Local Emergency Planning Commission. January 2001

Rope Rescue and Rappelling Conneaut Fire Department. February 2002

Trench Rescue Cleveland State University. February 2002

[redacted]

Clandestine Methamphetamine Laboratories United States Drug Enforcement Administration, Quantico, VA. June 2003

[redacted]

Automobile Searches Ohio Peace Officer's Training Academy. November 2006

Miranda Rights Ohio Peace Officer's Training Academy. November 2006

Consent Searches Ohio Peace Officer's Training Academy. November 2006

Ohio Sexual Offender Registration and ESORN Ashtabula County Sheriff's Office. November 2006

Electronic Crime Scene Response United States Secret Service. March 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. March 3, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. March 21, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. April 18, 2007

Mobile Data Terminal Certification Ashtabula County Sheriff's Office. May 1, 2007

Electronic Crime Trends Seminar Ashtabula County Sheriff's Office. May 3, 2007

K-9 Usage In service Ashtabula County Sheriff's Office. May 13, 2007

FATS Simulator Ashtabula County Sheriff's Office. May 22, 2007

Search and Seizure Review Ashtabula County Sheriff's Office. June 3, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. June 13, 2007

Homeland Security Land Based Security Patrol Ashtabula County Sheriff's Office June 27, 2007

Night Fire Training Ashtabula County Sheriff's Office July 20, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. August 1, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. September 19, 2007

OPOTA Handgun Qualifications Ashtabula County Sheriff's Office September 21, 2007

OPOTA Shotgun Qualifications Ashtabula County Sheriff's Office September 21, 2007

OPOTA Tactical Rifle Qualifications Ashtabula County Sheriff's Office October 11, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. July 13, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. December 12, 2007

Special Weapons and Tactics Training Ashtabula County SWAT Team. February 20, 2008

Distraction Device Qualifications. Ashtabula County SWAT Team. May 20, 2008

Less Lethal Been Bag Qualifications. Ashtabula County SWAT Team. May 20, 2008

Special Weapons and Tactics Training Ashtabula County SWAT Team. April 17, 2008

Special Weapons and Tactics Training Ashtabula County SWAT Team. May 20, 2008

OPOTA Shotgun Qualifications Ashtabula County Sheriff's Office May 24, 2008

Special Weapons and Tactics Training Ashtabula County SWAT Team. August 15, 2008

Tactical Shooting Training Ashtabula County Sheriff's Office. July 26, 2008

OPOTA Handgun Qualifications Ashtabula County Sheriff's Office September 24, 2008

Night Fire Training Ashtabula County Sheriff's Office October 15, 2008

Special Weapons and Tactics Training Ashtabula County SWAT Team. October 21, 2008

MARCS Radio Training Ashtabula County Sheriff's Office. December 4, 2008

OPOTA Sniper Rifle Qualifications Ashtabula County SWAT Team. December 18, 2008

Special Weapons and Tactics Training Ashtabula County SWAT Team. January 30, 2009

Bloodstain Pattern Analysis Recertification Ashtabula County Sheriff's Office. February 5, 2009

Special Weapons and Tactics Training Ashtabula County SWAT Team. February 10, 2009

Special Weapons and Tactics Training Ashtabula County SWAT Team. February 19, 2009

Special Weapons and Tactics Training Ashtabula County SWAT Team. March 19, 2009

Classes instructed

Ashtabula Police Department

- Alcohol Detection and Prosecution August 2001
- K-9 Medical Considerations September 2001
- Drug Laws as the effect rental housing. *Taught for AREA housing group.* November 2003
- Communications Requirements for Police Operations. *Presentation for Ashtabula City Council.*
- Assessment Centers for Police Promotions. *Presentation for Ashtabula City Safety Forces Committee.* 2003

Ashtabula County SWAT Team

- Officer Down and Shooting from a Moving Vehicle November 2004
- Advanced firearms training November 2006
- Response to Active Shooter April 2007
- Tactical Emergency Medicine November 2007
- Tactical Emergency Medicine Practical December 2007
- Response to Active Shooter March 2008
- Response to Active Shooter October 2008
- Active Shooter Awareness January 2008 (KSU Staff)

Ashtabula County Sheriff's Office

- Alcohol Detection and Prosecution February 2008
- Alcohol Detection and Prosecution March 2008
- Alcohol detection and Prosecution Update March 2009



EMS

- IV practical Exercise. University Hospitals Brown Memorial Paramedic Program. April 2007
- Triage and Patient Assessment. Community Care Ambulance. November 2005
- Triage and Patient Assessment. Community Care Ambulance. May 2007
- Trauma Care and Assessment Community Care Ambulance. January 2009

Conneaut Fire Department

- Triage and wounds. November 2001
- Hydrant Operations. 2000, 2001, 2002

Publications

[redacted]

RICHARD CORDRAY
OHIO ATTORNEY GENERAL

RECEIVED
SEP 1 6 2010

September 10, 2010

Chief Jon J. Arcaro
Conneaut Police Department
294 Main Street, City Hall
Conneaut, OH 44030-2650

Re: Update Training Evaluation for [redacted]

Dear Chief Arcaro:

This letter shall serve as notice that no update training is required.

This determination is based solely upon the information reported to the Commission, and does not relieve this officer or the appointing authority of any obligation to comply with the training requirements of O.A.C. 109:2-1-12. This determination does not relieve this officer of the annual firearms re-qualification and Continuing Professional Training requirements.

Should you have any questions or concerns regarding this determination, please feel free to contact me at the number provided below.

Sincerely,

Jeff Frazier
Certification Officer
Professional Standards Section

cc: Officer

JF/jw

Ohio Peace Officer Training Academy
P.O. Box 309 • London,, Ohio 43140 • PHONE 740-845-2700/ 800-346-7682 • FAX: 740-845-2675 • www.ag.state.oh.us
4055 Highlander Pkwy Suite B • Richfield, Ohio 43140 • 330-659-2311/ 888-436-7282 • FAX: 330-659-2401

Division of Emergency Medic

Certification Verificati

Search by:

SSN Cert No [redacted] Search Clear

Certification Number: [redacted]

Certification	Status	Exp Date
Paramedic	[redacted]	
Paramedic		
Special Topic Instruct		
Volunteer Firefighter		
Special Topic Instruct		
Paramedic		
Paramedic		
Paramedic		
Intermediate		
Basic EMT		

Data generated 9/8/2010 8:58:36 AM

Kent State University

[redacted] is certified 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
Cum Laude
with all the honors, rights, and privileges of that degree.
Given at Kent, Ohio, this twenty-first day of August

[redacted]

R. Douglas Cowan
Chairperson, Board of Trustees

Carol Cartwright
President of the University

Elizabeth Sobieski-Schenken
University Registrar

Joseph W. Dudley
Dean, College of Arts and Sciences

OHIO PEACE OFFICER TRAINING COMMISSION

AND

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

[redacted]

has successfully completed the advanced training course

01-065-07-02: Arrest, Search Warrants, Search & Seizure
(Practical)

at the Ohio Peace Officer Training Academy given

November 19 - 20, 2007

Marc E. Dann
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Tomi L. Dorris, Executive Director
Ohio Peace Officer Training Commission

State of Ohio
OCJS
Office of Criminal Justice Services

Northern Ohio Violent Crime Consortium

Firearms Investigations Training

awarded to:

[redacted]

Ashtabula County Sheriff's Office

Completion of Training Course
8.00 hours

March 18, 2008

William J. Edwards, Esq.
Acting United States Attorney
U.S. Attorney's Office,
Northern District of Ohio

William J. Edwards

Craig A. Tame, Esq.
Law Enforcement Coordination Manager
U.S. Attorney's Office, Northern District of Ohio

Craig A. Tame



OHIO PEACE OFFICER TRAINING COMMISSION

AND

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

[redacted]

has participated in the advanced training course

53-437-10-01: MCTFC - Interviews and Body Language

at the Ohio Peace Officer Training Academy given

April 27, 2010

Richard Cordray
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Ron Ferrell, Executive Director
Ohio Peace Officer Training Commission

This is to certify that

[redacted]

has successfully completed the advanced training course

06-152-08-01: Basic Photography

at the Ohio Peace Officer Training Academy given

April 7 - 11, 2008

Marc E. Dann
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Tomi L. Dorris, Executive Director
Ohio Peace Officer Training Commission

Multijurisdictional Counterdrug Task Force Training

This is to certify that

[redacted]

Has satisfactorily completed the following 16 hour MCTFT training course held at

BROOKLYN HEIGHTS, OH

Courtroom Testimony

Training held 8/28/2007 through 8/29/2007

President
St. Petersburg College

Eileen Lahaie
MCTFT Director

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

The Ohio State Highway Patrol

Certifies

[redacted]

has completed a course of instruction in

Basic Sniper

August 13, 2007 – August 17, 2007

DEPARTMENT OF PUBLIC SAFETY
STATE HIGHWAY PATROL
OHIO
STATE OF OHIO

Major Peyton L. Watts
Training Officer

Col. [redacted]
Superintendent

CERTIFICATE OF TRAINING

[redacted]

HAS PARTICIPATED AND SUCCESSFULLY COMPLETED AN

ADVANCED TRAINING COURSE IN

BASIC SWAT

OCTOBER 21-25, 2002

MINERVA, OHIO

DEFENSE TRAINING

MATTHEW C. SCHAEFER
PRESIDENT

JEFFRY E. CARPER
VICE-PRESIDENT

INTENSE TRAINING FOR EXTREME ENCOUNTERS®

Ohio Peace Officer Training Commission

[redacted]

has participated in the advanced training course

SPANISH FOR LAW ENFORCEMENT

at the Ohio Peace Officer Training Academy.

February 7 - 9 , 2001

Betty D. Montgomery
Attorney General

James A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission

Ohio Peace Officer Training Commission

[redacted]

has participated in the advanced training course

BULLETPROOF MIND

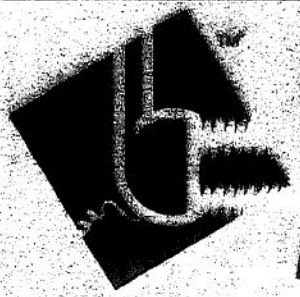
at the Ohio Peace Officer Training Academy.

JANUARY 22, 2001

Betty D. Montgomery
Attorney General

Joshua A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission



POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.℠

It is Hereby confirmed that

PRESERVATION OF LIFE

[redacted]

Has Successfully Completed the Requirements of the

Emergency Crime Scene Responder℠

Training Program

Held at Conneaut Police Dept., OH *on* May 2, 1998.

AND EVIDENCE

Phil M. Salafia, President

Patrick W. Lanzetta, MD, Medical Director

This continuing education activity is approved by the Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS).

Approval #: 28-F2A-0176 *CEH Type:* 7.0 Basic

©1996 PowerPhone, Inc

ASHTABULA COUNTY
SHERIFF'S DEPARTMENT

William R. Johnson - Sheriff

Certificate of Completion

PRESENTED THIS 13th DAY OF June 19 97

KNOW ALL MEN BY THESE PRESENTS THAT

[redacted]

SUCCESSFULLY COMPLETED 20 hour Defensive Driving Course

Instructor

William R. Johnson
William R. Johnson, Sheriff

LITHO IN U.S.A.

© BOES 462-1/2

Ohio Peace Officer Training Commission

and

The Office of the Attorney General

This is to certify that

[redacted]

has participated in the advanced training course

53-438-10-01: Senate Bill 77

at the Ohio Peace Officer Training Academy given

August 2, 2010

Richard Cordray
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Robert A. Fiatal, Executive Director
Ohio Peace Officer Training Commission

OHIO

PEACE OFFICER TRAINING COMMISSION

OHIO PEACE OFFICER TRAINING COMMISSION

AND

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

[redacted]

has participated in the advanced training course

53-437-10-01: MCTFC - Interviews and Body Language

at the Ohio Peace Officer Training Academy given

April 27, 2010

Richard Cordray
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Ron Ferrell, Executive Director
Ohio Peace Officer Training Commission

OHIO DEPARTMENT OF HEALTH

BUREAU OF ALCOHOL AND DRUG TESTING

This is to certify that

[redacted]

has qualified for and is hereby issued Senior Operator permit number [redacted]
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.

Issued September 5, 2008

This permit expires **September 5, 2009**

DEPARTMENT OF HEALTH * STATE OF OHIO *

Application Date
April 22, 2008

Director of Health, M.D.

DIRECTOR OF HEALTH

©1998 GOES 3461
All Rights Reserved

LITHO. IN U.S.A.

U. S. Department of Justice
Federal Bureau of Investigation

Training School

Certificate of Attendance

This is to certify that

[redacted]

attended and completed

OBSERVER/SNIPER SCHOOL

held at

Camp Perry, Port Clinton, Ohio

from *June 1, 2009* **to** *June 5, 2009*

and is awarded this certificate as evidence of satisfactory completion of the course of training.

C. FRANK FIGLIUZZI
Special Agent in Charge
Federal Bureau of Investigation
Cleveland, Ohio

Multijurisdictional Counterdrug Task Force Training

This certifies that

[redacted]

has successfully completed the sixteen-hour course

Introduction to Conspiracy Investigations

Completed this day of May 22, 2009

Carl M. Kuttler, President St. Petersburg College

Eileen Lahaie MCTFT Director

SPC

[redacted]

Mobile Data Terminals

CERTIFICATION

This document certifies that

[redacted]

has passed the

Mobile Data Terminals

test and should be afforded the rights and responsibilities pertaining thereto.

Awarded this
1st day of May, 2009

OHIO

PEACE OFFICER TRAINING COMMISSION

OHIO PEACE OFFICER TRAINING COMMISSION

AND

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

[redacted]

has successfully completed the advanced training course

06-167-09-01: ADAP/SFST Instructor Update

at the Ohio Peace Officer Training Academy given

January 22, 2009

Richard Cordray
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Robert Fiatal, Interim Executive Director
Ohio Peace Officer Training Commission

Shaker Heights Police Department
SWAT Team 1*
Firearms Re-qualification Program

Range Proficiency Record: Scope-Sighted Rifle

Name: [redacted] **Date:** 12 / 18 / 08

Weapon: SIGARMS **Model:** R93 LRS2 **Caliber:** .308
Weapon: REMINGTON **Model:** 700 **Caliber:** .308
Weapon: COLT **Model:** CAR-A3 HBAR **Caliber:** .223

Ammunition used: FEDERAL 308WIN Match 168gr. Sierra Matchking BTHP
WINCHESTER Ranger .223REM 64gr. Power Point

Course of fire number: OPOTC-SSR-06 (Effective 01/01/2006)

Stage	Title	Target(s)	Distance	Time	Light Conditions	Mode of Carry	# of Rds.	Total Rds.
1	Medium Range .308	5	150 ft. (50 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	5
2	Long Range .308	5	300 ft. (100 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	5
	Total					Passing score is 100%	10	10
1	Medium Range .308	5	150 ft. (50 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
2	Long Range .308	5	300 ft. (100 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
	Total					Passing score is 100%	10	
1	Medium Range .223	5	150 ft. (50 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
2	Long Range .223	5	300 ft. (100 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
	Total					Passing score is 100%	10	

Passed: ✓ **Failed:** ___

Tested by: James A. Macisaac A/O [redacted]

Notes: _____

Bureau of Alcohol, Tobacco, Firearms and Explosives

Certification of Attendance

This is to certify that

[redacted]

Attended a

Outlaw Motorcycle Gang Overview

Held on October 16th, 2008

Hosted by
Ashtabula County Sheriff's Office
&
T.A.G. Law Enforcement Task Force

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: HANDGUN

NAME [redacted] AGENCY: Aeso

WEAPON MAKE: Glock MODEL: 22 SERIAL #: [redacted]

CALIBER: .40 AMMUNITION USED: Federal METHOD CARRY: _____

COURSE OF FIRE NUMBER: ***OPOTC-HG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	LONG RANGE SIGHT ALIGNMENT	1	50 Feet	18 Seconds	Normal	Carry Ready	6	6
2	AMIDEXTROUS ONE-HANDED	1	12 Feet	20 Seconds	Normal	Secured In Holster	12	11
3	LOW LEVEL LIGHT (Rounds Fired With Flashlight In Hand/Hold)	1	21 Feet	12 Seconds	Low Level	Secured In Holster	6	10-15-08 6
4	PROTECTIVE COVER	2 or 4 Depending On The Size Of The Range	21 Feet Shooting Distance, 50 Feet Starting Distance	40	Normal	Secured In Holster	8	8
5	HIP POSITION/REACT AND SHOOT/MULTIPLE TARGETS	3	5 Feet to 21 Feet	15	Normal	Secured In Holster	12	12
6	SHOOTING WHILE MOVING (F/B)	2	Forward – 30 Foot to 10 Feet, Backward – 10 Feet to 30 Feet	20 Seconds	Normal	Secured In Holster	8	7
7	SHOOTING WHILE MOVING (L to R & R to L)	2	On Line Parallel To Targets, at 15 Feet	20 Seconds	Normal	Secured In Holster	8	8
						PASSING SCORE IS 80% or 48 Rounds	60	TOTAL HITS 58

DATE TESTED: 9-24-08 PASSED: ✓ FAILED: ____

TESTED BY: 10-15-08 [signature] OPOTC REQUAL #: 0003259 EXP: 12/09

This is to certify that

[redacted]

has successfully completed the advanced training course

06-153-08-02: Crime Scene And Evidence Photography

at the Ohio Peace Officer Training Academy given

June 23 - 27, 2008

Nancy H. Rogers

Nancy H. Rogers
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Tomi L. Dorris

Tomi L. Dorris, Executive Director
Ohio Peace Officer Training Commission

Ron Fenton

From: Sgt. William M. Parkomaki [wparkomaki@cityofashtabula.com]
Sent: Tuesday, May 27, 2008 8:26 AM
To: Ron Fenton
Subject: training

The following team members were at training on 05202008

AM	PM
√Siebeneck	[redacted] ✓
√Febel (NFDD/Bean bag only)	Felt ✓
√Tulino	Simons ✓
√Barger (NFDD/bean bag only)	Distel ✓
√Emmett	Gerics ✓
√Zetlaw	Colby ✓
√Thomas	Pearce ✓
√Truckey (NFDD/bean bag/shield)	Tobie

Nelson and Brodsky stopped in.

Topics covered:
Re-Cert. NFDD
Re-Cert. .12ga bean bags
Shooting M4's with the shield (stationary and moving)
5 man arrest team w/shield
Officer down drills
Officer/victim rescue w/patrol car, shooting from moving vehicle.

If and when anyone trains on the FATS machine, please send me an inter-officer giving me the date and who did the training so I can get it into the officers training files in my office.

Thanks in advance

Fenton

[redacted]

STOUT	5/22
DANIELS	5/27
BERTOLASIO	5/23
SIEBENECK	5/29
KEMMERLE	5/24
MATT JOHNS	5/24

WE ALSO HAD A SEARCH + SEIZURE REVIEW AT THE BEGINNING OF THE SHIFT ON 06/03/07, 30 MINUTES IN LENG

- KEMMERLE
- SIEBENECK
- STOUT
- DANIELS
- [redacted]
- BERTOLASIO
- JOHNS

SGT.

ASHTABULA COUNTY SHERIFF'S OFFICE

25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047

INTER-OFFICE COMMUNICATION

TO : Chief Fenton
FROM : Dep. R. Siebeneck II
REF: Tactical Shoot

Chief, On 07-25 and 07-26-08 the following Deputies shot

1. Dep. Rick Schupska
2. Dep. Robert Ginn
3. Dep. John Bernardo
4. Dep. Anthony Mino
5. Dep. Rick Hazeltine
6. Dep. Ted Barger
7. [redacted]
8. Dep. Andy Specht
9. Dep. Ronald Siebeneck II

The shoot required the deputies to drive their vehicles next to a parked unit, they exited their vehicle where they found the parked unit had it's trunk open with an unloaded shotgun in it. They loaded the shotgun with two rounds and proceeded to a barricade where they addressed one threat with two rounds. They proceed back to the unit with the empty weapon, from the open passengers side door using good cover they addressed two more threats with six rounds of their handgun, two rounds to center mass and one to the head. Their weapons had been down loaded to only six rounds, they proceed to the rear of the vehicle and using good cover they reloaded their handguns and again addressed two more threats in the same manor with six rounds. All of the deputies were given instruction on reloads, use of cover and shooting multiple targets. All of the deputies shoot the course twice, showing improvement on the second pass.

Dep. R. Siebeneck II

Dep R Siebeneck II

Ohio Peace Officer Training Council

State of Ohio
Office of the Attorney General

This is to certify that

[redacted]

Has Completed

36-HOUR JAILER TRAINING, 5 DAY FACILITY

Held at

SACS TRAINING CENTER

21st NOVEMBER 95

Betty D. Montgomery
Attorney General

Colonel Warren H. Davies, Chairman
Ohio Peace Officer Training Council

Vernon C. Chesnutt, Executive Director
Ohio Peace Officer Training Council

School Commandant

JTF 95-015 95-571

Printed on Recycled Paper

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: SHOTGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Mossberg MODEL 500 SERIAL #: [redacted]

AMMUNITION USED: Aco

COURSE OF FIRE NUMBER: ***OPOTC-SG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	SNAP SHOOTING	1	20 Feet	3 Seconds Per Round	Normal	Carry Ready	3 Buckshot	3
2	LOW LEVEL LIGHT	1	20 Feet	4 Seconds Per Round	Low Level	Carry Ready	3 Buckshot	3
3	MULTIPLE TARGETS	2	20 Feet	3 Seconds Per 2 Rounds	Normal	Carry Ready	2 Buckshot	2
4	PROTECTIVE COVER	2	20 Feet Shooting Distance 10 Feet Standing Distance	10 Seconds	Normal	Carry Ready	2 Buckshot	2
5	SLUG RUN (Optional)	5 or 10	50 Feet	12 Seconds Per 5 Rounds	Normal	Shooting Position Of Choice	5 Slug	5
					NOTE: If The Department Does Not Use Slugs, Then The Slug Run Is Omitted For Requal.	PASSING SCORE: 100%	10 Buckshot If Slug Run Included: 5 Slugs	TOTAL HITS 15

DATE TESTED: 05/23/08 PASSED: ✓ FAILED: ____

TESTED BY: [signature] OPOTC REQUAL #: BFD 3413 EXP: 05-30-2010

Certificate of Appreciation

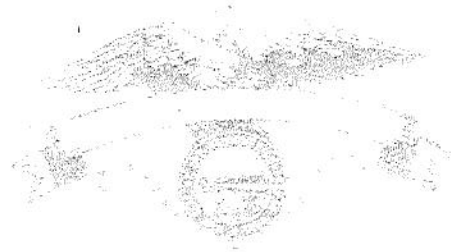
This certificate is awarded to

[redacted]

In recognition for participation at
ACJVS Reality Day

Anne Starcher — 5-2-08
Signature — *Date*

Ray Keller — 5-2-08
Signature — *Date*



This is to certify that

[redacted]

has successfully completed the advanced training course

06-152-08-01: Basic Photography

at the Ohio Peace Officer Training Academy given

April 7 - 11, 2008

Marc E. Dann
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Tomi L. Dorris, Executive Director
Ohio Peace Officer Training Commission

State of Ohio
OCJS
Office of Criminal Justice Services

Northern Ohio Violent Crime Consortium

Firearms Investigations Training

awarded to:

[redacted]

Ashtabula County Sheriff's Office

Completion of Training Course
8.00 hours

March 18, 2008

William J. Edwards, Esq.
Acting United States Attorney
U.S. Attorney's Office,
Northern District of Ohio

William J. Edwards

Craig A. Tame, Esq.
Law Enforcement Coordination Manager
U.S. Attorney's Office, Northern District of Ohio

Craig A. Tame



OHIO PEACE OFFICER TRAINING COMMISSION

AND

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

[redacted]

has successfully completed the advanced training course

01-065-07-02: Arrest, Search Warrants, Search & Seizure
(Practical)

at the Ohio Peace Officer Training Academy given

November 19 - 20, 2007

Marc E. Dann
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Tomi L. Dorris, Executive Director
Ohio Peace Officer Training Commission

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: POLICE RIFLE CARBINE

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Colt MODEL M4 SERIAL #: [redacted]

AMMUNITION USED: Federal

COURSE OF FIRE NUMBER: ***OPOTC-PRC-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	NUMBER OF ROUNDS	TOTAL ROUNDS
1	SNAP SHOOTING	1	20 Feet	2 Seconds Per 2-Shot String	Instructor's Option	12	12
2	MULTIPLE TARGETS	3	30 Feet	8 Seconds Per 12 Round String	Instructor's Option	12	12
3	PROTECTIVE COVER	4	30 Feet	20 Seconds Overall	Instructor's Option	12	10
4	MEDIUM RANGE	1	75 Feet	12 Seconds Per 12 Round String	Instructor's Option	12	12
5	MEDIUM RANGE (Shooting Position Of Choice)	1	150 Feet	15 Seconds Per 12 Round String	Instructor's Option	12	12
					Passing Score is 80% or 48 Rounds	**60 Rounds Total**	**TOTAL HITS** 58

DATE TESTED: 11-10-07 PASSED: ✓ FAILED: ____

TESTED BY: Ronald Fator OPOTC REQUAL #: 2633 EXP: 10-10-09

Certificate of Training

Kent State University

Public Safety Training & Research

Warren, Ohio

This certifies that

[redacted]

has satisfactorily completed 3 hours of continuing professional education in

Weapon Retention

Awarded at Warren, Ohio *this* 8th *day of* November *AD* 2007

Mark J. Durkin OPOTC6735
Instructor/Presenter

Catherine L. Kieley
Program Coordinator

Kent State University Trumbull
Ohio Basic Police Academy

OHIO PUBLIC SAFETY
EDUCATION • SERVICE • PROTECTION

OHIO DEPARTMENT OF PUBLIC SAFETY
- Administration
- Bureau of Motor Vehicles
- Emergency Management Agency
- **Emergency Medical Services Division**
- Office of Criminal Justice Services
- Ohio Homeland Security
- Ohio Investigative Unit
- Ohio State Highway Patrol

Bob Taft, Governor
Kenneth L. Morckel, Director
Richard N. Rucker
Executive Director

Emergency Medical Services
1970 West Broad Street
P.O. Box 182073
Columbus, Ohio 43218-2073
(614) 466-9447 • (800) 233-0785
www.ems.ohio.gov

[redacted]

[redacted]

Cert. #: [redacted]
Expiration Date: 11/05/2009

The above named person is issued this Certificate to Teach Special Topics as outlined in 4765.23 of the Ohio Revised Code and 4765-8-14 of the Ohio Administrative Code. The Certificate to Teach Special Topics is limited to the following topics:

Paramedic - Behavioral Emergencies
Paramedic - Communications
Paramedic - Environmental Emergencies
Paramedic - Patient Assessment (Medical
Paramedic - Triage/Transportation

Certified by:

Richard N. Rucker,
Executive Director

OHIO

PEACE OFFICER TRAINING COMMISSION

OHIO PEACE OFFICER TRAINING COMMISSION

AND

THE OFFICE OF THE ATTORNEY GENERAL

This is to certify that

[redacted]

has successfully completed the advanced training course

03-130-07-02: Bloodstain Evidence

at the Ohio Peace Officer Training Academy given

October 15 - 19, 2007

Marc E. Dann
Attorney General

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

Tomi L. Dorris, Executive Director
Ohio Peace Officer Training Commission

Certificate of Training

Kent State University

Public Safety Training & Research

Warren, Ohio

This certifies that

[redacted]

has satisfactorily completed 5 hours of continuing professional education in

Elder Abuse

Awarded at Warren, Ohio *this* 24th *day of* September *AD* 2007

Mary G. Wilson, M.A
Instructor/Presenter

Catherine Kieley
Program Coordinator

Kent State University Trumbull
Ohio Basic Police Academy

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: HANDGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Glock MODEL: 22 SERIAL #: [redacted]

CALIBER: .40 AMMUNITION USED: Federal METHOD CARRY: Security Holster

COURSE OF FIRE NUMBER: ***OPOTC-HG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	LONG RANGE SIGHT ALIGNMENT	1	50 Feet	18 Seconds	Normal	Carry Ready	6	5
2	AMIDEXTRIOUS ONE-HANDED	1	12 Feet	20 Seconds	Normal	Secured In Holster	12	12
3	LOW LEVEL LIGHT (Rounds Fired With Flashlight In Hand/Hold)	1	21 Feet	12 Seconds	Low Level	Secured In Holster	6	
4	PROTECTIVE COVER	2 or 4 Depending On The Size Of The Range	21 Feet Shooting Distance, 50 Feet Starting Distance	40	Normal	Secured In Holster	8	8
5	HIP POSITION/REACT AND SHOOT/MULTIPLE TARGETS	3	15 Feet to 21 Feet	15	Normal	Secured In Holster	12	11
6	SHOOTING WHILE MOVING (F/B)	2	Forward – 30 Foot to 10 Feet Backward – 10 Feet to 30 Feet	20 Seconds	Normal	Secured In Holster	8	7
7	SHOOTING WHILE MOVING (L to R & R to L)	2	On Line Parallel To Targets, at 15 Feet	20 Seconds	Normal	Secured In Holster	8	8
						PASSING SCORE IS 80% or 48 Rounds	~~60~~ 54	TOTAL HITS 51/54

DATE TESTED: 9.21.07 PASSED: ✓ FAILED: _____

TESTED BY: Dean Sielemek II OPOTC REQUAL #: RE 3413 EXP: 04-30-10

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: SHOTGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Mossberg MODEL 500 SERIAL #: [redacted]

AMMUNITION USED: _____

COURSE OF FIRE NUMBER: ***OPOTC-SG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	SNAP SHOOTING	1	20 Feet	2 Seconds Per Round	Normal	Carry-Ready	3 Buckshot	3
2	LOW LEVEL LIGHT	1	20 Feet	2 Seconds Per Round	Low Level	Carry-Ready	3 Buckshot	3
3	MULTIPLE TARGETS	2	20 Feet	3 Seconds Per 2 Rounds	Normal	Carry-Ready	2 Buckshot	2
4	PROTECTIVE COVER	2	20 Feet Shooting Distance, 30 Feet Starting Distance	15 Seconds	Normal	Carry-Ready	2 Buckshot	2
5	SLUG RUN (Optional)	5 or 1	50 Feet	12 Seconds Per 5 Rounds	Normal	Shooting Position Of Choice	5 Slug	5
					NOTE: If The Department Does Not Use Slugs, Then The Slug Run Omitted For Requal.	PASSING SCORE 100%	10 Buckshot, If Slug Run Included, 5 Slugs	TOTAL HITS 15

DATE TESTED: 9-21-07 PASSED: ✓ FAILED: ____

TESTED BY: Dep R. Siebenek II OPOTC REQUAL #: REQ 34/13 EXP: 4-30-10

353rd Civil Affairs Command

Presents this

CERTIFICATE OF APPRECIATION

To

[redacted]

For providing outstanding Combat Life Saver instruction during the 353rd CACOM 08-10 Premobilization Training Exercise from 5 Aug 2007 to 22 Aug 2007. Thanks to your dedication and hard-work, the deploying Soldiers of the 353rd CACOM received essential training that will undoubtedly save lives on the battlefield.

MARK A. CALABRESE
COL, MI
Training Director

22 August 2007

Certificate of Achievement

This certifies that

[redacted]

has successfully completed Highway Interdiction training.

May 31st – June 1st, 2007

OHIO NATIONAL GUARD COUNTERDRUG TASK FORCE

STATE HIGHWAY PATROL OHIO

OHIO HIDTA HIGH INTENSITY DRUG TRAFFICKING AREA

HIDTA

DHE DOMESTIC HIGHWAY ENFORCEMENT

METRICH ENFORCEMENT UNIT

CLEVELAND POLICE

SHERIFF

Subject: training
From: "Sgt. Jim Kemmerle" <jkemmerle@ashtabulacountysheriff.org>
Date: Mon, 21 May 2007 16:32:31 -0400
To: <rrfenton@ashtabulacountysheriff.org>
CC: <jkemmerle@ashtabulacountysheriff.org>

Chief,

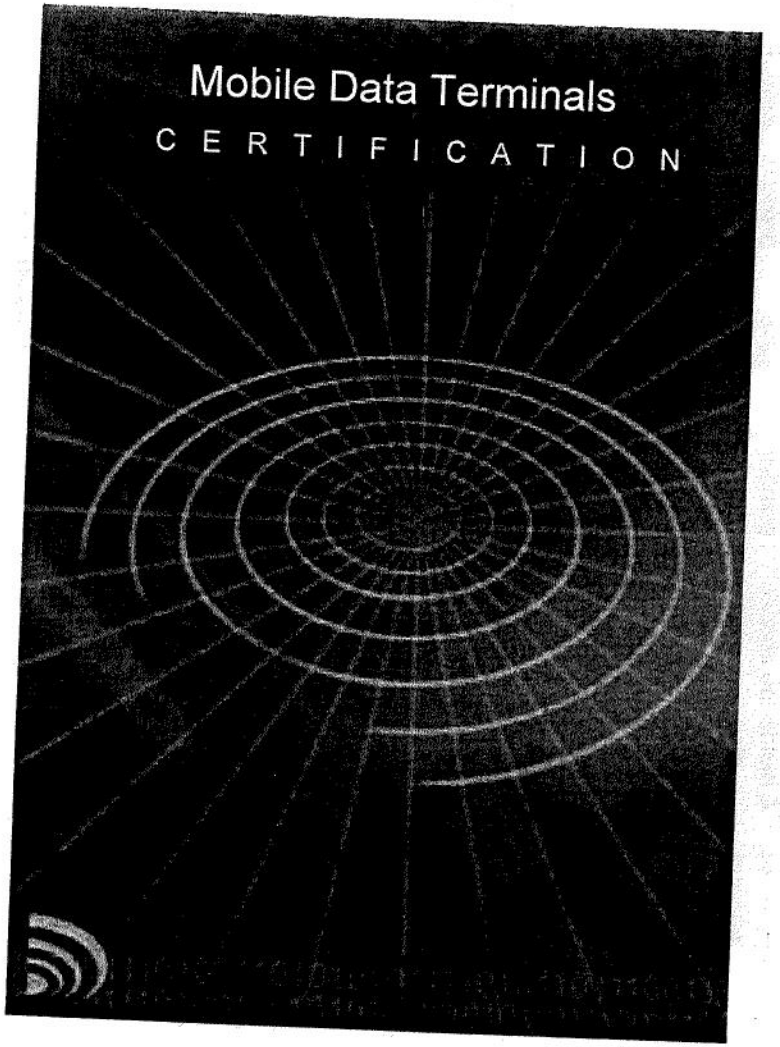
On May 13th, we had 15 minutes of training on K-9 usage. The training included instances in which a K-9 can be used, a deputy's role in securing the scene, and a deputy's role as a back-up officer during K-9 usage. Those who received this training are as follows:

Kemmerle
Siebeneck
Stout
Daniels
[redacted]
Bertolasio

Would you add these to the training log in the computer?

J. Kemmerle

12052



This document certifies that

[redacted]

has passed the

Mobile Data Terminals

test and should be afforded the rights and responsibilities pertaining thereto.

Awarded this
01 day of May, 2007

UNIVERSITY HOSPITALS
UH EMS TRAINING & DISASTER PREPAREDNESS INSTITUTE
ASHTABULA COUNTY EMS SYMPOSIUM

AWARDS

ONE HOUR (1) EMS CONTINUING EDUCATION

TOPIC

STREET SAFETY & SURVIVAL

Instructor

Mark Dailey, UH MedEvac

TO

[redacted]

November 2, 2006

ROBERT COLEMAN, M.D.
MEDICAL DIRECTOR

ODPS# 1192

DAN ELLENBERGER, EMT-P
EMS COORDINATOR

UNIVERSITY HOSPITALS
UH EMS TRAINING & DISASTER PREPAREDNESS INSTITUTE
ASHTABULA COUNTY EMS SYMPOSIUM

AWARDS

ONE HOUR (1) EMS CONTINUING EDUCATION

TOPIC

DISASTER MEDICINE
D-MAT TEAM

Instructor

William Martin, EMT-P

TO

[redacted]

November 2, 2006

ROBERT COLEMAN, M.D.
MEDICAL DIRECTOR

ODPS# 1192

DAN ELLENBERGER, EMT-P
EMS COORDINATOR

UNIVERSITY HOSPITALS
UH EMS TRAINING & DISASTER PREPAREDNESS INSTITUTE
ASHTABULA COUNTY EMS SYMPOSIUM

AWARDS

ONE HOUR (1) EMS CONTINUING EDUCATION

TOPIC

PEDIATRIC CHILDREN ARE NOT THE SMALL ADULT

Instructor

Warren Anderson, Flight Medic

TO

[redacted]

November 2, 2006

ROBERT COLEMAN, M.D.
MEDICAL DIRECTOR

ODPS# 1192

DAN ELLENBERGER, EMT-P
EMS COORDINATOR

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

[redacted]

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

IS-00700
National Incident Management System
(NIMS) an Introduction

Issued this 14th Day of August, 2006

Cortez Lawrence, PhD
Superintendent
Emergency Management Institute

0.3 CEU

FEMA Form 16-31, October 05

DETACH THIS STUB

Emergency Management Institute

FEMA

This Certificate of Achievement is to acknowledge that

[redacted]

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

IS-00100
Introduction to the Incident Command System,
(ICS 100)

Issued this 14th Day of August, 2006

Cortez Lawrence, PhD
Superintendent
Emergency Management Institute

0.3 CEU

FEMA Form 16-31, October 05

DETACH THIS STUB

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

Cum Laude

with all the honors, rights, and privileges of that degree.
Given at Kent, Ohio, this twenty-first day of August

[redacted]

R. Douglas Cowan
Chairperson, Board of Trustees

Carol Cartwright
President of the University

[redacted]
University Registrar

Joseph [redacted]
Dean, College of Arts and Sciences

Certificate of Training

Presented to

[redacted]

FOR COMPLETION OF "FIRE EXTINGUISHER TRAINING"

MARCH 24, 2004

ASHTABULA FIRE DEPARTMENT

Rick Balog, Fire Chief

Jerry Senger Captain PPB

Ashtabula County LEPC

This is to certify that

[redacted]

Has successfully completed the training requirements
Set forth in 29 CFR 1910.120(q)(6)(i)(A)-(F) and
Weapons of Mass Destruction

This Awareness Level Response certificate is awarded on

March 24, 2004

Ashtabula County LEPC

Agency Head

© GOES 449

LITHO. IN U.S.A.

EXCELLENCE

In Recognition of Inclusion
on the
Academic Year 2002-2003

Part-time Dean's List

Kent State University Ashtabula
Honors

[redacted]

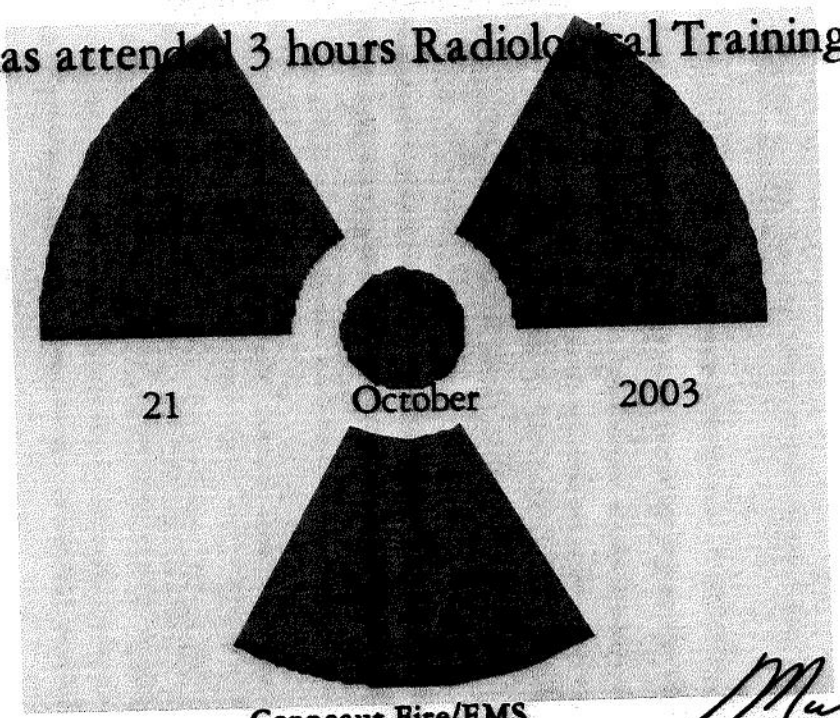
Dean, Kent State University Ashtabula

KENT STATE UNIVERSITY · OHIO · 1910

CERTIFICATE OF ATTENDANCE

[redacted]

has attended 3 hours Radiological Training



21 October 2003

Lou Sosler
Instructor

Conneaut Fire/EMS
Training Center
Approval #2003

Michael J. Smith
Education Coordinator

JEFFERSON POLICE DEPARTMENT

October 14, 2003

Response to an Active Shooter

This certifies that

[redacted]

Has successfully completed 8 hours of instruction in response to Active Shooters as provided by the Jefferson Police Department.

Chief Steve Febel
Jefferson Police Department

Will Parkomaki
Instructor

© GOES 462-1/2

LITHO IN U.S.A.

JEMS

Continuing Education Units Certificate

This is to certify that on **August 22, 2003**

[redacted] State/Registry # [redacted]

Has successfully completed the Jems CE exam from March 2003 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **181 Traumatic Brain Injury CECBEMS#01-CEM-F3-0071**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS

Continuing Education Units Certificate

This is to certify that on **August 22, 2003**

[redacted] State/Registry # [redacted]

Has successfully completed the Jems CE exam from April 2003 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **182 Femur Fracture CECBEMS 03-CEM-F3-0074**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS

Continuing Education Units Certificate

This is to certify that on **January 30, 2003**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from September 2002 **JEMS** for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **175 CHF vs, COPD CECBEMS#02-CEM-F3-0049**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

JEMS

Continuing Education Units Certificate

This is to certify that on **May 6, 2003**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from February 2003 **JEMS** for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **180 Seizures CECBEMS# 01 CEM F3-0069**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS

Continuing Education Units Certificate

This is to certify that on **October 3, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from June 2002 **JEMS** for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **172 Acute Abdominal Emerg. CECBEMS# 02-CEM-F3-0046**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

UniversityHospitals HealthSystem
Brown Memorial Hospital

This is to verify that

[redacted]

has attended the following Paramedic Continuing Education Session:

Advanced Cardiac Life Support Review!

and is awarded 8 Continuing Education Hours

Date January 24, 2003

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital
EMS Education Program #306

Approval Number: 306-01-03

Certificate # [redacted]

JEMS

Continuing Education Units Certificate

This is to certify that on **January 9, 2003**
[redacted] State/Registry # [redacted]
Has successfully completed the Jems CE exam from September 2002 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.
Exam ID# **175 CHF vs, COPD CECBEMS#02-CEM-F3-0049**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

UniversityHospitals HealthSystem
Brown Memorial Hospital

This is to verify that

[redacted]

attended the following educational sessions as a part of the

Eleventh Annual Ashtabula County Emergency Medical Services Conference

Pulse Oximetry ***1 hr***
Ron Pristera, EMT-P

Pediatric – Medical Emerg. 1 hr
Dr. Mike Anderson

Pediatric – Trauma Emerg. 1 hr
Dr. Mike Anderson

Date November 14, 2002

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital EMS Education Program

Approval Number: [redacted]

Accreditation Number: 306

CERTIFICATE OF TRAINING

[redacted]

HAS PARTICIPATED AND SUCCESSFULLY COMPLETED AN ADVANCED TRAINING COURSE IN

BASIC SWAT

OCTOBER 21-25, 2002

MINERVA, OHIO

DEFENSE TRAINING

MATTHEW C. SCHAEFER
PRESIDENT

JEFFRY E. CARPER
VICE-PRESIDENT

INTENSE TRAINING FOR EXTREME ENCOUNTERS®

JEMS

Continuing Education Units Certificate

This is to certify that on **October 9, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from August 2002 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **174 Chest Pain CECBEMS#02-CEM-F3-0048**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS

Continuing Education Units Certificate

This is to certify that on **October 9, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from May 2002 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **171 DAI CECBEMS#02-CEM-F3-0045**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS

Continuing Education Units Certificate

This is to certify that on **October 9, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from July 2002 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **173 Anaphylaxis CECBEMS# 02-CEM-F3-0047**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)



SCHOOL SHOOTING

FIRST RESPONDER COURSE

[redacted]

has received 8 hours of training in

SCHOOL SHOOTING

FIRST RESPONDER COURSE

July12, 2002

Rittman, Ohio

Hosted by Rittman Police

This law enforcement course included planning & preparation, school layouts and surveillance, establishing a temporary command post, team selection, team & individual movement, team formations, Immediate Action Drills, building searches, confronting the active shooter, multiple suspects, multiple victims, basic CQB and officer safety drills and exercises



HSS International
SPECIAL OPERATIONS TRAINING

Dan Erber, President
www.hssinternational.com

JEMS Continuing Education Units Certificate

This is to certify that on **June 5, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from January 2002 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **167 Aneurysm Dissection CECBEMS# 02-CEM-F3-0041**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS Continuing Education Units Certificate

This is to certify that on **June 5, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from Feb 2002 **JEMS**
for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **168 Cancer CECBEMS# 02-CEM-F3-0042**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

CSU Cleveland State University
Division of Continuing Education

Record of Completion awarded to

[redacted]

in recognition of successful completion of a concentrated program of study in

Confined Space Rescue

organized and directed by
the Division of Continuing Education, Center for Hazmat Education
and constituting an intensive program of principles and practice.

Completed: April 28 & May 4, 2002

Continuing Education Units: 1.60

Dean, Division of Continuing Education

CSU Cleveland State University
Division of Continuing Education

Record of Completion awarded to

[redacted]

in recognition of successful completion of a concentrated program of study in

Confined Space Entry

organized and directed by
the Division of Continuing Education, Center for Hazmat Education
and constituting an intensive program of principles and practice.

Completed: April 27, 2002

Continuing Education Units: 0.80

Dean, Division of Continuing Education

JEMS Continuing Education Units Certificate

This is to certify that on **May 22, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from December 2001 **JEMS** for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **166 Septic Shock CECBEMS# 02-CEM-F3-0040**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

JEMS Continuing Education Units Certificate

This is to certify that on **May 22, 2002**

[redacted] State/Registry #[redacted]

Has successfully completed the Jems CE exam from November 2001 **JEMS** for 1.5 credits Advanced/Basic/First Responder.

Exam ID# **165 Unresponsive Patients CECBEMS# 02-CEM-F3-0039**

Jeff Berend, Publisher/General Manager, JEMS

Walt Stoy, PhD, EMT-P Center for Emergency Medicine, University of Pittsburgh

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)

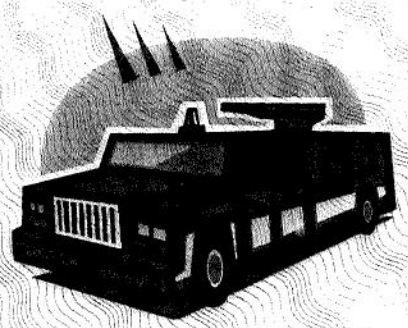
[redacted]

ASSISTANT CHIEF'S AWARD

GIVEN FOR THE [redacted] AIRBOAT RESCUE OF 3 MEN AT HARPERSFIELD ON THE GRAND RIVER

JANUARY 1, 2002

Michael J. Smith
Assistant Battalion Chief



University Hospitals Health System
Memorial Hospital of Geneva
University Hospital MedEvac

Trauma! Trauma! Trauma!

University Hospitals
MedEvac

[redacted]

at Jefferson Joint Vocational School

University Hospitals
MedEvac

1.5 Continuing Education Hours

Saturday November 10th, 2001

Howard Dickey-White, MD, FACEP

Senior Clinical Director - Dept. of Emergency Medicine

University Hospitals of Cleveland

Dan Ellenberger

EMS Coordinator

University Hospitals of Cleveland

Ohio Department of Public Safety

Division of Emergency Medical Services

1192

University Hospitals Health System
Memorial Hospital of Geneva
University Hospital MedEvac

Air Bag and Rescue Concepts

University Hospitals MedEvac

[redacted] at Jefferson Joint Vocational School

University Hospitals MedEvac

4 Continuing Education Hours

Saturday November 10th, 2001

Howard Dickey-White, MD, FACEP

Senior Clinical Director - Dept. of Emergency Medicine

University Hospitals of Cleveland

Dan Ellenberger

EMS Coordinator

University Hospitals of Cleveland

Ohio Department of Public Safety

Division of Emergency Medical Services

1192

University Hospitals Health System
Memorial Hospital of Geneva
University Hospital MedEvac

Pediatric Skills Station

University Hospitals MedEvac

[redacted]

at Jefferson Joint Vocational School

University Hospitals MedEvac

2 Continuing Education Hours
Saturday November 10th, 2001

Howard Dickey-White, MD, FACEP
Senior Clinical Director - Dept. of Emergency Medicine
University Hospitals of Cleveland

Dan Ellenberger
EMS Coordinator
University Hospitals of Cleveland

Ohio Department of Public Safety
Division of Emergency Medical Services

1192

University Hospitals Health System
Memorial Hospital of Geneva
University Hospital MedEvac

Pediatric Medical Emergencies

University Hospitals MedEvac

[redacted]

at Jefferson Joint Vocational School

University Hospitals MedEvac

1.5 Continuing Education Hours

Saturday November 10th, 2001

Howard Dickey-White, MD, FACEP

Senior Clinical Director - Dept. of Emergency Medicine

University Hospitals of Cleveland

Dan Ellenberger

EMS Coordinator

University Hospitals of Cleveland

Ohio Department of Public Safety

Division of Emergency Medical Services

1192

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

This is to verify that

[redacted]

attended the following educational sessions as a part of the

Tenth Annual Ashtabula County Emergency Medical Services Conference

Airway Management Dr. Goel and Dr. Conger	1 hour	*Airway Management* Dr. Goel and Dr. Conger	1 hour
Airway Management Dr. Goel and Dr. Conger	1 hour		

Date November 8, 2001

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital EMS Education Progra

Approval Number: 306-49-01

Accreditation Number: 306

DIVISION OF STATE FIRE MARSHAL

OHIO FIRE ACADEMY

CERTIFICATE OF TRAINING

Is awarded to:

[redacted]

In recognition of completion of the

BASIC FIRE INVESTIGATION – 36 HOURS

[redacted]

October 7, 2001

Robert R. Rielage
State Fire Marshal

B. Frank Conway
Superintendent

Certificate of Training





Awarded to

[redacted]

for participation in the RAVE Drug Seminar held in Cleveland, Ohio August 24, 2001 Sponsored by the Cleveland Metropark Rangers and the Ohio Chapter of the Great Lakes International Gang Investigators Coalition

E. Scott Bernard
President Ohio Chapter GLIGIC

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Mar. 2001 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 157 Subcutaneous Emphysema CECBEMS # 01-CEM-1A-0016 Date 6/29/2001

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Apr. 2001 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 158 Cardiac Tamponade CECBEMS # 01-CEM-1A-0018 Date 6/29/2001

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

In Recognition Of Inclusion
On The

PART-TIME
DEAN'S LIST
2000-2001 Academic Year

KENT ASHTABULA

HONORS

[redacted]

DEAN, ASHTABULA CAMPUS

KENT STATE UNIVERSITY · OHIO · 1910

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Jan. 2001 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 155 Patient Assessment CECBEMS # 01-CEM-1A-0014 Date 6/29/2001

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Feb. 2001 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 156 Issues in Hypothermia CECBEMS # 01-CEM-1A-0015 Date 6/29/2001

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

Ohio Peace Officer Training Commission

[redacted]

has successfully completed the advanced training course

ADAP INSTRUCTOR (ALCOHOL DETECTION AND PROSECUTION)

at the Ohio Peace Officer Training Academy.

June 4 - 8 , 2001

Betty D. Montgomery
Attorney General

Jeanne A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission

Conneaut Rescue Squad
Conneaut Fire Department
Certificate of Continuing Education

[redacted]

Introduction to

WMD
Domestic Preparedness

Part Two

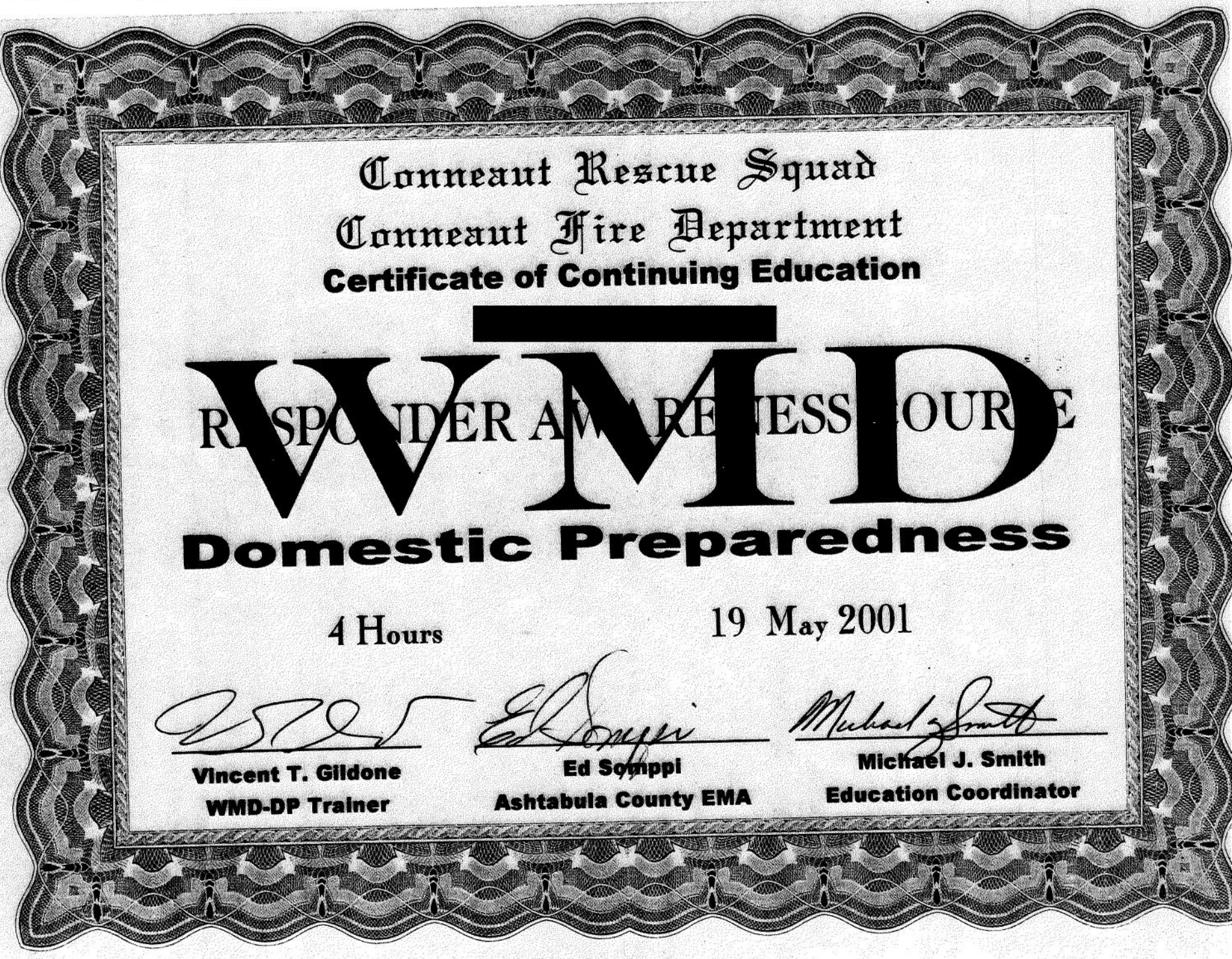
2 Hours

29 May 2001

Approval Number
2003

Vincent T. Gildone
WMD-DP Trainer

Michael J. Smith
Education Coordinator



Conneaut Rescue Squad

Conneaut Fire Department

Certificate of Continuing Education

[redacted]

WMD

RESPONDER AWARENESS COURSE

Domestic Preparedness

4 Hours

19 May 2001

Vincent T. Gildone
WMD-DP Trainer

Ed Somppi
Ashtabula County EMA

Michael J. Smith
Education Coordinator

Conneaut Rescue Squad
Conneaut Fire Department

Certificate of Continuing Education

[redacted]

Introduction to

WMD

Domestic Preparedness

2 Hours

15 May 2001

Vincent T. Gildone
WMD-DP Trainer

Approval Number
2003

Michael J. Smith
Education Coordinator

Ohio Peace Officer Training Commission

[redacted]

has participated in the advanced training course

SPANISH FOR LAW ENFORCEMENT

at the Ohio Peace Officer Training Academy.

February 7 - 9 , 2001

Betty D. Montgomery
Attorney General

Jeanne A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Nov. 2000 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 153 Ocular Trauma CECBEMS # 00-CEM-1A-0008 Date 1/31/01

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Oct. 2000 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 152 Hypertensive Emergencies CECBEMS # 00-CEM-1A-0007 Date 1/31/01

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from Sept. 2000 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 151 Psychological Disorders CECBEMS # 00-CEM-1A-0006 Date 1/31/01

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

UniversityHospitals HealthSystem

Brown Memorial Hospital

This is to verify that

[redacted]

has attended the following Paramedic Continuing Education Session:

Advanced Cardiac Life Support Review!

and is awarded 8 Continuing Education Hours

Date January 26, 2001

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital
EMS Education Program #306

Approval Number: 306-01-01

Certificate # [redacted]

Ohio Peace Officer Training Commission

[redacted]

has participated in the advanced training course

BULLETPROOF MIND

at the Ohio Peace Officer Training Academy.

JANUARY 22, 2001

Betty D. Montgomery
Attorney General

Jeanne A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission

Ohio Peace Officer Training Commission

[redacted]

has successfully completed the advanced training course

BAC DATAMASTER

at the Ohio Peace Officer Training Academy.

November 6 - 7 , 2000

Betty D. Montgomery
Attorney General

Jeanne A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from June 2000 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 148 Spinal Cord Injuries CECBEMS # 00-CEM-1A-0002 Date 9/28/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

EMERGENCY MEDICAL SERVICES™

PROFESSIONAL PARTICIPATION PROGRAM

Certifies that [redacted]

has completed 1 hour of continuing education on the subject of

MANAGING CARDIOTHORACIC TRAUMA

from the September 1999 issue of *Emergency Medical Services.*

Certified by: *Carol Sumner*

Emergency Medical Services • 7626 Densmore Ave. • Van Nuys, CA 91406

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from July 2000 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 149 Esophageal Varices CECBEMS # 00-CEM-1A-0004 Date 9/28/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

"This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

JEMS

Continuing Education Units Certificate

This is to certify that [redacted] State/ Registry# [redacted]

Has successfully completed the JEMS CE exam from August 2000 for 1.5 credits Advanced/ Basic/ First Responder

Exam ID # 150 Warm Weather CECBEMS # 00-CEM-1A-0005 Date 9/28/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

This continuing education activity is approved by the Continuing Education Coordinating Board for EMS (CECBEMS)."

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

State/ Registry# [redacted] Has successfully completed the EMT/ Paramedic

course study for 1.5 credits on 146 Arthritis Date 6/22/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

State/ Registry# [redacted] Has successfully completed the EMT/ Paramedic

course study for 1.5 credits on 147 Hyperbaric Date 6/22/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

Ohio Peace Officer Training Commission

[redacted]

has successfully completed the advanced training course

ADAP (ALCOHOL DETECTION AND PROSECUTION)

at the Ohio Peace Officer Training Academy.

June 5 - 8 , 2000

Betty D. Montgomery
Attorney General

Jeanne A. Miller, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission



Head Start Volunteer Award

This Certificate is Awarded to:

[redacted]

Conneaut Fire Dept. # 3

for outstanding volunteer service to the Head Start Program during the past year.

John J. Coblentz

Project Director

May 2000

Date

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

State/ Registry# [redacted]

Has successfully completed the EMT/ Paramedic

course study for 1.5 credits on RSV

Date 2/29/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

[redacted]

has successfully completed

a 16-hour

Lifeguard Systems
Drowning Homicide Investigator I Course

February 15-16, 2000

Cleveland Lakefront State Park
Cleveland, OH

Walt "Butch" Hendrick
ACUC, NAUI, PADI, ARC, DAN, NASAR

Andrea Zaferes
ACUC, NAUI, PADI, ARC, DAN

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

State/ Registry# [redacted] Has successfully completed the EMT/ Paramedic

course study for 1.5 credits on Crush Syndrome Date 1/20/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

Conneaut Rescue Squad
Conneaut Fire Department

[redacted] has completed 8 hours of Continuing Ed.

January 15, 2000

Bariatrics	*1.5 hrs.*
Geriatric Emergencies	*2.0 hrs.*
People Care	*1.0 hrs.*
The New DNR Regs.	*1.5 hrs.*
MRSA/VRE Update	*1.5 hrs.*
Review	*.5 hrs.*
Total	*8.0 hrs*

Instructors

Mary Childs RN

Greg Wassie LPN/EMT-P

Vincent T. Gildone EMT-P/STI

Louise Sheridan OT

Michael J. Smith EMT-P/M.Ed.

Education Coordinator

OHIO FIRE ACADEMY

Certificate of Training

Awarded To

[redacted]

For Completion Of The Ohio Fire Academy Course

Haz-Mat Operations

Course No.: 1713-2000-413

Hours: 12

Date of Completion: 01-09-00

A. Gregory Drew

Superintendent

COM 5160

Ohio Fire Academy
Certificate of Training

ne: [redacted]

ırse: Haz-Mat Operations

ırse No.: 1713-2000-413

ırs: 12

npletion Date: 01-09-00

Ohio Fire Academy
Certificate of Training

Name:

Course:

Course No.:

Hours:

Date of Completion:

A. Gregory Drew

Superintendent

Detach This Wallet Card ⬆ And Carry With

OHIO FIRE ACADEMY

Certificate of Training

Awarded To

[redacted]

For Completion Of The Ohio Fire Academy Course

Haz- Mat Awarcness

Course No.: 1714-2000-422

Hours: 4

Date of Completion: 01-08-00

a. Gregory Snow

Superintendent

COM 5160

Ohio Fire Academy
Certificate of Training

Name: [redacted]

Course: Haz-mat Awarcness

Course No.: 1714-2000-422

Hours: 4

Completion Date: 01-08-00

Ohio Fire Academy
Certificate of Training

Name:

Course:

Course No.:

Hours:

Date of Completion:

a. Gregory Snow

Superintendent

Detach This Wallet Card ✂ And Carry With

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

State/ Registry# [redacted]

Has successfully completed the EMT/ Paramedic

course study for 1.5 credits on Chemical Injuries

Date 12/28/99

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

State/ Registry# [redacted]

Has successfully completed the EMT/ Paramedic

course study for 1.5 credits on Chronic Care

Date 12/29/99

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

Has successfully completed the EMT/ Paramedic

State/ Registry# [redacted]

course study for 1.5 credits on GI Bleeds

Date 12/6/99

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

Has successfully completed the EMT/ Paramedic

State/ Registry# [redacted]

course study for 1.5 credits on Wound Assessment

Date 12/6/99

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

EMERGENCY MEDICAL SERVICES™

PROFESSIONAL PARTICIPATION PROGRAM

Certifies that [redacted]

has completed 1 hour of continuing education on the subject of

MANAGING HANGING OR STRANGULATION INJURIES

from the October 1999 issue of *Emergency Medical Services.*

CEU CREDIT EMS MAGAZINE

Certified by: *Carol Summer*

Emergency Medical Services • 7626 Densmore Ave. • Van Nuys, CA 91406

N.Y. Medical College Institute for Trauma & Emergency Care • Valhalla • NY 10595-1689

JEMS

Continuing Education Units Certificate

CENTER for EMERGENCY MEDICINE

This is to certify that [redacted]

Has successfully completed the EMT/ Paramedic

State/ Registry# [redacted]

course study for 1.5 credits on 145 Hepatitis

Date 6/6/00

William R. Metcalf, Publisher, JEMS

Debra Lejeune, CEU Coordinator, CEM

Shaken Baby Syndrome Conference
Erie, Pennsylvania
October 28, 1999

Sponsored by the Pennsylvania Medical Society Alliance with its Erie County Medical Society Alliance and
The Foundation of the Pennsylvania Medical Society

[redacted]

WAS A CONFERENCE ATTENDEE

This educational activity consisted of 6.5 hours of continuing education in the fields of medicine, legal, law enforcement, education and prevention and treatment issues surrounding Shaken Baby Syndrome.

Maureen Callahan

Maureen Callahan
Health Projects Chair
Pennsylvania Medical Society Alliance
777 East Park Drive, P.O. Box 8820
Harrisburg, PA 17105-8820
PA 800-228-7823 or 717-558-7750



UniversityHospitals HealthSystem

Brown Memorial Hospital

THIS IS TO VERIFY THAT

[redacted]

HAS ATTENDED

Street Sense, by Clarence Moore, EMT-P

and is awarded 4 Continuing Education Hours

Claudia L. Gary Date: September 30, 1999

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital
EMS Education Program #306

Certificate # [redacted]

Approval Number: 306-049-99

Certificate of Training

This is to Certify that

[redacted]

has completed 16 hours of training on
BOMBS, BOMB THREATS & BOOBY TRAPS

Sponsored by Explosive Device Technologies
August 16 & 17, 1999
Columbus, Ohio



Ralph Jay Williams - Instructor

UniversityHospitals HealthSystem

Brown Memorial Hospital

This is to verify that

[redacted]

has attended the following Paramedic Continuing Education Session:

Advanced Cardiac Life Support Review!

and is awarded 8 Continuing Education Hours

Date March 26, 1999

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital
Paramedic Program #3-1-003

Approval Number: 306-02-99

Certificate # [redacted]

Conneaut Rescue Squad

Station No. 3

THIS CERTIFICATE IS PRESENTED TO

[redacted]

WHEREAS

[redacted] has run the most squad nights for 1998

Awarded This 1st *Day of* January 19 99

Vincent T Gilbone

Authorized By

Battalion Chief

Title

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

This is to verify that

[redacted] **part of the**

has attended the following educational sessions as a

Seventh Annual Ashtabula County Emergency Medical Services Conference

Legal Aspects of EMS ***1 hour***
John R. Irwin, J.D., M.D.

Date November 5, 1998

Approval Number: 306-72-98

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital Paramedic Program
Accreditation Number: 3-1-003

The Board of Trustees

Lakeland Community College

Upon the recommendation of the Faculty
has conferred upon

[redacted]

the degree

Associate of Applied Science

Criminal Justice/Law Enforcement

With all Honors, Rights and Privileges appertaining to that degree.
In Witness Thereof, the undersigned have affixed their names
and the seal of Lakeland Community College.

Dated at Lake County, Ohio, this month of September,

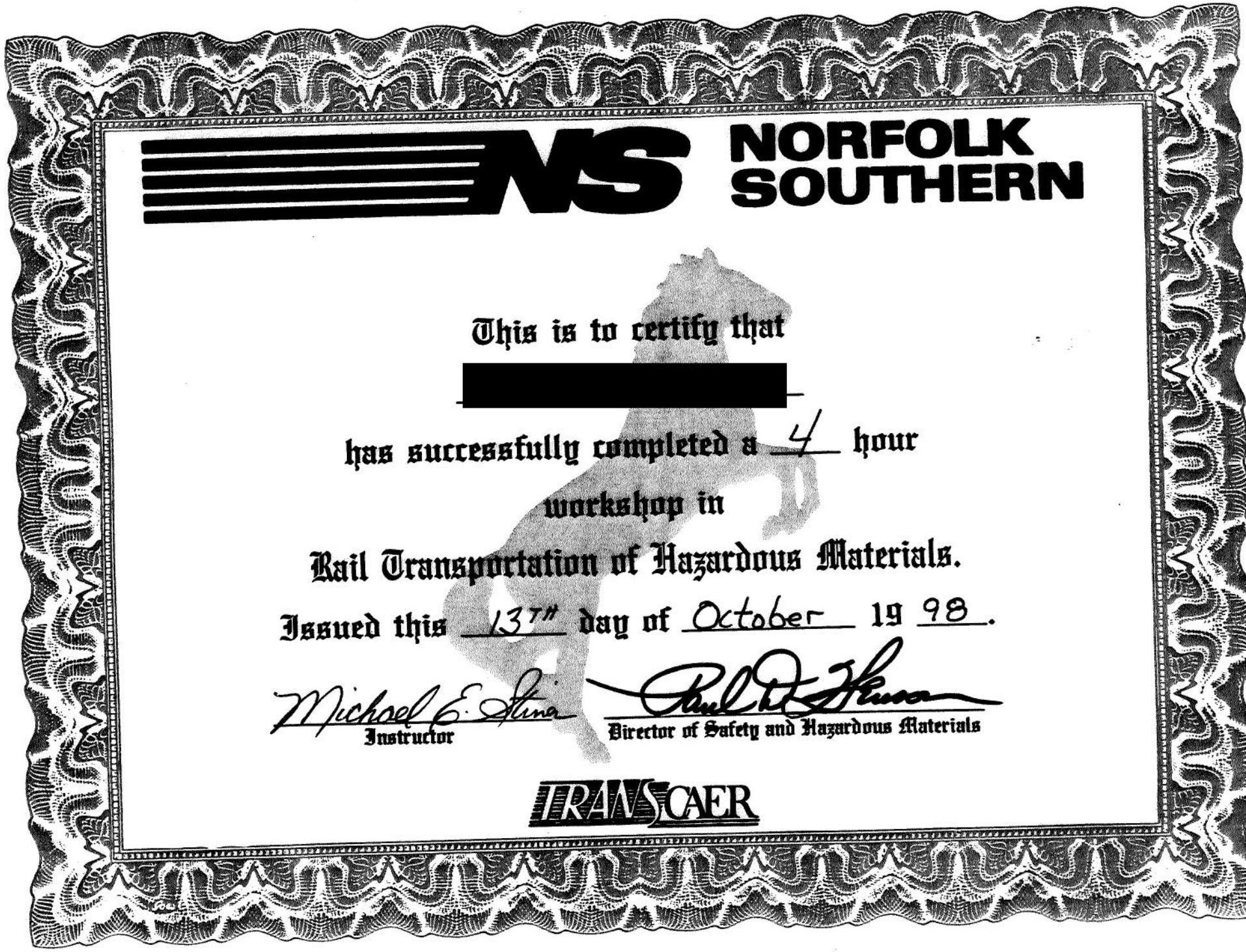
[redacted]

LAKELAND COMMUNITY COLLEGE · 1967 ·

Ralph R. Dohy
President

Chair, Board of Trustees

Ruth H. Zollinger
Vice President for Academic Affairs



NS NORFOLK SOUTHERN

This is to certify that

[redacted]

has successfully completed a 4 hour

workshop in

Rail Transportation of Hazardous Materials.

Issued this 13th day of October 19 98.

Michael E. Stina
Instructor

Director of Safety and Hazardous Materials

TRANSCAER

Ohio Peace Officer Training Council

State of Ohio
Office of the Attorney General

This is to certify that

[redacted]

has completed the

Ohio Peace Officer
Basic Training Program

ASHTABULA COUNTY BASIC ACADEMY

Awarded on

[redacted]

Betty D. Montgomery
Betty D. Montgomery
Attorney General

Arthur M. Scott, Chairman
Ohio Peace Officer Training Commission

Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Commission

[redacted]

Printed on Recl Paper

POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.®

It is hereby confirmed that

[redacted]

Has Successfully Completed the Requirements of the

Emergency Crime Scene Responder℠

Training Program

Held at Conneaut Police Dept., OH *on* May 2, 1998 .

Phil M. Salafia

Phil M. Salafia, President

M.D.

Patrick W. Lanzetta, MD, Medical Director

This continuing education activity is approved by the Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS).

Approval #: **28-F2A-0176** *CEH Type:* **7.0 Basic**

©1996 PowerPhone, I

CERTIFICATE OF ACHIEVEMENT



TESTED AND PASSED

certifies that

[redacted]

has successfully completed the 16-hour course

INVESTIGATION OF GAS AND ELECTRIC APPLIANCE FIRES

May 4 & 5, 1998

James M. Finneran
Instructor

Jack L. Sanderson
Instructor

UniversityHospitals HealthSystem

Brown Memorial Hospital

This is to verify that

[redacted]

has attended the following continuing education sessions:

Date	Title/Speaker	Hours	Approval #
3/24/98	***IV Equipment Review, Jeff Pratt, EMT-P***	*1*	[redacted]

Claudia L. Gary, RN, EMT-P
UHHS Brown Memorial Hospital
Paramedic Program #3-1-003

Vince Gildone, EMT-P
Battalion Chief
Conneaut Fire Department Station #3

Certificate [redacted]

Certificate of Attendance

[redacted]

Has attended the Center for Emergency Medicine Special Anniversary Conference
EMS: The Tools & The Talent

Presented by

Center for Emergency Medicine
STAT MedEvac

February 13, 1998

Walt Alan Stoy, PhD *Paul M. Paris, MD*

© 00ES 746

Law Advisory Group

COURSE COMPLETION CERTIFICATE

[redacted] [redacted]

has successfully completed Law Advisory training entitled

TECHNIQUES FOR MANAGING RISKS OF LAWSUITS AGAINST POLICE FIRE AND EMS

at **STRONGSVILLE, OHIO**

this **30th** day of **JANUARY, 1998**

in recognition of which this certificate is presented.

Patricia C. Holecek

Patricia C. Holecek, President

6.0 CONTACT HOURS

LITHO IN U.S.A.

P0888302

National Registry of Emergency Medical Technicians SM

Hereby certifies

[redacted]

as a

Registered Emergency Medical Technician-Paramedic

together with all the rights, privileges, and honors appertaining thereto in consideration of the satisfactory completion of the prescribed educational and clinical requirements, plus the supervised application of skills through field internship.

In Testimony Whereof, the seal of the National Registry of Emergency Medical Technicians and the signatures as authorized by the Board of Directors are hereunto affixed

this Tenth *day of* [redacted] *A.D.*

Chairman of the Board

Executive Director

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

This is to verify that

[redacted]

has attended the following educational sessions as a part of the
Sixth Annual Ashtabula County Emergency Medical Services Conference

Pediatric Airway **1 hrs.**
Eugene Fields, RN

Trade Show and Exhibits **1 hr.**
Claudia Gary, RN, EMT-P

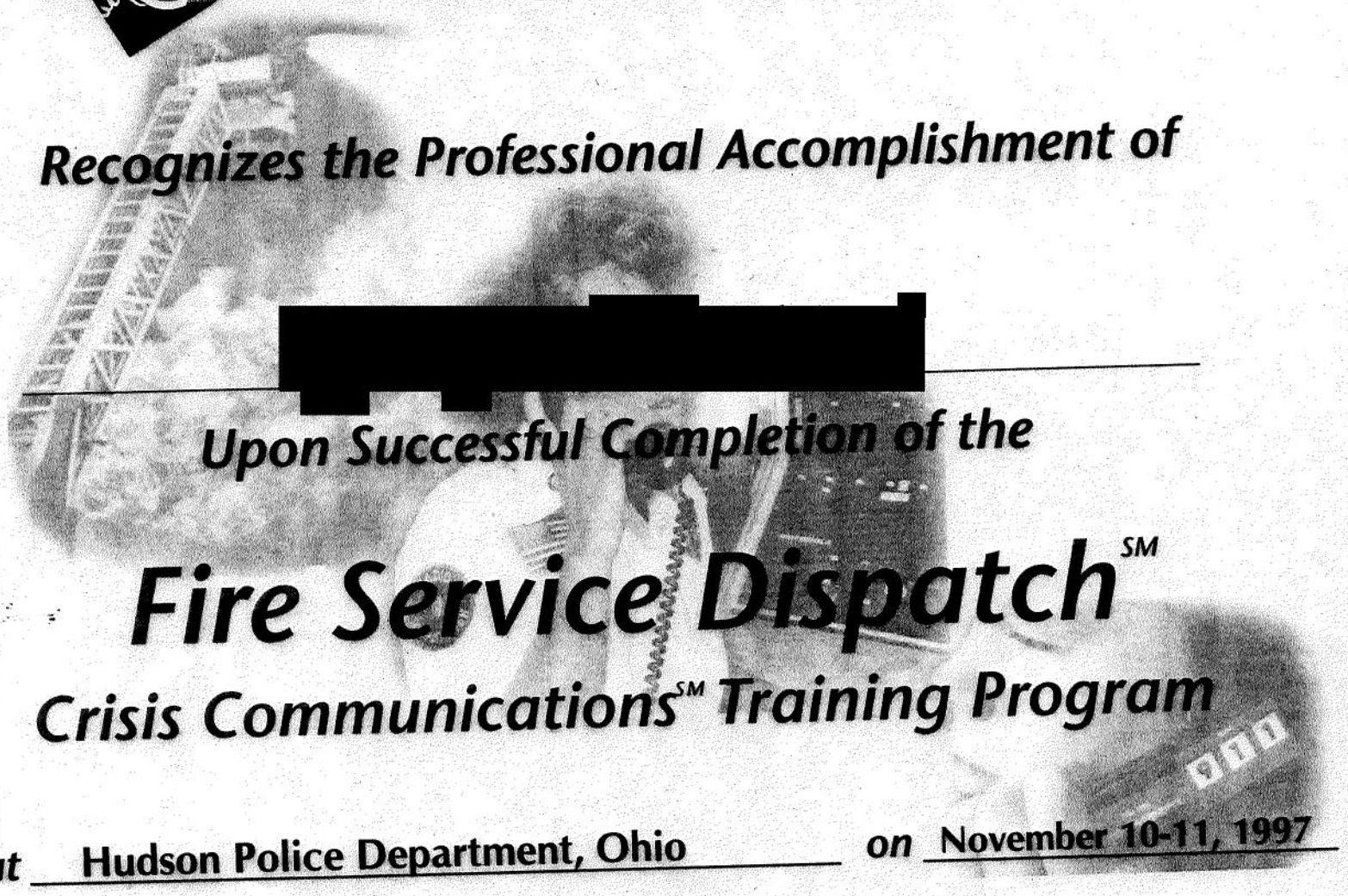
[redacted]

Date November 13, 1997

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital Paramedic Program

Approval Number: [redacted]

Accreditation Number: [redacted]



POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.®

Recognizes the Professional Accomplishment of

[redacted]

Upon Successful Completion of the

Fire Service Dispatch℠

Crisis Communications℠ *Training Program*

Held at Hudson Police Department, Ohio *on* November 10-11, 1997 .

Instructor

President

©1996 PowerPhone, Inc.

Association of Public-Safety Communications Officials - International, Inc.
APCO Institute, Inc.

Basic Telecommunicator Training
International Certificate

In recognition of having completed the requirements in the
Basic Telecommunicator Training Program
of APCO Institute, Inc., and having demonstrated a knowledge of
Telephone Techniques, Radio Broadcast Techniques, and
other Public Safety Telecommunication Issues,
APCO Institute, Inc. hereby awards International Certification as an
APCO Telecommunicator to:

[redacted]

October 31, 1997

OH-B-2114

Kevin R. Duffy, Institute Director

LITHO IN U.S.A.

© Goes 461

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

This is to verify that

[redacted]

has attended the following continuing education sessions:

Date	Title/Speaker	Hours	Approval #
9/16/97	Introduction to Farm Rescue - Michael Smith, EMT-P	3	[redacted]

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Michael Smith, EMT-P
Conneaut Fire Department Station #3

Certificate # [redacted]



POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.®

Recognizes the Professional Accomplishment of

[redacted]

Upon Successful Completion of the

Law Enforcement Dispatch℠

Crisis Communications℠ *Training Program*

Held at Chagrin Falls Police Department, Ohio *on* July 21-22, 1997 .

Instructor

President

©1996 PowerPhone

ASHTABULA COUNTY
SHERIFF'S DEPARTMENT

William R. Johnson - Sheriff

Certificate of Completion

PRESENTED THIS 13th DAY OF July 19 97

KNOW ALL MEN BY THESE PRESENTS THAT

[redacted]

SUCCESSFULLY COMPLETED 20 hour Defensive Driving Course

Instructor

William R. Johnson
William R. Johnson, Sheriff

© GOES 462-1/2

LITHO IN U.S.A.

Associated Defensive Services & Training

This is to certify that

[redacted]

has successfully completed

ASP Tactical Baton

awarded this **30th** day of **June** 19**97**

Held at: **Jefferson, Ohio**

Bryan N. Rose
Instructor

Bryan N. Rose
Director

Instructor

Associated Defensive Services & Training

This is to certify that

[redacted]

has successfully completed

Chemical Aerosol Sprays

awarded this 30th day of June 19 97

Held at: Jefferson, Ohio

Bryan N Rose
Instructor

Bryan N. Rose
Director

Instructor

LITHO IN U.S.A.

ASHTABULA COUNTY
SHERIFF'S DEPARTMENT

William R. Johnson - Sheriff

Certificate of Completion

PRESENTED THIS 6th DAY OF June 19 97

KNOW ALL MEN BY THESE PRESENTS THAT

[redacted]

SUCCESSFULLY COMPLETED 60 hour Basic Firearm Course

Instructor

William R. Johnson
William R. Johnson, Sheriff

© GOES 462-1/2

LITHO IN U.S.A.

OHIO DEPARTMENT OF PUBLIC SAFETY

EMERGENCY MEDICAL SERVICES

This Ohio Emergency Medical Technician Certificate is issued to:

Certification Number: [redacted]

Date Expired: 04/19/97

[redacted]

for

Basic EMT

Charles D. Shipley
Director

Roger E. Glick
Administrator

George V. Voinovich, Governor

Mike DeWine, Lt. Governor

Certificate of Attendance

This is to certify that

[redacted]

has attended
"Responding Effectively to 9-1-1- TDD Calls"

Signed

March 26, 1997

©GOES 463

Seminar on Bombs and Bombings

awarded to

[redacted]

presented by

Special Agent George Arruda of the Federal Bureau of Investigation

hosted by

Conneaut Police Department

March 3, 1997

Rocco N. Russo, Chief of Police

Conneaut Rescue Squad

Station No. 3

THIS CERTIFICATE IS PRESENTED TO

[redacted]

WHEREAS

[redacted] HAS COMPLETED 242 SQUAD RUNS BY NOVEMBER 30, 1996

A SUFFICIENT NUMBER TO BE CONSIDERED A "HARD CHARGER" FOR 1996

Awarded This 1ST *Day of* JANUARY *19* 97

Michael Smith
Authorized By

ASSISTANT BATTALION CHIEF
Title

© GOES 910

LITHO IN U.S.A.

I0646511

National Registry of Emergency Medical Technicians SM

Hereby certifies

[redacted]

as an

Emergency Medical Technician-Intermediate

duly registered together with all the rights, and privileges appertaining thereto in consideration of the satisfactory completion of the prescribed educational and clinical requirements.

In Testimony Whereof, the seal of the National Registry of Emergency Medical Technicians and the signatures as authorized by the Board of Directors are hereunto affixed.

this Seventh *day of* [redacted] *A.D.*

Chairman of the Board

Executive Director

National Registry of Emergency Medical Technicians

P.O. Box 29233
Columbus, Ohio 43229

[redacted]

Registry No: [redacted]
Exam Date:
Site/State:
Processed:
Series No:

Congratulations on passing the written examination. To assist you in identifying the specific results of the examination, we are listing your scores for each part and subtest.

	Total Questions	Number Correct	% Score	Req'd Min. Pct
BASIC REASSESSMENT				
Breathing & Resuscitation	15	12	80	
Wounds Bleeding Shock	10	9	90	
Injuries to Head, Neck, Chest	10	7	70	
Medical Emergencies	10	9	90	
Environmental Emergencies	5	4	80	
Fractures and Dislocations	5	5	100	
Emergency Childbirth	5	4	80	
Psychological Emerg	5	4	80	
Patient Handling & Transportation	5	5	100	
	70	**59**	**84**	**70**
EMT INTERMEDIATE				
Roles and Responsibilities	25	23	92	
General Patient Assessment	30	21	70	
Airway Management & Ventilation	25	18	72	
	80	**62**	**78**	**70**

You have passed the written examination. This passing score will remain valid for a 12 month period from the date of the examination. Please note that you must pass both the written and practical examination within a 12 month period in order to become registered. The date of your passed portion, if prior to the date of this examination will be utilized as your examination date unless you failed both the written and practical. Passed portions of either the written or practical remain valid for a 12 month period.



ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

This is to verify that

[redacted]

has attended

The 1996 Ashtabula County EMS Education Conference

and is awarded 3 **contact hours**

Date November 21, 1996

Claudia L. Gary

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program: #3-1-003

Certificate No [redacted]



ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

This is to verify that

[redacted]

has successfully completed the
Ashtabula County EMT
Esophageal Intubation Course

Date 11/3/96 **Renew by** N/A

Claudia L. Gary

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N[redacted]

OHIO LEADS

OHIO LEADS

COMPUTER AND COMMUNICATIONS

Certifies that _____

has completed a course of instruction in

Leads Terminal Operation and Usage as prescribed

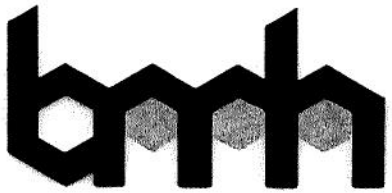
by the Steering Committee of

the Ohio Law Enforcement Automated Data System.

Law Enforcement Automated Data System

OCTOBER 27 19 96

CHAIRMAN/LEADS STEERING COMMITTEE



BROWN MEMORIAL HOSPITAL

158 WEST MAIN ROAD • P.O. BOX 648 • CONNEAUT, OHIO 44030 • (216) 593-1131

I attest that [redacted]

has attended a(n) In-Hospital Clinical Training Session

pertaining to Emergency Department

conducted by Brown Memorial Hospital Paramedic Program #3-1-003 for the purpose of continuing education for E.M.S.

Date October 9, 1996

Credited for 1 hours

Claudia L. Gary, RN, EMT-P
Paramedic Program Director/Coordinator

Conneaut Rescue Squad
Conneaut Fire Department
Station No. 3

CONTINUING EDUCATION

this certifies that [redacted]

has completed HEAVY RESCUE CLASS, INDEPENDENT STUDY AND HANDS ON

A PROFESSIONAL DEVELOPMENT PROGRAM

consisting of

30 **HOURS OF INSTRUCTION IN:**

awarded SEPTEMBER 3, 1996

Project Director Michael J. Smith

Training Director Michael J. Smith

Conneaut Rescue Squad

Be it known that

[redacted]

Has completed 18 *Hrs. of training in the listed areas. This training meets and or excedes standards as set forth by the U.S. and Ohio Departments of transportation in conjunction with Brown Memorial Hospital's Paramedic Education Program, for Basic, Intermediate and Paramedics in the State of Ohio.*

2 Hr. C.P.R. Procedures 2/20/96
2 Hr. C.Spine Immobilization 6/18/96
4 Hr. Radiation Injuries 8/13/96
2 Hr. Domestic Violence 8/27/96
4 Hr. Perry Procedures/ Decon. 9/10/96
4 Hr. Perry Drill 9/17/96

David A Wappes
Instructor

Claudia L. Gary
Claudia Gary R.N. \ Paramedic

Conneaut Rescue Squad

Station No. 3

THIS CERTIFICATE IS PRESENTED TO

[redacted]

WHEREAS

[redacted] HAS COMPLETED 382 SQUAD RUNS BY NOVEMBER 30, 1995

A SUFFICIENT NUMBER TO BE CONSIDERED A "HARD CHARGER" FOR 1995

Awarded This 1ST *Day of* JANUARY 19 96

Michael J. Smith

Authorized By

Title

© GOES 910

LITHO IN U.S.A.

Ohio Peace Officer Training Council

State of Ohio
Office of the Attorney General

This is to certify that

[redacted]

Has Completed

36-HOUR JAILER TRAINING, 5 DAY FACILITY

Held at

SACS TRAINING CENTER

21st NOVEMBER 95

Betty D. Montgomery
Attorney General

Col Warren H. Davies
Colonel Warren H. Davies, Chairman
Ohio Peace Officer Training Council

OHIO
PEACE OFFICER TRAINING COUNCIL

Vernon C. Chenevey
Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Council

[redacted]

Printed on Recycled Paper

UNITED STATES FIRE ADMINISTRATION

NATIONAL FIRE ACADEMY

CERTIFICATE OF TRAINING

Awarded to

[redacted]

in recognition for completion of the National Fire Academy Course

MANAGING COMPANY TACTICAL OPERATIONS
12 HOURS

presented by the

CONNEAUT FIRE DEPARTMENT STATION 3

issued this 7TH **day of** MAY

William J Ennis

KENT STATE UNIVERSITY

KENT, OHIO

DEPARTMENT OF ADULT COUNSELING, HEALTH, AND VOCATIONAL EDUCATION

This is to certify that

[redacted]

has successfully attended

THE ANNUAL FIRE EDUCATION CONFERENCE

this twenty six *day of* March 1995

Ted R. Heck
Workshop Instructor

William Libich
Workshop Director

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED
CPR Update

Presented by David Wassie, EMT-P

At Conneaut Fire Dept. Station 3

And is hereby awarded 2 contact hours.

DATED March 28, 1995

David A. Wassie, EMT-P
Training Officer

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate No [illegible]

OHIO FIRE ACADEMY

Certificate of Training

Awarded To

[redacted]

For Completion Of The Ohio Fire Academy Course

First Responder Haz Mat: Awareness

Course No.: 1714-95-302

Hours: 4

Date of Completion: March 17, 1995

A. Gregory Dews

Superintendent

COM 5160

Ohio Fire Academy
Certificate of Training

ame: [redacted]

ourse: First Responder Haz Mat: Awareness

ourse No.: 1714-95-302

ours: 4

ompletion Date: March 17, 1995

EPARTMENT COPY

Ohio Fire Academy
Certificate of Training

Name: [redacted]

Course: First Resp. Haz Mat Aware

Course No.: 1714-95-302

Hours: 4 Hours

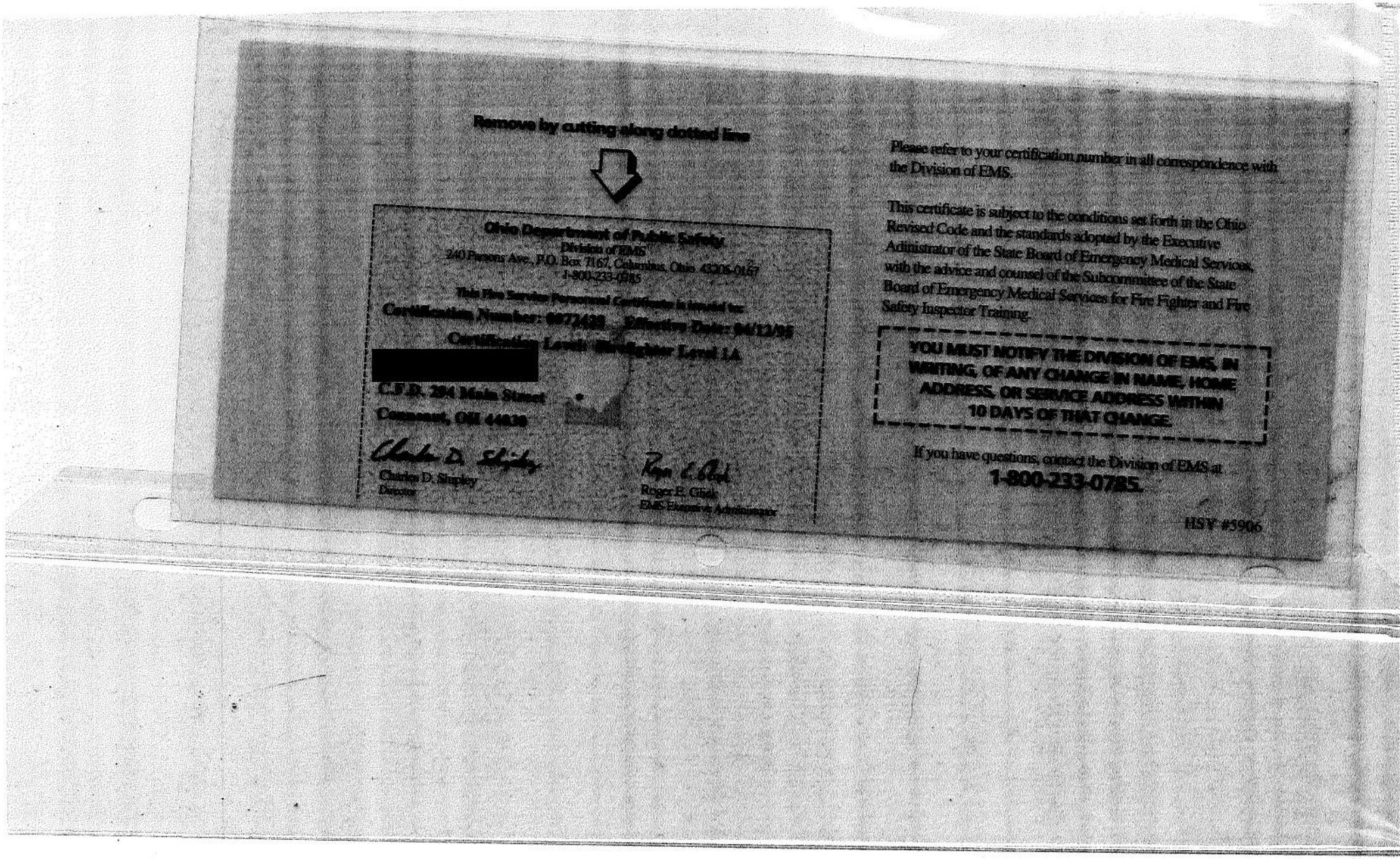
Date of Completion: 03/17/95

A. Gregory Dews

Superintendent

Detach This Wallet Card ⬆ And Carry With You For Your Personal Record

⬅ Detach This 3x5 Card For Your Department



Remove by cutting along dotted line

Ohio Department of Public Safety
Division of EMS
240 Parsons Ave., P.O. Box 7167, Columbus, Ohio 43205-0167
1-800-233-0785

This Fire Service Personnel Certificate is issued to:

Certification Number: 0072438 Effective Date: 04/12/95

Certification Level: Firefighter Level 1A

[redacted]

C.F.D. 204 Main Street
Cincinnati, OH 44836

Charles D. Shipley
Director

Roger E. Glisk
EMS Executive Administrator

Please refer to your certification number in all correspondence with the Division of EMS.

This certificate is subject to the conditions set forth in the Ohio Revised Code and the standards adopted by the Executive Administrator of the State Board of Emergency Medical Services, with the advice and counsel of the Subcommittee of the State Board of Emergency Medical Services for Fire Fighter and Fire Safety Inspector Training.

YOU MUST NOTIFY THE DIVISION OF EMS, IN WRITING, OF ANY CHANGE IN NAME, HOME ADDRESS, OR SERVICE ADDRESS WITHIN 10 DAYS OF THAT CHANGE.

If you have questions, contact the Division of EMS at 1-800-233-0785.

HSY #5906



ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Alcohol and Drug Emergencies

Presented by Douglas Batchelor, EAdv. EMT

At Conneaut Fire Dept. Station # 3

And is hereby awarded 2 contact hours.

DATED January 17, 1995

David A. Wassie, EMT-P
Training Officer

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate № 001536

Conneaut Rescue Squad

Station No. 3

THIS CERTIFICATE IS PRESENTED TO

[redacted]

WHEREAS

[redacted] HAS COMPLETED 518 SQUAD RUNS BY NOVEMBER 30, 1994.

A SUFFICIENT NUMBER TO BE CONSIDERED A "HARD CHARGER" FOR 1994

Awarded This 1ST *Day of* JANUARY 1995

Michael Smith
Authorized By

Ass't. Batt Chief
Title

© GOES 910

LITHO IN U.S.A.



ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Ashtabula County EMT-A
Esophageal Intubation Course

And is hereby awarded 2 contact hours.

DATED October 16, 1994

Sherman R. Werstler

Sherman R. Werstler, EMT-P
EMT-A Instructor
ACLS Instructor

Renew By December 31, 1995

Claudia L. Gary

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate No [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Childbirth Review and OB Emergencies

Presented by **Ted Huffman, NREMT-P**

At **Ashtabula County Joint Vocational School**

And is hereby awarded **3** contact hours.

DATED **September 22, 1994**

Claudia L. Gary

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Chest Trauma And Decompression

Presented By David A. Wassie, EMT-P
At Conneaut Fire Department Station # 3

And is hereby awarded 2 contact hours.

DATED September 20, 1994

David A. Wassie, EMT-P
Training Officer
ACLS Instructor

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Medical Issues: The Geriatric Patient

Presented by Michael J. Smith, MEd, EMT-P

At Conneaut Fire Department Station # 3

And is hereby awarded 1 contact hours.

DATED August 30, 1994

Vincent T. Gildone, EMT-P
Battlion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Trauma Airway / Ventilation

Presented by Michael J. Smith, MEd, EMT-P

At Conneaut Fire Department Station # 3

And is hereby awarded 1 contact hours.

DATED August 30, 1994

Vincent T. Gildone, EMT-P
Battlion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N[redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Pediatric Emergencies

Presented by David A. Wassie, EMT-P

At Conneaut Fire Separtment Station # 3

And is hereby awarded 2 contact hours.

DATED August 23, 1994

David A. Wassie

David A. Wassie, EMT-P
Training Officer
ACLS Instructor

Claudia L. Gary

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Environmental Injuries

Presented by Michael J. Smith, MEd, EMT-P

At Conneaut Fire Department Station #3

And is hereby awarded 2 contact hours.

DATED August 16, 1994

Vincent T. Gildone, EMT-P
Battlion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate No [redacted]

Conneaut Rescue Squad
Conneaut Fire Department
Station No. 3

CONTINUING EDUCATION

this certifies that: [redacted]

has completed: HEAVY RESCUE 237 INDEPENDENT STUDY

A PROFESSIONAL DEVELOPMENT PROGRAM

consisting of: ELECTRICAL, WINCH AND CRANE SYSTEMS, DRIVER OPERATIONS AND EQUIPMENT.

8 **HOURS OF INSTRUCTION IN:**

awarded: AUGUST 7, 1994

Project Director Michael J. Smith

Training Director Michael J. Smith

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Abdominal Injuries / Illnesses

Presented by David A. Wassie, EMT-P

At Conneaut Fire Department Station # 3

And is hereby awarded 3 contact hours.

DATED July 26, 1994

David A. Wassie

David A. Wassie, EMT-P
Training Officer
ACLS Instructor

Claudia L. Gary

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N 001113

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Respiratory Emergencies

Presented by Joseph N. Greenfield, RRT

At Conneaut Fire Department Station # 3

And is hereby awarded 2 contact hours.

DATED June 21, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate No. [redacted]



ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Trauma: A General Approach

Presented by Michael J. Smith, EMT-P

At Conneaut Fire Department Station #3

And is hereby awarded 1 contact hours.

DATED May 31, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certifi... N[redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Head Injury

Presented by Michael J. Smith, EMT-P

At Conneaut Fire Department Station # 3

And is hereby awarded 1 contact hours.

DATED May 31, 1994

Vincent T. Gildone, EMT-P
Battlion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate No. [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Mass Casualty / Disaster

Presented by Vincent T. Gildone, EMT-P

At Conneaut Fire Department Station # 3

And is hereby awarded 1 contact hours.

DATED April 26, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

[redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

HazMat

Presented by Vincent T. Gildone, EMT-P

At Conneaut Fire Dept. Station # 3

And is hereby awarded 1 contact hours.

DATED April 26, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Stress Management

Presented by Michael J. Smith, MEd, EMT-P

At Conneaut Fire Department Station #3

And is hereby awarded 1 contact hours.

DATED March 29, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate No. [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Medical Issues

Presented by Vincent T. Gildone and Robert Marcy

At Conneaut Fire Department Station # 3

And is hereby awarded 2 contact hours.

DATED March 23, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate [redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Sensitivity Awareness

Presented by Roy Nichols MEd, LSW

At Conneaut Human Resource Center

And is hereby awarded 2 contact hours.

DATED March 8, 1994

Bim R. Orrenmaa, EMT-P
Chief, Conneaut Fire Department

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate N[redacted]

ASHTABULA COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

THIS IS TO CERTIFY THAT

[redacted]

HAS COMPLETED THE ATTENDANCE REQUIREMENTS FOR A
CONTINUING EDUCATION PROGRAM
ENTITLED

Communications

Presented by Vincent T. Gildone

At Conneaut Fire Dept. Station # 3

And is hereby awarded 2 contact hours.

DATED February 22, 1994

Vincent T. Gildone, EMT-P
Battalion Chief

Claudia L. Gary, RN, EMT-P
Brown Memorial Hospital
Paramedic Program #3-1-003

Certificate [redacted]

Employee Disciplinary Report

Name: [redacted]

Employee Number: [redacted]

Department: Police

Date of Incident: 06/11/2025

Time of Incident: 1200

Action to be taken: (check appropriate box)

- [ ] Verbal coaching
- [ ] Written warning
- [x] Reprimand with disciplinary action
- [x] Suspension
- [ ] Dismissal

Nature of incident: (check applicable items)

- [ ] Unexcused absence
- [ ] Tardiness
- [ ] Fail drug or alcohol test
- [ ] Insubordination
- [ ] Reporting under the influence of alcohol/drugs
- [ ] Failure to follow instructions
- [ ] Leaving without permission
- [ ] Substandard work
- [ ] Improper conduct
- [ ] Careless operation of vehicle or equipment
- [ ] Dishonesty
- [ ] Destruction of City property
- [ ] Theft/stealing
- [x] Other Misuse of Technology "OHLEG"

Supervisor's remarks:
(attach separate page if needed)

On 06/11/2025 Ohio Attorney General's Office conducted a compliance audit [redacted] of OHLEG (Ohio Law Enforcement Gateway). This audit is to confirm compliance and to address any misuse of the database. The results of the audit showed the above individual conducted inquiries of the database for a non-law enforcement purpose / criminal justice purpose. This is a violation of the Conneaut Police Department Policy 321 Information Technology Use.

Witnesses:

Employee's remarks:
(attach separate page if needed)

[redacted] admitted to the mistake and explained that he had accessed the database to obtain information pertinent to personal vehicles for insurance paperwork following a request for said information from the insurance company.

I have read this report [redacted]

Signature of Employee — Date: 6-12-2025

Signature of Supervisor — Date

Signature of Department Head — Date: 6/12/25

ABOVE OFFENSE(S) HAVE BEEN NOTED AND ARE MADE PART OF THE ABOVE EMPLOYEE'S PERSONNEL FILE AS OF THIS DATE

Personnel Department — Date

Conneaut City Police

Serving Since 1902

Michael Bertolasio
Acting Chief of Police



294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelbertolasio@conneautpd.com

To: Conneaut City Manager Mr Nicholas Sanford
Ref: Employee disciplinary action
Date: 06/12/2025

Mr Sanford,

On June 11th, 2025; the Ohio Attorney General's Office conducted an audit of the Conneaut Police Department's access to the informational database known as OHLEG. This database is used throughout the State of Ohio for criminal justice purposes assisting both the Courts and Law Enforcement investigations. The usage of this system is recorded and tracked by the Ohio Attorney General's Office. Every three (3) to four (4) years the Attorney General's Office conducts audits per their policies of usage. The outcome of the audit is discussed and sent to the agency department head to address any infractions or issues.

In the scope of this audit, an issue pertaining to [redacted] was flagged as potential misuse of the database. The audit trail revealed (5) five searches of information pertaining to himself and those of his family. This type of activity is strictly prohibited and a violation of the Policy 321 of the Conneaut Police Department, but also that of the Ohio Law Enforcement Gateway policies.

I received a report pertaining to the audit of [redacted] usage from 10/01/2021. I reviewed the report, and no additional misuses were discovered. Upon completing my review, I spoke to [redacted] about the misuse. [redacted] fully admitted to the infractions and was forth coming as to why this occurred. At the time of the inquiries, [redacted] was filling out paperwork pertaining to vehicle insurance and was obtaining pertinent vehicle information not available on his person such as the VIN number and driver license numbers. This example of usage is not for criminal justice purposes or pertaining to a criminal investigation.

[redacted] was advised that due to the policy violation he would receive a written reprimand in his personnel file, he would be removed from the eligibility list for promotion, receive a one (1) day of unpaid leave, and could potentially face a suspension from OHLEG use, upon their review. [redacted] was advised that any further violations of this nature could result in additional reprimands, criminal sanctions, and termination.

At this time, there is no further action required to be taken by the Conneaut Police Department, and this will be considered closed. Conneaut Police Department will have a follow-up audit addressing the actions taken by Conneaut Police Department in accordance with the standards of OHLEG usage.

V/R,

Michael Bertolasio
Acting Chief / Lieutenant
Conneaut Police Department

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelcolby@conneautpd.com

October 7, 2020

On Wednesday September 16, 2020 I received a phone call at my place of residence from [redacted] advised me that he sat table of a hearing involving Conneaut resident Justin Furmage, who was being represented by Attorney David Purdue.

[redacted] indicated that during one portion of a counsel session with Honorable Judge Thomas Harris, things became heated between Purdue and Assistant Prosecutor John Lewis. As told by [redacted], while being cross examined Mr. Purdue made a derogatory comment about his involvement with the Boy Scouts of America. While [redacted] was upset by the comment, his conduct on the stand remained professional.

While leaving the courthouse at the conclusion of that day's testimony, [redacted] observed Attorney Purdue at his vehicle. According to [redacted], he did approach Mr. Purdue and commented on his unbecoming comment referencing his association with the BSA.

[redacted] indicated that Mr. Purdue became verbally abusive toward him and at one point challenged him to a fight. [redacted] readily admitted to the exchange of words with Purdue and accepted the invitation, but calmer heads prevailed and the two parted ways.

Within the next few days I received a phone call at my office from Mr. Purdue. While Mr. Purdue didn't go into any of the court proceeding actions, he did reference [redacted] behavior in the parking lot. He also indicated that he filed a report with the Jefferson Village Police Department. I advised Mr. Purdue of our procedure for filing an official officer complaint form and obtained his mailing address. The form was sent US Mail the next business day.

I then contacted JVPD Chief David Wassie in regards to the report. Upon checking his records package it was discovered that a Call for Service record was made, which I requested be sent to my office. Chief Wassie advised me that he would fax it to my office the next day.

Upon arrival to work the next day I received an envelope from Chief Wassie. It was the record of the incident with his department dated [redacted] It appears that the complaint was taken over the phone, and depicts the allegations made by Purdue that same day.

On September 28 2020 I received the Conneaut Police Department Complaint Against Personnel Form from Attorney David Purdue, attached. The record of events was similar to what was already explained to me, but indicated [redacted] to be the primary aggressor.

On today's date, I received the written response of [redacted], attached. It mirrors that of what he told me per our phone conversation that day in particular. In speaking with [redacted] regarding the matter, he indicates that he probably should have just walked directly to his vehicle and left.

After viewing the incident from both sides, I'm inclined to believe that indeed there was a verbal altercation on September 16th 202 between [redacted] and Attorney David Purdue. While the event never turned physical, the exchange between two adults should have never taken place. As a call pertaining the matter was placed to the Jefferson Village Police Department, I feel their categorizing as a CFS and not an actual complaint shows the severity of the incident as noteworthy at best.

I've spoken to [redacted] about his conduct that day, which I was assured will never take place again. I am leaving the matter subject of an employee counseling and consider the matter closed.

Michael Colby, Chief

Michael Colby
Chief of Police

RECEIVED
9-28-20

CONNEAUT POLICE DEPARTMENT
COMPLAINT AGAINST PERSONNEL FORM

DAVID W. PER DUE
Complaining Party Name (Alleged Victim)

[redacted]
Date/Time Reported

P.O. BOX 70 GENEVA, OHIO 44041
Complaining Party Address

[redacted]
Phone Number

CRIMINAL ASSAULT/MENACING
Type of Complaint

PKING LOT JEFFERSON CTHOUSE
Location of Occurrence

[redacted]
Employee(s) name, position if known

[redacted]
Date/Time of Occurrence

Please write below a summary of events and the reason(s) why you feel that Police personnel were involved in misconduct or unreasonable behavior:

I WAS IN TRIAL ALL DAY ON THE [redacted] WAS CROSSED EXAMINED BY MYSELF AS THE LAST WITNESS OF THE DAY. AS I WAS LEAVING THE CT HOUSE TO LOAD MY MATERIALS IN MY TRUCK [redacted] MADE DISPARAGING REMARKS TO ME AND ULTIMATELY THREATENED ME TO FIGHT HIM. MY CLIENT WITNESSED THIS AND (2) OTHER MEN. I FILED A POLICE RPT. WITH JEFFERSON P.D. WHEN I RETURNED TO MY OFFICE.

If more written space is needed, add additional information on the rear of this form.
Include Witness Names, Address and Telephone Number.

Please answer the following questions by circling Yes or No.

(Y) (N) My complaint and statement is true and does not contain any false information.

(Y) (N) I understand that I may be asked to be interviewed and give either additional statements or be asked to verify information through the usage of ~~a polygraph~~ ADMIT. (includes witnesses)

(Y) (N) I understand I may be asked to give testimony at an administrative, civil or criminal hearing (under oath) if the matter requires such actions.

(Y) (N) I understand that I may be asked to release medical or other information that is pertinent to this complaint.

David W. Per Due
Complaining Party Signature

9-24-20 ~ 1:20 P.
Date/Time

I understand that this report may be obtained at the Police Department and returned to the Chief of Police directly if I wish. I am not required to give the nature of complaint to personnel when obtaining this form unless I want to. I may fill out the form and leave it with the on-duty supervisor if I wish. The on-duty supervisor will forward the written complaint to the Chief of Police.

Give or Mail to: Chief of Police, 294 Main Street, Conneaut, Ohio 44030

★ I DESIRE UNDER THE FREEDOM OF INFORMATION ACT TO RECEIVE INFORMATION ETC. AS TO WHAT ACTION WAS TAKEN ON THIS COMPLAINT.

CFS SUMMARY

	CFS# [redacted]	RECEIVED DATE/TIME [redacted]
		INCIDENT NUMBER [redacted]
		INCIDENT DATE/TIME

DESCRIPTIVES

ACTIVITY	THREAT
CALL ORIGIN	
DISPATCHER	NCHIACCHIE -
RESPONSE	
DISPOSITION	CALL NOTES ONLY
RP/DS	
OTHER CONTACTS	

CALLER

NAME	PURDUE, DAVID	CALL BACK [redacted] PHONE [redacted]
ADDRESS		

LOCATION

ADDRESS	25 WEST JEFFERSON ST JEFFERSON, OH 44047	
LOCATION	ASHTABULA COUNTY COURTHOUSE	TOWNSHIP
GRID	JEFFERSON	PATROL AREA: JEFFERSON POLICE DEPARTMENT

CALL DESCRIPTION

CALL TAKEN BY: SMELLIN
DISPATCHED BY: NCHIACCHIERO
09/16/2020 16:36:55 - SMELLIN - CALLER STATING HE WAS LEAVING WESTERN COUNTY COURT AND WAS VERBALLY ATTACKED BY [redacted]
09/16/2020 16:38:15 - SMELLIN - CALLER TRANSFERRED TO APD
09/16/2020 16:38:34 - SMELLIN - HAPPENED IN THE PARKING LOT OUTSIDE THE COURT HOUSE
09/16/2020 16:38:57 - NCHIACCHIERO - CALLER STATED THIS HAPPENED AROUND ROUGHLY AN HOUR AGO
09/16/2020 16:39:31 - NCHIACCHIERO - CALLER STATED HE IS AT HIS OFFICE IN GENEVA AND WOULD LIKE TO RECIEVE A PHONE CALL
09/16/2020 16:48:26 - NCHIACCHIERO - 393; WILL BE AT THE STATION TO MAKE THE PHONE CALL
09/16/2020 17:11:19 - GNELSON - J-393, I CONTACTED MR. PURDUE VIA TELEPHONE FROM OUR OFFICE. MR. PURDUE STATED HE WAS ABOUT TO ENTER HIS VEHICLE FROM THE JEFFERSON COURT HOUSE PARKING LOT AFTER A TRIAL PROCEEDING, WHEN A CONNEAUT POLICE [redacted] APPROACHED HIM AND VERBALLY ATTACKED HIM, CALLING MR. PURDUE A CUNT AND PUSSEY , SCREAMING AT HIM, " I HATE YOU, AND STATING TO MR. PERDUE, " LETS GO AT IT." MR. PURDUE SAYS [redacted] GOT CLOSE TO HIS FACE, ABOUT THREE INCHES AWAY, BUT SAYS THERE WAS NO PHYSICAL CONTACT. MR. PURDUE SAYS [redacted] BECAME UPSET OVER HIS CROSS EXAMINATION QUESTIONS DURING THE TRIAL MR. PURDUE ADVISED HE WILL ATTEMPT CONTACT WITH CONNEAUT POLICE CHIEF.
09/16/2020 17:11:33 - GNELSON - J-393, STATUS:CN

Certified Copy
X

DISPATCHED UNITS

AGENCY	UNIT	OFFICER	DISPATCH	ENROUTE	ONSCENE	CLEAR	MINUTES
JVPD	P-2	NELSON, GARY	16:39		16:40	17:11	32

CFS PEOPLE SUPPLEMENT

CDC#	RECEIVED DATE / TIME	CD Call Type
[redacted]	[redacted]	

PERSON 1

Name Type	Name	
PRIMARY CALLER	PURDUE, DAVID	
Address	Phone	
	[redacted]	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

PERSON 2

Name Type	Name	
Address	Phone	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

PERSON 3

Name Type	Name	
Address	Phone	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

PERSON 4

Name Type	Name	
Address	Phone	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

PERSON 5

Name Type	Name	
Address	Phone	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

PERSON 6

Name Type	Name	
Address	Phone	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

PERSON 7

Name Type	Name	
Address	Phone	

Date of Birth		Driver Lic #	State	Height	Weight	Hair	Eyes

Gender	Race	Complexion	Build

Employer Name	Employer Phone	

Conneaut City Police

Serving Since 1902

RECEIVED
10/7/20

Michael Colby
Chief of Police



294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: Michaelcolby@conneautpd.com

October 6,2020

On [redacted] I was in trial on the case of the State of Ohio V. Justin Furmage, with David Purdue as the defense counsil for Mr. Furmage. While I was testifying, Mr. Purdue made a baseless and unprofessional allegation. After the trial, in the parking lot, I told Mr. Purdue that his conduct was unprofessional. Mr. Purdue then began to swear at me and call me derrogetory names. I then returned the favor. At one point Mr. Purdue said that he would like to "clean my clock". After several minutes of swearing at eachother we walked away.

[redacted]

CONNEAUT POLICE DEPARTMENT
COMPLAINT AGAINST PERSONNEL FORM

UNFOUNDED

Jennifer Baker
Complaining Party Name (Alleged Victim)

Aug 31 2022
Date/Time Reported

5423 Adam Ave
Complaining Party Address

[redacted]
Phone Number

Personal Problems with officer [redacted] and Jason Dames.

Misues of Power/ false info reported & anyone who handle this call.
Type of Complaint

Conneaut
Location of Occurrence

[redacted]
Employee(s) name, position if known

[redacted]
Date/Time of Occurrence

Please write below a summary of events and the reason(s) why you feel that Police personnel were involved in misconduct or unreasonable behavior:

thats wrong

This space is not near enough room for all I have to say. First off Jason Dames has nothing in place saying he can not be around or watch children or help for the charges filed against me. 2nd off this has been ongoing with myson! we are trying hard to break him taken off....

If more written space is needed, add additional information on the rear of this form. Include Witness Names, Address and Telephone Number.

Please answer the following questions by circling Yes or No.

(Y) (N) My complaint and statement is true and does not contain any false information.

Please do (Y) (N) I understand that I may be asked to be interviewed and give either additional statements or be asked to verify information through the usage of a polygraph. (includes witnesses)

Please do (Y) (N) I understand I may be asked to give testimony at an administrative, civil or criminal hearing (under oath) if the matter requires such actions.

(Y) (N) I understand that I may be asked to release medical or other information that is pertinent to this complaint.

I work My Butt off for my Kids!

13 years STW Not A Drug addict I'm well aware of Jason Dames past

Jennifer Baker
Complaining Party Signature

Aug 31 2022
Date/Time

I understand that this report may be obtained at the Police Department and returned to the Chief of Police directly if I wish. I am not required to give the nature of complaint to personnel when obtaining this form unless I want to. I may fill out the form and leave it with the on-duty supervisor if I wish. The on-duty supervisor will forward the written complaint to the Chief of Police.

Give or Mail to: Chief of Police, 294 Main Street, Conneaut, Ohio 44030

I want something done this MAKES NO Sense. your charges Dont even add up. and I can prove all Im saying My Kids God mom

Conneaut City Police

Serving Since 1902

Jon. J Arcaro
Chief of Police

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: conneautpd@suite224.net

Date: December 30, 2010

To: [redacted]

From: Sergeant Burlingham

Re: Written Reprimand

On November 14, 2010 I received a grievance/complaint form from an inmate alleging improper treatment by [redacted]

During the subsequent weeks an internal investigation was conducted and the investigating officers concluded that the allegation was unsubstantiated.

Although this allegation was unsubstantiated, it was clear that [redacted] did violate several sections of our Departmental Policy and Procedures as well as several sections of the Jail Manual, Policy and Procedures.

In addition to these policy violations I am concerned as to [redacted] decision to enter the jail area to handle an issue when he was not the assigned jail officer, nor the officer in charge of the shift.

This in conjunction with the poor judgment used by [redacted] shortly after being released for Solo Patrol when his driving actions were in direct violation of General Order 3.6. Including 129 mph on I 90 without lights and siren looking for a semi straddling lanes and 107 mph on St. Rt. 7 between Welton Rd. and Gateway Ave. again without lights and siren responding to a domestic call.

To follow is a list of the violation on November 11, 2010.
Departmental Rules and Regulations Violated:

1.03 – Unsatisfactory Performance
1.06 - Obedience of Rules and Regulations
1.30 – Unbecoming Conduct
3.07 – Courtesy

Jail Manual Policy and Procedures Violated:

10.03 Security

L. Written Entry for significant activities (use of force and movement in jail)
CC. Use of force documentation

I am recommending to John Williams, Acting City Manager, that your Probationary Period be extended by 3 (three) months and that this written reprimand remain in your personnel file for a period of 12 months unless there is intervening subsequent or like offense during that time period.

Further violations of this nature or your inability to make use good judgment will result in a full review of your continued employment.

Sgt. Burlingham

Cc: Acting City Manager, John Williams
FOP 51 President, Steve Gerics
Personnel File
file

City of Conneaut
Office of the City Manager

Robert Schaumleffel, Jr.
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

December 29, 2010

[redacted]
City of Conneaut Police Department
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

I am in receipt of a letter from Sergeant Chuck Burlingham regarding an incident that you were involved in on [redacted] in the Conneaut Jail. Due to the fact that you are a probationary employee, the severity of the incident, and based on a recommendation from Sergeant Burlingham, I am hereby extending your probationary period for three months.

If you have any questions pertaining to this letter, please feel free to contact either Sergeant Burlingham, or myself for further explanation.

Sincerely,
CITY OF CONNEAUT

John Williams
Acting City Manager

JW/pb

cc: Chuck Burlingham, Sergeant
Finance Office
Civil Service Commission
Personnel File

This Form Provided By: Lifeloc TECHNOLOGIES

U.S Department of Transportation (DOT) Alcohol Testing Form

(The instructions for completing this form are on the back of Copy 3)

To Reorder Forms:
Phone: 303.431.9500
www.lifeloc.com

Step 1: TO BE COMPLETED BY ALCOHOL TECHNICIAN

A: Employee Name [redacted]
(Print) [redacted]

B: SSN or Employee ID No. XXX-XX [redacted] DOB [redacted]

C: Employer Name: City of Conneaut
Street: 294 Main St
City, State, Zip: Conneaut, OH 44030

DER Name and Telephone No.: Mike Bertolasio (440) 593-7440
DER Name / DER Phone Number

D. Reason for Test ☐ Random ☐ Reasonable Susp ☒ Post-Accident ☐ Return to Duty ☐ Follow-up ☐ Pre-employment

Print Screening Results Here or Affix with Tamper Evident Tape

Lifeloc Technologies
Phoenix 6.0 v8.9.9
Serial No. 25460019
Units BAC
Test Number 00094
Test Type (ez) Auto Test
Result: .000
Date: 06/25/2026
Time: 15:35
Air Blank .000
Time: 15:34
[redacted]

Step 2: TO BE COMPLETED BY EMPLOYEE

I certify that I am about to submit to alcohol testing required by US Department of Transportation regulations and that the identifying information provided on the form is true and correct.

Signature of Employee — Date: Month / Day / Year

Step 3: TO BE COMPLETED BY ALCOHOL TECHNICIAN

(If the technician conducting the screening test is not the same technician who will be conducting the confirmation test, each technician must complete their own form.) I certify that I have conducted alcohol testing on the above named individual in accordance with the procedures established in the US Department of Transportation regulation, 49 CFR Part 40, that I am qualified to operate the testing device(s) identified, and that the results are as recorded.

TECHNICIAN: ☒ BAT ☐ STT DEVICE: ☐ SALIVA ☒ BREATH* 15-Minute Wait: ☐ Yes ☐ No

SCREENING TEST: *(For BREATH DEVICE* write in the space below only if the testing device is not designed to print)*

Test #	Testing Device Name	Device Serial # OR Lot # & Exp Date	Activation Time	Reading Time	Result

CONFIRMATION TEST: *Results MUST be affixed to each copy of this form or printed directly onto the form.*

REMARKS:

Print Additional Results Here or Affix with Tamper Evident Tape

UH Conneaut Medical Center 158 W. Main Rd.
Alcohol Technician's Company / Company Street Address

Sharon Brannon RRT Conneaut OH 44030 (440) 593-1131
(PRINT) Alcohol Technician's Name (First, M.I., Last) / Company City, State, Zip / Phone Number

Sharon Brannon RRT
Signature of Alcohol Technician

Date: 6 / 25 / 2026 (Month / Day / Year)

Step 4: TO BE COMPLETED BY EMPLOYEE IF TEST RESULT IS 0.02 OR HIGHER

I certify that I have submitted to the alcohol test, the results of which are accurately recorded on this form. I understand that I must not drive, perform safety-sensitive duties, or operate heavy equipment because the results are 0.02 or greater.

Signature of Employee — Date: Month / Day / Year

Form DOT F 1380 (Rev. 5/2008) OMB No. 2105-0529

COPY 2 - EMPLOYEE RETAINS

This Form Provided By: Lifeloc TECHNOLOGIES

U.S Department of Transportation (DOT) Alcohol Testing Form

(The instructions for completing this form are on the back of Copy 3)

To Reorder Forms:
Phone: 303.431.9500
www.lifeloc.com

Step 1: TO BE COMPLETED BY ALCOHOL TECHNICIAN

A: Employee Name [redacted]
(Print) [redacted]

B: SSN or Employee ID No. XXX-XX-[redacted] DOB [redacted]

C: Employer Name: City of Conneaut
Street: 294 Main St
City, State, Zip: Conneaut, OH 44030

DER Name and Telephone No.: Mike Bertolasio 440-593-7440
DER Name / DER Phone Number

D. Reason for Test ☐ Random ☐ Reasonable Susp ☒ Post-Accident ☐ Return to Duty ☐ Follow-up ☐ Pre-employment

Print Screening Results Here or Affix with Tamper Evident Tape

Lifeloc Technologies

Phoenix 6.0	v8.9.9
Serial No.	25460019
Units	BAC
Test Number	00094
Test Type (ez)	Auto Test
Result:	.000
Date:	06/25/2026
Time:	15:35
Air Blank Time:	.000 15:34

[redacted]

Step 2: TO BE COMPLETED BY EMPLOYEE

I certify that I am about to submit to alcohol testing required by US Department of Transportation regulations and that the identifying information provided on the form is true and correct.

Signature of Employee — Date: Month / Day / Year

Step 3: TO BE COMPLETED BY ALCOHOL TECHNICIAN

(If the technician conducting the screening test is not the same technician who will be conducting the confirmation test, each technician must complete their own form.) I certify that I have conducted alcohol testing on the above named individual in accordance with the procedures established in the US Department of Transportation regulation, 49 CFR Part 40, that I am qualified to operate the testing device(s) identified, and that the results are as recorded.

TECHNICIAN: ☒ BAT ☐ STT DEVICE: ☐ SALIVA ☒ BREATH* 15-Minute Wait: ☐ Yes ☐ No

SCREENING TEST: *(For BREATH DEVICE* write in the space below only if the testing device is not designed to print)*

Test #	Testing Device Name	Device Serial # OR Lot # & Exp Date	Activation Time	Reading Time	Result

CONFIRMATION TEST: *Results MUST be affixed to each copy of this form or printed directly onto the form.*

REMARKS:

Print Additional Results Here or Affix with Tamper Evident Tape

UH Conneaut Medical Center 158 W. Main Rd.
Alcohol Technician's Company / Company Street Address

Sharon Brannon RRT Conneaut OH 44030 440-593-1131
(PRINT) Alcohol Technician's Name (First, M.I., Last) / Company City, State, Zip / Phone Number

Signature of Alcohol Technician — Date: 6 / 25 / 2026 (Month / Day / Year)

Step 4: TO BE COMPLETED BY EMPLOYEE IF TEST RESULT IS 0.02 OR HIGHER

I certify that I have submitted to the alcohol test, the results of which are accurately recorded on this form. I understand that I must not drive, perform safety-sensitive duties, or operate heavy equipment because the results are 0.02 or greater.

Signature of Employee — Date: Month / Day / Year

Form DOT F 1380 (Rev. 5/2008) OMB No. 2105-0529

COPY 2 - EMPLOYEE RETAINS

This Form Provided By:
Lifeloc TECHNOLOGIES

Alcohol Testing Form (Non-DOT)

(The instructions for completing this form are on the back of Copy 3)

To Reorder Forms:
Phone: 303.431.9500
www.lifeloc.com

Step 1: TO BE COMPLETED BY ALCOHOL TECHNICIAN

A: Employee Name [redacted]
(Print) (First, M.I., Last)

B: SSN or Employee ID No. SS XXX-XX-[redacted] Phone # [redacted]

C: Employer Name: City of Conneaut
Street: 294 Main St.
City, State, Zip: Conneaut OH 44030

DER Name and Telephone No.: Tessica Obhof (440) 593-7401
DER Name / DER Phone Number

D: Reason for Test: ☐ Random ☐ Reasonable Susp ☒ Post-Accident ☐ Return to Duty ☐ Follow-up ☐ Pre-employment

Print Screening Results Here or Affix with Tamper Evident Tape

STEP 2: TO BE COMPLETED BY EMPLOYEE

I certify that I am about to submit to alcohol testing and that the identifying information provided on the form is true and correct.

[redacted]
Signature of Employee

10 / 13 / 22
Date Month Day Year

Lifeloc Technologies

Phoenix 6.0	v8.9.9
Serial No.	18320024
Units	BAC
Test Number	00482
Test Type (ez)	Manual Test
Result:	.000
Date:	10/13/2022
Time:	21:04
Air Blank	.000
Time:	21:04

Subject

STEP 3: TO BE COMPLETED BY ALCOHOL TECHNICIAN

(If the technician conducting the screening test is not the same technician who will be conducting the confirmation test, each technician must complete their own form.) I certify that I have conducted alcohol testing on the above named individual and that I am qualified to operate the testing device(s) identified, and that the results are as recorded.

TECHNICIAN: ☒ BAT ☐ STT DEVICE: ☐ SALIVA ☒ BREATH* 15-Minute Wait: ☐ Yes ☐ No

SCREENING TEST: *(For BREATH DEVICE* write in the space below only if the testing device is not designed to print.)*

Test #	Testing Device Name	Device Serial # OR Lot # & Exp Date	Activation Time	Reading Time	Result

CONFIRMATION TEST: *Results MUST be affixed to each copy of this form or printed directly onto the form.*

REMARKS:

UHCMC — Alcohol Technician's Company
150 W. Main Rd — Company Street Address

Alexis Tran — (PRINT) Alcohol Technician's Name (First, M.I., Last)
Conneaut OH 44030 — Company City, State, Zip
(440) 593-1131 — Phone Number

Signature of Alcohol Technician

10 / 13 / 22
Date Month Day Year

Print Additional Results Here or Affix With Tamper Evident Tape

STEP 4: TO BE COMPLETED BY EMPLOYEE IF TEST RESULTS ARE POSITIVE.

I certify that I have submitted to the alcohol test, the results of which are accurately recorded on this form. I understand that I must not drive, perform safety-sensitive duties, or operate heavy equipment because the results are positive.

Signature of Employee

/ / /
Date Month Day Year

COPY 2 - EMPLOYEE RETAINS

[redacted]

RECEIVED
FEB – 8 2024
By: .....

EMPLOYEE INCIDENT REPORT

Name of Employee [redacted]
Home address [redacted]
Age [redacted] Sex M ✓ F ____ Job Title [redacted]
Department Convent police
Date of Injury 2-7-24 Time 1547 AM ____ PM ✓
Last day worked 2-6-24 Returned to work 2-8-24
If not returned, estimated lost time NA
Date reported if different than date of injury NA
To whom was injury reported? Sullivan
Description of injury (Be specific - name any objects or substances involved)
While Trying To Assist person Hall. Hall Bite [redacted] IN The [redacted]

Part(s) of body injured [redacted]

Name(s) of witness(s) Sullivan, Debb, Landi, Keasling

Was any medical or emergency treatment necessary? Yes ____ No X
If yes, state name of physician and/or hospital NA

Is this an aggravation of a previous injury? Yes ____ No X
Have you ever had a similar injury? Yes X No ~~X~~ MS

By signing this form I expressly waive all provisions of law which forbid any person or persons who heretofore did or who hereafter may medically attend, treat or examine me or who may have information of any kind which may be used to render a decision in my claim for injury/disease of ____, 20 24, from disclosing such knowledge to my employer and/or Comp Management, Inc. (representative of employer). A copy of this form will serve same as the original.

Employee signature [redacted] Date 2-8-24
Printed name [redacted]
Supervisor's signature [redacted] Date 2-7-24
Printed name Michael T. Sullivan
Supervisor's signature does not constitute certification of a claim.

cc: City Mgr 2-8-24

EMPLOYEE INCIDENT REPORT

RECEIVED
MAR 15 2022
By: .....

Name of Employee [redacted]
Home address [redacted]
Age [redacted] Sex M X F ____ Job Title [redacted]
Department Police
Date of Injury 03-09-2022 Time 1930 AM ____ PM X
Last day worked 03-11-2022 Returned to work 03-10-2022
If not returned, estimated lost time N/A
Date reported if different than date of injury 03-11-2022
To whom was injury reported? Chief
Description of injury (Be specific - name any objects or substances involved)
I forced entry into A door with A Sledgehammer During A Search warrant and Injured [redacted]

Part(s) of body injured [redacted]

Name(s) of witness(s) Will Pankomaki, Spencer Gayle, Mike Palinkas, Tim Rose

Was any medical or emergency treatment necessary? Yes ____ No X
If yes, state name of physician and/or hospital ____

Is this an aggravation of a previous injury? Yes ____ No X
Have you ever had a similar injury? Yes X No ____
Same Situation on Duty in 2020

By signing this form I expressly waive all provisions of law which forbid any person or persons who heretofore did or who hereafter may medically attend, treat or examine me or who may have information of any kind which may be used to render a decision in my claim for injury/disease of 03-11, 2022, from disclosing such knowledge to my employer and/or Comp Management, Inc. (representative of employer). A copy of this form will serve same as the original.

Employee signature [redacted] Date 03-11-2022
Printed name [redacted]
Supervisor's signature [signature] Date 3-15-22
Printed name Michael Beatrasio
Supervisor's signature does not constitute certification of a claim.

RECEIVED

AUG 27 2020

BY:

EMPLOYEE INCIDENT REPORT

Name of Employee [redacted]

Home address _____

Age _____ Sex M ✓ F _____ Job Title [redacted]

Department Police Dept

Date of Injury 8-26-2020 Time 4:05 AM _____ PM ✓

Last day worked 8-26-2020 Returned to work 8-27-2020

If not returned, estimated lost time NLT

Date reported if different than date of injury 8-26-2020 (Report [redacted])

To whom was injury reported? Chief Colby

Description of injury (Be specific - name any objects or substances involved)

While attempting to arrest an individual wanted by the U.S. Marshalls, Ptlm Sharpnack broke the drivers side window + I reached in to handcuff the person & cut my [redacted]

Part(s) of body injur[redacted]

Name(s) of witness(s) Sgt Gerics, Ptlm Sharpnack

Was any medical or emergency treatment necessary? Yes _____ No ✓

If yes, state name of physician and/or hospital _____

Is this an aggravation of a previous injury? Yes _____ No ✓

Have you ever had a similar injury? Yes _____ No ✓

By signing this form I expressly waive all provisions of law which forbid any person or persons who heretofore did or who hereafter may medically attend, treat or examine me or who may have information of any kind which may be used to render a decision in my claim for injury/disease of August 26, 20 20, from disclosing such knowledge to my employer and/or Comp Management, Inc. (representative of employer). A copy of this form will serve same as the original.

Employee signature [redacted] Date 8-26-2020

Printed name [redacted]

Supervisor's signature _____ Date 8-26-2020

Printed name Chief Michael Colby

Supervisor's signature does not constitute certification of a claim.

RECEIVED

AUG 27 2020

BY:

STATEMENT OF WITNESS TO ACCIDENT

INCIDENT IDENTIFICATION INFORMATION

Name of employee alleging incident [redacted] Shift [redacted]

Job Title [redacted] Department Police

WITNESS' STATEMENT

Your name has been given as a witness to an incident alleged by the above individual. Through your cooperation, information can be obtained to complete the investigation of this incident. Therefore, it will be appreciated if you will answer each of the following questions and promptly return your completed statement to your supervisor.

Your name Sgt Steve Gerics Your job title Sergeant

Your address _____

Your telephone number (440)593-7440

Did you see an accident occur involving the above named employee? Yes

If not, how did you learn about the accident? _____

If you did see an accident occur:

Date of Accident 8-26-2020 Time of accident 4:05pm

Describe what you observed [redacted] reached in to handcuff an individual + cut his [redacted] on the broken drivers side window

Your signature _____ Date 8-26-2020

Printed Name Sgt Steve Gerics

State of Ohio §

County of _____ §

Before me, a Notary Public in and for said state, personally appeared the above named who acknowledged before me that he/she did sign the foregoing instrument and that the same is his/her free act and deed.

In testimony whereof, I have hereunto affixed my name and official seal at _____, Ohio, this _____ day of _____, 20_____.

Signed _____

(SEAL)

Printed name _____

My Commission Expires _____

RECEIVED
AUG 27 2020
BY

STATEMENT OF WITNESS TO ACCIDENT

INCIDENT IDENTIFICATION INFORMATION

Name of employee alleging incident [redacted] Shift [redacted]
Job Title [redacted] Department Police

WITNESS' STATEMENT

Your name has been given as a witness to an incident alleged by the above individual. Through your cooperation, information can be obtained to complete the investigation of this incident. Therefore, it will be appreciated if you will answer each of the following questions and promptly return your completed statement to your supervisor.

Your name Ptlm Sam Sharpnack Your job title Patrolman
Your address _____
Your telephone number (440) 593-7440
Did you see an accident occur involving the above named employee? Yes
If not, how did you learn about the accident? _____

If you did see an accident occur:
Date of Accident 8-26-2020 Time of accident 4:05 pm
Describe what you observed [redacted] reached in to handcuff an individual + cut his [redacted] on the broken drivers side window.

Your signature [signature] Date 8-26-2020
Printed Name Ptlm Sam Sharpnack

State of Ohio §
County of _____ §

Before me, a Notary Public in and for said state, personally appeared the above named who acknowledged before me that he/she did sign the foregoing instrument and that the same is his/her free act and deed.

In testimony whereof, I have hereunto affixed my name and official seal at _____, Ohio, this _____ day of _____, 20_____.

Signed _____

(SEAL)

Printed name _____

My Commission Expires _____

RECEIVED

SEP - 6 2019

BY:

EMPLOYEE INCIDENT REPORT

Name of Employee [redacted]

Home address [redacted]

Age [redacted] Sex (M) F Job Title [redacted]

Department Police Department

Date of Injury 09 05 2019 Time 1434 AM PM X

Last day worked 09.06.2019 Returned to work ~~Yes~~ Not yet

If not returned, estimated lost time

Date reported if different than date of injury 09.06.19

To whom was injury reported?

Description of injury (Be specific - name any objects or substances involved)

[redacted] Strain / Injury Sustained While Forcing Entry to A Door w/ A Sledgehammer

Part(s) of body injured [redacted]

Name(s) of witness(s) Tim Rose / Mike Coby / Cord Dodd

Was any medical or emergency treatment necessary? Yes No X

If yes, state name of physician and/or hospital

Is this an aggravation of a previous injury? Yes No X

Have you ever had a similar injury? Yes No X

By signing this form I expressly waive all provisions of law which forbid any person or persons who heretofore did or who hereafter may medically attend, treat or examine me or who may have information of any kind which may be used to render a decision in my claim for injury/disease of 09.05, 2019, from disclosing such knowledge to my employer and/or Comp Management, Inc. (representative of employer). A copy of this form will serve same as the original.

Employee signature [redacted] Date 09.06.2019

Printed name [redacted]

Supervisor's signature Michael Corp, Chief Date 9/6/19

Printed name Michael Corp, Chief

Supervisor's signature does not constitute certification of a claim.

State Road Occupational Medical Facility LLC
600 State Road. Suite 166
Ashtabula Ohio 44004
(440)997-5988 Telephone
(440)997-5169 Fax

POST OFFER PHYSICAL EXAMINATION

Patient Name [redacted] DOB : [redacted]

Company : CONNEAUT POLICE DEPARTMENT

Date of Exam: 06/19/19

A history was taken and a physical exam performed.

- [X] The examinee has no medical condition that would interfere with their performance of the essential functions of the proposed job.
- [ ] The examinee is not able to perform the essential functions of the proposed job.
- [ ] The examinee can perform the essential functions of the proposed job with the following restrictions: (Please see comments)

Comments

Laurie A Reed APN-BC

Physician: LAURIE A. REED

06/19/19
Date

State Road Occupational Medical Facility LLC
600 State Road. Suite 166
Ashtabula Ohio 44004
(440)997-5988 Telephone
(440)997-5169 Fax

RECEIVED
JUN 24 2019
BY:

POST OFFER PHYSICAL EXAMINATION

Patient Name [redacted] DOB : [redacted]

Company : CONNEAUT POLICE DEPARTMENT

Date of Exam: 06/19/19

A history was taken and a physical exam performed.

- [X] The examinee has no medical condition that would interfere with their performance of the essential functions of the proposed job.
- [ ] The examinee is not able to perform the essential functions of the proposed job.
- [ ] The examinee can perform the essential functions of the proposed job with the following restrictions: (Please see comments)

Comments

Physician: LAURIE A. REED

06/19/19
Date

State Road Occupational Medical Facility
600 State Road, Suite 166
Ashtabula, OH 44004
Phone: 440-997-5988 Fax: 440-997-5169

REPORT OF EXAMINATION

(Pre-Placement/Periodic)

RECEIVED
SEP 0 1 2010

Employee: [redacted]
Employer: **Conneaut Police Department**
Date of Examination: **08/17/2010**
Position: _____

Based upon my examination and review of medical history and medications, I recommend that the above named employee:

_____ Is currently medically unqualified for this position. (See Comments)
__✓__ Is currently able to perform this job without accommodations.
_____ Is on medical hold: waiting for additional data.
_____ Requires further testing to fully evaluate ability or risk.
_____ Based upon exam and history, this position may place this employee at a high risk of substantial harm, and this employee may therefore pose a direct threat to self or to others. In my opinion, the following accommodations might significantly decrease the magnitude of this threat:
_____ Medically cleared for respirator use.

RECOMMENDATIONS / RESTRICTIONS:

_____ Work at floor level only (no ladders)
_____ Lifting up to (10),(25),(50),( ) # only
_____ No hazardous equipment/machinery
_____ No exposure to dust or fumes
_____ Must wear corrective lenses while working
_____ No vibrating tools/hammering/repetitive hand and/or finger motions
_____ Final decision pending (see comments)
_____ Other (see comments)

Additional Testing or Medical Treatment Recommended:
_____
_____
_____ Advisable, _____ Mandatory, _____ Please call

Examiner's Comments: _____
_____
_____

DRUG SCREEN: __✓__ **Negative,** _____ **Negative Dilute,** _____ **Positive,** _____ **Invalid,** _____ **Recollect**

BREATH ALCOHOL TEST: _____ **Negative,** _____ **% or** _____ **(G/210 liters),** _____ **Refused**

LABORATORY RESULTS: __✓__ **Normal ,** _____ **Require Follow-Up**

TYPE OF MASK: (circle one) **3M - REG SMALL**
TECHNOL - REG SMALL

PATIENT WAS OFFERED HEPATITUS SERIES: _____**Yes**_____**No** **PATIENT RECEIVED TITERS**_____**Yes**_____**No**

_____ 8-26-10
Examining Physician's Signature Date

_____/_____/_____ Date forwarded to employer by: _____

State Road Occupational Medical Facility
600 State Road, Suite 166
Ashtabula, OH 44004
Phone: 440-997-5988 Fax: 440-997-5169

RECEIVED
SEP 0 2 2010

REPORT OF EXAMINATION
(Pre-Placement/Periodic)

Employee: [redacted]
Employer: **Conneaut Police Department**
Date of Examination: **08/17/2010**
Position: _____

Based upon my examination and review of medical history and medications, I recommend that the above named employee:

_____ Is currently medically unqualified for this position. (See Comments)
__✓__ Is currently able to perform this job without accommodations.
_____ Is on medical hold: waiting for additional data.
_____ Requires further testing to fully evaluate ability or risk.
_____ Based upon exam and history, this position may place this employee at a high risk of substantial harm, and this employee may therefore pose a direct threat to self or to others. In my opinion, the following accommodations might significantly decrease the magnitude of this threat:
_____ Medically cleared for respirator use.

RECOMMENDATIONS / RESTRICTIONS:

_____ Work at floor level only (no ladders)
_____ Lifting up to (10),(25),(50),( ) # only
_____ No hazardous equipment/machinery
_____ No exposure to dust or fumes
_____ Must wear corrective lenses while working
_____ No vibrating tools/hammering/repetitive hand and/or finger motions
_____ Final decision pending (see comments)
_____ Other (see comments)

Additional Testing or Medical Treatment Recommended:
_____
_____
_____ Advisable, _____ Mandatory, _____ Please call

Examiner's Comments: _____
_____
_____

DRUG SCREEN: __✓__ **Negative,** _____ **Negative Dilute,** _____ **Positive,** _____ **Invalid,** _____ **Recollect**

BREATH ALCOHOL TEST: _____ **Negative,** _____ **% or** _____ **(G/210 liters),** _____ **Refused**

LABORATORY RESULTS: __✓__ **Normal ,** _____ **Require Follow-Up**

TYPE OF MASK: (circle one) **3M - REG SMALL**
TECHNOL - REG SMALL

PATIENT WAS OFFERED HEPATITUS SERIES: _____**Yes**_____**No** **PATIENT RECEIVED TITERS**_____**Yes**_____**No**

_____ 8-26-10
Examining Physician's Signature Date

_____/_____/_____ Date forwarded to employer by: _____

ROBERT HERRON
CITY MANAGER

City of Conneaut

City Hall Building
294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7401
Fax (440) 593-6908
E-mail: conneautcityhall@suite224.net

July 1, 1999

[redacted]
City of Conneaut
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

I am in receipt of your [redacted] letter of resignation from your position of Police Dispatcher and Conneaut Police Reserve Officer, effective [redacted] Please be advised that the City accepts your resignation effective [redacted], and wishes you the very best in your new position with the City of Ashtabula.

Thank you for your years of service and I look forward to continuing to work with you as a [redacted]

Sincerely,
CITY OF CONNEAUT

Robert Herron
City Manager

RDH/pb

cc: Rocco Russo, Police Chief
Finance/Payroll

[redacted]

Mr. Rocco N. Russo, Chief
Conneaut Police Department
294 Main Street
Conneaut, Ohio 44030

Dear Chief Russo;

On this date I have received a letter confirming my appointment as a [redacted] with the City of Ashtabula, Ohio Police Department. My effective date of appointment is [redacted] and is contingent upon my passing a physical examination.

Corollary to receiving this appointment, I must submit my resignation as a [redacted] and [redacted] with the City of Conneaut Police Department also effective [redacted]. Should I encounter any unforseen problems with the physical for Ashtabula I would request the right to rescind this resignation.

I apologize for the relatively short notice, but I was only today made aware of the effective date of the appointment. I have enjoyed my service with the Conneaut Police Department and intend to continue in my role with the city as a member of Conneaut [redacted]

Very truly yours,

[redacted]

RECEIVED
JUL - 1 1999
CITY MANAGER'S OFFICE

RECEIVED
JUL 01 1999

Patricia Beckwith

From: Chuck Burlingham <cburlingham@conneautpd.com>
Sent: Monday, April 15, 2013 7:29 AM
To: Pat Beckwith
Subject: [redacted]

Pat,
I need to know the dates [redacted] worked for the city of Conneaut to include:

When he was a [redacted]

The [redacted] section should be [redacted]

Chuck

[redacted]

Conneaut Police Department
294 Main St. Conneaut, Ohio 44030 440-593-7440

FAX

To: Ohio Peace Officer Training Commission	**From: Acting Chief Burlingham**
Fax: 740-845-2675	**Pages: 2**
Phone: 800-346-7682	**Date: June 16, 2011**
Re: Termination Notice	**cc:**

☐ **Urgent** ☐ **For Review** ☐ **Please Reply** ☐ **Please Comment**

To follow is the Notice of Termination- SF401adm for [redacted]

I am also mailing A copy

MIKE DEWINE
* OHIO ATTORNEY GENERAL *

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

P.O. Box 309
London, OH 43140
www.OhioAttorneyGeneral.gov

NOTICE OF PEACE OFFICER TERMINATION

Complete all blanks. Type or Print Legibly. Enter N/A if not applicable.
Please Email (SF400@ohioattorneygeneral.gov), Fax, or Mail this document within ten days of the termination.

OFFICER INFORMATION

1. Name (Last)	(First)	(Middle)	2. Social Security Number
[redacted]	[redacted]	[redacted]	[redacted]

3. Alias (Last)	(First)	(Middle)

4. Birth date (mm/dd/yyyy)	5. Email Address
[redacted]	

6. Home Mailing Address (#/Street/PO Box)	(City)	(State)	(Zip Code)	(County Name)
[redacted]	Conneaut	Ohio	[redacted]	

AGENCY INFORMATION

7. Agency Name	
Conneaut Police Department	

8. Agency Email Address	9. Agency Phone Number
conneautpd@suite224.net	440-593-7440

10. Agency Mailing Address (#/Street/PO Box)	(City)	(State)	(Zip Code)	(County Name)
294 Main St	Conneaut	Ohio	44030	Ashtabula

TERMINATION INFORMATION

11. Appointment Date (mm/dd/yyyy)	12. Termination Date (mm/dd/yyyy)
[redacted]	

13. Reason for Termination (check appropriate box)

☑ Resigned ☐ Discharged ☐ Retired ☐ Deceased ☐ Other

☐ Felony Conviction (please explain below) ☐ Misdemeanor plea with Agreement to Surrender Certificate (please explain below)

ATTESTATION OF LAW ENFORCEMENT AGENCY ADMINISTRATOR

I attest that the information provided on this form is true and correct and is based on my personal knowledge or inquiry.

14. Signature of Law Enforcement Agency Administrator	15. Name and Title	16. Date
[signature]	Charles Burlingham, Acting Chief of Police	06/16/2011

Print Form

RICHARD CORDRAY
OHIO ATTORNEY GENERAL

NOTICE OF PEACE OFFICER APPOINTMENT

Complete all blanks. Type or Print Legibly. Enter N/A if not applicable. Complete both pages one and two for a new appointment. Complete only page one for a status change. Email, Fax or Mail this document within ten days of the appointment or status change. For Correction to Record information, enter correct information on this form and send a letter of explanation surrounding the changes.

OFFICER INFORMATION

1. Name (Last) [redacted] (First) (Middle)
2. Social Security Number [redacted]
3. Alias (Last) (First) (Middle)
4. Birth date (mm/dd/yyyy) [redacted]
5. Email Address
6. Home Mailing Address (#/Street/PO Box) [redacted] (City) CONNEAUT (State) OH (Zip Code) [redacted] (County Name)
7. Basic Training Academy (Academy Name) (Academy Number) (D[redacted]
(Only complete if this is the officer's first appointment)

AGENCY INFORMATION

8. Agency Name CONNEAUT POLICE DEPT.
9. Agency Email Address conneautpd@suite224.net
10. Agency Phone Number 440-593-7440
11. Agency Mailing Address (#/Street/PO Box) 294 MAIN ST. (City) CONNEAUT (Zip Code) 44030 (County Name) ASHTABULA

APPOINTMENT INFORMATION (check the appropriate boxes)

12. [X] New Appointment [ ] Status Change
13. Appointment Date [redacted]
14. Select New Status
[X] Full-Time [ ] Part-Time [ ] Auxiliary [ ] Reserve [ ] Special [ ] Seasonal

[X] City/Municipality Full-Time/Part-Time (737.02) [ ] City/Municipality Auxiliary/Reserve/Special 737.051)
[ ] Sheriff (311) [ ] Deputy Sheriff (311.04) [ ] Township Police Officer (505.49) [ ] Township Constable (509.01)
[ ] Village Chief (737.15) [ ] Village Full-Time/Part-Time/Special (737.16) [ ] Village Auxiliary/Reserve (737.161)
[ ] Other (Indicate the correct ORC/Charter Number _____

ATTESTATION OF LAW ENFORCEMENT AGENCY ADMINISTRATOR

I attest that the information provided on this form is true and correct and is based on my personal knowledge or inquiry.

15. Signature of Law Enforcement Agency Administrator
16. Name and Title JON J. ARCARO, CHIEF OF POLICE
17. Date 08-30-2010

NOTARY
Sworn to and subscribed before me this 30th day of AUGUST, 20 10 in the county of ASHTABULA, Ohio.
_____ My commission expires 5-2-11.
Signature of Notary
Affix Seal Here

SF400adm Revised 08/05/2009

P.O. Box 309 London, Ohio 43140
Phone: (740) 845-2700/ (800) 346-7682
Fax: (740) 845-2675
Email:sf400@ohioattorneygeneral.gov

Officer Name (Last) (First) (Middle) Social Security Number

[redacted]

19. 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.

[redacted]
Signature of Appointing Authority

08-30-2010
Date

ROBERT SHAUMLEFFEL
Name of Appointing Authority and Title (Typed OR Printed Legibly)

08-30-2010
Date

OHIO PEACE OFFICER APPOINTMENT HISTORY

All appointments must be listed. Use additional pages if needed to complete the entire work history.

20. Appointed By (Agency Name and County): CONNEAUT Police Ashtabula County

22. Appointment Status (Check Appropriate Box)
☒ Full-Time ☐ Part-Time ☐ Auxiliary ☐ R

23. Appointed By (Agency Name and County): Ashtabula County S.O.

25. Appointment Status (Check Appropriate Box)
☒ Full-Time ☐ Part-Time ☐ Auxiliary ☐ R

26. Appointed By (Agency Name and County): Ashtabula Police Ashtabula County

28. Appointment Status (Check Appropriate Box)
☐ Full-Time ☐ Part-Time ☐ Auxiliary ☐ R

29. Appointed By (Agency Name and County): CONNEAUT Police Ashtabula County

31. Appointment Status (Check Appropriate Box)
☐ Full-Time ☐ Part-Time ☒ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

32. Appointed By (Agency Name and County):

33. From(mm/dd/yyyy): To(mm/dd/yyyy):

34. Appointment Status (Check Appropriate Box)
☐ Full-Time ☐ Part-Time ☐ Auxiliary ☐ Reserve ☐ Special ☐ Seasonal

P.O. Box 309 London, Ohio 43140
Phone: (740) 845-2700/ (800) 346-7682
Fax: (740) 845-2675
sf400@ohioattorneygeneral.gov

Ashtabula County Sheriff's Office

William R. Johnson, Sheriff
25 West Jefferson St. Jefferson Ohio 44047
Non-Emergency 440-576-9046 Fax: 440-576-3573

Criminal Investigations Division
[redacted] [redacted]

9/22/2009

WORK EXPERIENCE

City of Conneaut Fire Department
[redacted]

- [redacted]
- Conducted numerous in service and State training classes for EMS, Fire Operations and Technical Rescue as a training officer
- Responded to and provided patient care on over 2000 Emergency Medical Service calls
- Arson Investigator
- Responded to and assisted in over 100 technical, collapse, high angle, or water rescues
- Responded to and conducted operations on over 150 structure fires
- Conducted logistical and contingency planning and pre-planning for natural disasters, fire department operations, and homeland security scenarios
- Conducted numerous safety classes on fire prevention to the public
- Helped research, create and implement CFD response plan for Water Supply and Hydrant Operations

City of Conneaut Police Department
[redacted]

- Conducted facility and inmate security operations in a State of Ohio Certified five day holding facility
- Conducted Fire and EMS dispatching operations for two political subdivisions
- Conducted Police dispatching operations for two municipalities
- Conducted road patrol duties under direction of a field training officer
- Conducted National Crime Information Center and Ohio Law Enforcement Automated Data System entries and queries for two municipalities
- Conducted Enhanced 911, and Computer Aided Dispatch Operations for two municipalities

City of Ashtabula Police Department

[redacted]

- Lead Alcohol Detection Apprehension and Prosecution (ADAP/OVI) instructor
- Lead Narcotics Detective. Responsible for undercover narcotics purchases, development handling of confidential informants and the investigation and prosecution of street level drug cases
- Wrote and executed over 30 search warrants
- Conducted investigations into and oversaw processing of over 5 methamphetamines laboratories
- Ohio Organized Crime Task Force member, responsible for the investigation of complex multi jurisdictional criminal organizations, specializing in gambling and narcotics organizations. Responsible for the investigation and prosecution of State RICO Conspiracy and Gang cases.
- Major Crimes detective. Conducted investigations into five homicides, multiple rapes, numerous felony assaults and other various felony cases
- Responsible for the development, implementation and funding formula for the enhanced police communications system
- Assisted in developing and implementing the Computer Aided Dispatching and records system
- Conducted extensive police patrol operations including traffic enforcement and crash investigation, felony and misdemeanor case investigation, extensive courtroom testimony, OVI enforcement and narcotics interdiction
- Responsible for developing and implementing APD Narcotics Operating Procedures involving Operational Plans, Confidential Informants and Undercover Drug Purchases
- Gave testimony to the Ashtabula City Counsel and Safety Committee regarding communications requirements
- Ashtabula City Police representative to the Ashtabula County Homeland Security Committee

[redacted]

- [redacted]

Ashtabula County Sheriff's Office

[redacted]

- Conducted extensive police patrol operations including traffic enforcement and crash investigation, felony and misdemeanor case investigation, courtroom testimony, and OVI enforcement
- Conducted extensive interdiction operations resulting in significant cash and narcotics seizures, as well as multiple felony arrests and convictions
- Conducted investigations into over 7 methamphetamines laboratories
- Ashtabula County Special Weapons and Tactics team member since 2000, entry team member and sniper.
- Conducted over 50 SWAT operations to include high risk warrant service, barricaded individuals, hostage situations and active shooters
- Assigned to Detective division. Responsible for conducting complex felony investigations, homicide investigations, narcotics investigations and crime scene processing.

Instructor Positions

- National Highway Traffic Safety Administration ADAP (OVI) instructor
- Tactical Element Combat Life Saver Instructor
- United States Marine Corps Tactical Combat Casualty Care instructor
- Ohio Department of Public Safety Special Topics EMS instructor
- Ashtabula County SWAT team Response to Active Shooter Instructor

Education

Associate of Applied Science. Criminal Justice Law Enforcement
Lakeland Community College
[redacted]

Batchelor of Science. Justice Studies
Kent State University
[redacted]

Awards

Battalion Chief's Award
Conneaut Fire Department
Re: Meritorious Service
[redacted]

Hard Charger Award
Conneaut Fire Department
Re: Superior Service
[redacted]

Assistant Battalion Chief's Award
Conneaut Fire Department
Re: Outstanding Achievement
[redacted]

Hard Charger Award
Conneaut Fire Department
Re: Superior Service
[redacted]

Hard Charger Award
Conneaut Fire Department
Re: Superior Service
[redacted]

Letter of Commendation
Conneaut Police Department
Re: Active Shooter
[redacted]

Letter of Commendation
Conneaut Fire Department
Re: Superior Service Squad Nights
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: Attempted Suicide
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: Violent Fugitive
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Clar[redacted] Drug Trafficking
[redacted]

Letter of Appreciation
Ashtabula County Head Start
Re: Class Instruction
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: [redacted]rug Operation
[redacted]

Letter of Commendation
Ashtabula Police Department
Re: [redacted] Drug Arrest
[redacted]

Kent State University
Deans List
[redacted]

Assistant Battalion Chief's Award
Conneaut Fire Department
Re: Valor while performing a rescue
[redacted]

Letter of Appreciation
Conneaut Police Department
Re: DUI Demonstration
[redacted]

Letter of Appreciation
Ashtabula City Fire Department
Re: Meth Lab
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Combs [redacted] Aggravated Robbery
[redacted]

Special Proclamation
Ohio House of Representatives
Re: Meritorious Police Service
[redacted]

Officer of the Year
Ashtabula Police Department
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Charles Newman [redacted] Quadruple Homicide
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Alan Welker et al [redacted] Multi-jurisdictional Marijuana Trafficking
[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Ross [redacted] Homicide
[redacted]

[redacted]

Letter of Appreciation
Ashtabula County Prosecutor's Office
Re: State v. Richard Corpening et a[redacted] Homicide
[redacted]

Graduate Cum Laude
Kent State University
B.A. Justice Studies
[redacted]

Special Proclamation
City of Ashtabula
Re: Meritorious Service
[redacted]

Battalion Chief's Award
Conneaut Fire Department
Re: Meritorious Service
[redacted]

[redacted]

Letter of Appreciation
Trumbull Ashtabula Geauga County Drug Taskforce
Re: International Marijuana Trafficking case
[redacted]

Certificate of Appreciation
Ashtabula County Safe Communities
Re: Outstanding Traffic Safety Enforcement
[redacted]

Letter of Appreciation
Ashtabula County Sheriff's Office
Re: Multi-Agency Criminal Interdiction for Conneaut City
[redacted]

Letter of Commendation
Ashtabula County Sheriff's Office
Re: State v. Dioneff Marijuana Trafficking
[redacted]

Letter of Appreciation
Ashtabula County Joint Vocational School
Re: Instructional Assistance Reality Day
[redacted]

Letter of Commendation
Ashtabula County Sheriff's Office
Re: Steven Anzells Officer involved shooting
[redacted]

Certificated Police Courses Completed by [redacted]

Communications Ashtabula County Emergency Medical Services Advisory Council. February 1994

Stress Management Ashtabula County Emergency Medical Services Advisory Council. March 1994

Sensitivity Awareness Ashtabula County Emergency Medical Services Advisory Council. March 1994

Disaster/Mass Casualty Ashtabula County Emergency Medical Services Advisory Council. April 1994

Alcohol and Drug Emergencies Ashtabula County Emergency Medical Services Advisory Council. January 1995

Hazardous Materials Awareness Ohio Fire Academy. March 1995

Radiation Emergencies Conneaut Rescue Squad. August 1996

Domestic Violence EMS Issues Conneaut Rescue Squad. August 1996

Law Enforcement Automated Data System Operator Ohio LEADS Steering Committee. October 1996

Perry Nuclear Power Plant Procedures Conneaut Rescue Squad. September 1996

Certified Jailer- 5 Day Facility SACS Training Academy. November 1996

Responding to 911 TDD Calls Ashtabula County 911 Commission. March 1997

Bombs and Bombings Federal Bureau of Investigation. March 1997

[redacted]

Law Enforcement Dispatching Power Phone. July 1997

Defensive Driving Ashtabula County Basic Academy. July 1997

Basic Telecommunicator Association of Public Safety Communications Officials. October 1997

Lawsuits Against Police, Fire and EMS Law Advisory Group. January 1998

Nationally Registered Paramedic Brown Memorial Hospital. January 1998

Crime Scene First Responder Powerphone. May 1998

Investigation of Appliance Fires Fire Findings. May 1998

Ohio Basic Peace Officer's Training Ashtabula County Basic Academy [redacted]

Rail Transportation of Hazardous Materials Norfolk and Southern Railroad. October 1998

Bombs, Bomb Threats and Booby Traps Explosive Device Technologies. August 1999

Street Sense University Hospitals Brown Memorial. September 1999

Shaken Baby Syndrome Pennsylvania Medical Society. October 1999

Managing Hanging or Strangulation Injuries NY College for Trauma and Emergency Care. October 1999

Drowning Homicide Investigations Lifeguard Systems. February 2000

Alcohol Detection and Prosecution Ohio Peace Officer's Training Academy June 2000

Bulletproof Mind Lt. Col. Dave Grossman, Ohio Peace Officer's Training Academy. January 2001

Psychological Disorders Journal of Emergency Medicine. January 2001

Spanish for Law Enforcement Ohio Peace Officer's Training Academy. February 2001

WMD Domestic Preparedness City of Conneaut Fire Department. May 2001

WMD First Responder City of Conneaut Fire Department. May 2001

ADAP Instructor Ohio Peace Officer's Training Academy. June 2001

RAVE Drug Seminar Great Lakes International Gang Investigators. August 2001

Basic Fire Investigation Ohio State Fire Marshal. October 2001

School Shooting First Responder HSS International. July 2002

Basic SWAT Tactical Defense Training. October 2002

Response to Active Shooter Jefferson Police Department. October 2003

BAC Datamaster Senior Operator Ohio Department of Health. November 2004

Highway Interdiction Training Ohio Highway Patrol. June 1997

Basic Sniper Ohio Department of Public Safety, Ohio Highway Patrol. August 2007

Courtroom Testimony Multijurisdictional Counterdrug Taskforce Training. August 2007

National Incident Management System Federal Emergency Management Agency August 2007

Elder Abuse Kent State University. September 2007

Blood Stain Pattern Analysis Ohio Peace Officer's Training Academy. October 2007

Weapon Retention Alliance Training Group. November 2007

Search Warrants, Laws of Arrest and Search and Seizure Ohio Peace Officer's Training Academy. November 2007

Identifying Armed Persons and Investigating Gun Crimes Bureau of Alcohol Tobacco and Firearms. March 2008

Basic Photography Ohio Peace Officers Training Academy. April 2008

Crime Scene Photography Ohio Peace Officer's Training Academy, June 2008

Outlaw Motorcycle Gang Overview Bureau of Alcohol Tobacco and Firearms October 2008

ADAP Instructor Update Ohio Peace Officer's Training Academy, January 2009

Introduction to Conspiracy Investigations Multijurisdictional Counterdrug Task Force May 2009

Sniper Observer School Federal Bureau of Investigation, May 2009

Interviews and Body Language Ohio Peace Officer's Training Academy, April 2010

Advanced Sniper School Federal Bureau of Investigation, May 2010

Senate Bill 77 Update Ohio Peace Officer's Training Academy, August 2010

Subject: training
From: "Sgt. Jim Kemmerle" <jkemmerle@ashtabulacountysheriff.org>
Date: Mon, 21 May 2007 16:32:31 -0400
To: <rrfenton@ashtabulacountysheriff.org>
CC: <jkemmerle@ashtabulacountysheriff.org>

Chief,

On May 13th, we had 15 minutes of training on K-9 usage. The training included instances in which a K-9 can be used, a deputy's role in securing the scene, and a deputy's role as a back-up officer during K-9 usage. Those who received this training are as follows:

Kemmerle
Siebeneck
Stout
Daniels
[redacted]
Bertolasio

Would you add these to the training log in the computer?

J. Kemmerle

12052

STATE OF OHIO
ATTORNEY GENERAL'S OFFICE

June 23, 2008

Sheriff William Johnson
Ashtabula County Sheriff's Office
25 West Jefferson Street
Jefferson, OH 44047

Re: Break in service update training evaluation for [redacted]

Dear Sheriff Johnson:

The purpose of this letter is two-fold: First, this letter shall serve to acknowledge receipt of a "Notice of Peace Officer Appointment/Termination" (OPOTC SF400adm) form, whereby you reported an appointment, status change, or record correction for the above-referenced officer pursuant to R.C. § 109.761. Second, this letter shall serve as notice that pursuant to O.A.C. 109:2-1-12, **no break in service update training is required.**

The Commission provides break in service update training determinations as a service to Ohio's peace officers and the agencies they serve. This determination is based solely upon the appointment/termination information reported to the Commission, and does not relieve the officer or the appointing authority of any obligation to comply with the reporting requirements of R.C. § 109.761 or the break in service update training requirements of O.A.C. 109:2-1-12. If you believe this determination has been made in error, we will be happy to work with you to identify the documents necessary to correct our records. Please note that this determination should not be construed to relieve the above-referenced officer of the annual in-service firearms re-qualification requirements of R.C. § 109.801. Should you have questions or concerns regarding this determination, please feel free to contact me at the numbers provided below.

Sincerely,

Sarah D. Thomas

Sarah Thomas
Certification Officer
Certification & Standards Division

cc: OPOTC Officer File
SJT/vf

Ohio Peace Officer Training Academy

P.O. Box 309
London, OH 43140
Telephone: (740) 845-2700
(800) 346-7682
Facsimile: (740) 845-2675

An Internationally Accredited
Law Enforcement Training Academy

4055 Highlander Pkwy., Ste. B
Richfield, OH 44286
Telephone: (888) 436-7282
(330) 659-2311
Facsimile: (330) 659-2401

184th

Captain Pasquale F. DiAngelo

Division of Police

October 27, 1999

TO: Ptlm. Aaron Greenberg
[redacted]

RE: [redacted]
Wanted Person

Gentlemen;

I reviewed the above-cited incident report. You exhibited the traits of aggressive, conscientious police officers, thus preventing a potentially dangerous situation from occurring.

Your actions and performance are commendable, reflecting positively on the Ashtabula City Police Department. Keep up the good work.

Very truly yours,

P.F. DiAngelo, Captain
Operations Commander

(216) 998-2221 • Fax: (216) 998-4523

CITY OF ASHTABULA

OFFICE OF THE POLICE CHIEF

110 WEST 44TH STREET
ASHTABULA, OHIO 44004-6915

(440) 992-712
(440) 998-114
FAX (440) 998-452

DAVID M. COLUCCI
CHIEF OF POLICE

To: [redacted]

Re: *Letter of Commendation*
Attempted Suicide [redacted]

Date: August 23, 1999

I extend a commendation to you for the fine job that you did concerning Cheryl Dombroski. You were able to keep her from jumping off the bridge at Lake Avenue & West 19th, due to being calm and showing great poise in the handling of this situation. Keep up the good work. As you know, our primary job is to protect life.

Sincerely,

David M Colucci
Chief of Police

CC: File

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
KATHERINE S. RIEDEL
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN F. THOMAS
TAMARA A. WETHERHOLT

TELEPHONE
(440) 576-3662
FACSIMILE
(440) 576-3692
TAX UNIT
(440)576-3734
VICTIMS/WITNESS ASSISTANCE
GLEN V. OSBURN
(440) 576-3523

January 24, 2000

Ashtabula Police Department
Chief David Colucci
110 West 44th Street
Ashtabula, OH 44004

RE: State of Ohio vs. Terance Lamont Clark: Case No. [redacted]
Ashtabula County Court of Common Pleas

Dear Chief Colucci:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically [redacted] for their efforts during the prosecution of Terance Lamont Clark in the above referenced case. Ptl. Cleveland's thorough investigation greatly assisted this office in bringing the appropriate conclusion to this case. The defendant was found guilty by a jury of Trafficking in Cocaine, with sentencing at a later date.

I look forward to a continuing relationship of mutual cooperation with your department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

TLS/pas

cc: [redacted]

CITY OF ASHTABULA

OFFICE OF THE POLICE CHIEF

110 WEST 44TH STREET
ASHTABULA, OHIO 44004-6915

(440) 992-7125
(440) 992-7172
FAX (440) 998-4523

DAVID M. COLUCCI
CHIEF OF POLICE

To: Captain Varckette
Captain DiAngelo
Det. Ptlm. Pouska
Det. Ptlm. Altonen
Det. Ptlm. Oatman
Aux. Ptlm. Collins
[redacted]
Ptlm. Greenberg
Ptlm. Janek
Ptlm. Koski
Ptlm. Tulino
Aux. Ptlm. Perry

Re: Drug Operation [redacted] 9/20/00

Date: 9/27/00

Our drug problem, like in many communities, takes not only and individual effort in combating, but collective initiatives are important for safety reasons and hopefully sends a message. The drug problem will never be completely driven out but continued efforts such as this operation have to be done from time to time, when sufficient information is available. Cooperative efforts amongst all of you is what makes it all worth while. Teamwork, initiative and volunteering to help do this type of operation is so important today. It is easy to complain about the problem or say it is someone else's problem and turn your head. Keep up the good work no matter if some feels we are not trying to make a difference. Thank you.

Sincerely,

David M Colucci
Chief of Police

CITY OF ASHTABULA

OFFICE OF THE POLICE CHIEF

110 WEST 44TH STREET
ASHTABULA, OHIO 44004-6915

(440) 992-7125
(440) 992-7172
FAX (440) 998-4523

DAVID M. COLUCCI
CHIEF OF POLICE

To: [redacted]

Re: West 43 rd Street & West Avenue
[redacted]

Date: 10/20/00

[redacted]

Early this morning, while on patrol, you took the time to check out a couple individuals which resulted in a foot chase and subsequent arrest on an individual for drug related charges and resisting arrest. It is comforting for both the public and this city to know that officers are being observant and diligent in their duties. Thank you for taking your duties seriously.

David M Colucci
Chief of Police

cc: Operations

ASHTABULA FIRE DEPARTMENT

Chief Rick Balog

Station One ♦ 4326 Main Avenue ♦ Ashtabula, OH 44004 ♦ USA
Office (440)992-7192 ♦ Fax (440)992-2691 ♦ Chiefs (440)992-7190 ♦ Email rickb@aimanagers.com

June 28, 2001

Acting Police Chief Phil Varckette
City Hall Annex
Ashtabula, Ohio 44004

Phil,

I would like to take this opportunity to express my appreciation to several of your departments officers, particularly Detective Pouska and [redacted] Their response to the alarm at 5601 Adams Avenue in the early morning of June 23rd; and subsequent interactions with fire personnel was exemplary.

Because of the excellent cooperation between your officers and the fire department, a very dangerous crime scene was abated. No one was injured, and the responsible person(s) were taken into custody.

Law enforcement and firefighting, as you are aware, are dangerous jobs but also very different jobs. It was rewarding for me to observe the professionalism displayed by both services. I am sure this did not go unnoticed by the other responding agencies (DEA, EPA, BCI).

Thank you.

Yours' in Safety,

Rick Balog

cc: city manager

ROCCO N. RUSSO
CHIEF OF POLICE

JON J. ARCARO
DEPUTY CHIEF OF POLICE



A Resort A

294 Main Street
Conneaut, Ohio 4403
Telephone (440) 593-74
Fax (440) 593-6966

May 30, 2001

To: [redacted] **Lt. Lonnie Hutchens, FF. Kirk Hutchens, FF. Bob Dibell, FF. Andy Specht, FF. Jeremy Young, FF. Mark Powers, FF. Sondra Smith**

From: **Deputy Chief Arcaro**

Re: **Mock D.U.I. Crash Demonstration**

I would like to take this opportunity to thank you for participating in the mock D.U.I. crash demonstration at Conneaut High School.

Your professionalism and skill was evident and appreciated by those that attended the demonstration. I'm sure that you made an impact on many of the students that attended.

Again, fine job and keep up the good work.

c.
Batt. Chief Gildone
City Manager
file

NORTHWEST AMBULANCE DISTRICT

Serving AUSTINBURG TOWNSHIP, HARPERSFIELD TOWNSHIP, GENEVA CITY AND TOWNSI

1324 HARPERSFIELD ROAD
GENEVA, OHIO 44041

FAX
(440) 466-9469

TELEPHONE
(440) 466-49

February 10, 2001

Conneaut Station No. Three
392 Furance Rd.
Conneaut, Ohio 44030

Attn: Jon Arcaro, [redacted] and Jeremy Young

Dear Jon, [redacted], and Jeremy,

We want to thank you for your prompt and professional response with Conneaut Station No. Three's airboat to our call for mutual aid for a river rescue on the Grand River today.

Without your airboat and your expertise, the rescue would have been infinitely more dangerous and potentially life-threatening for both victims and rescuers alike. Believe us, we both gave a collective sigh of relief when our dispatcher radioed that you were enroute.

We are lucky indeed to have such a rescue craft with a well trained crew available in Ashtabula County to respond to emergency water rescues. We surely appreciate it and we hope the city of Conneaut and its citizens realize how lucky they are to have such dedicated and talented people in their community.

The three men that were stranded soaking wet, freezing cold and definitely suffering from exposure on that island in the the middle of the racing, icy cold Grand River, we're sure, will never forget you. All three men were doing well after getting dry and warm and extremely grateful, if not albeit, a tad embarassed.

Thanks again,

Sandy Lehman, EMT-P Tim Parks, EMT-P
C Shift Duty Crew

cc: Vincent T. Gildone, Asst. Chief, Conneaut Fire Dept. Stati
Bim Orrenmaa, Fire Chief, Conneaut Fire Dept.
Robert Herron, Conneaut City City Manager

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
ROGER S. KRAMER
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN R. THOMAS
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440) 576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
GLEN V. OSBURN
(440)576-3523
CYNTHIA VANALLEN
(440)576-3223

February 8, 2002

Chief David Colucci
Ashtabula City Police Department
110 W. 44th Street
Ashtabula, OH 44004

RE: State of Ohio vs. Charles Newman, Sr.
Ashtabula County Court of Common Pleas Case No [redacted]

Dear Chief Colucci:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically Captain Philip Varckette, Sergeant Jeffrey Bradley, Detective James Oatman, Detective Robert Pouska, Detective Alan Altonen and [redacted] for their efforts during the prosecution of Charles Newman, Sr. in the above referenced case. Their thorough investigation and outstanding efforts throughout the pendency of the case, greatly assisted this office in bringing an appropriate conclusion to this case. The defendant plead guilty to four counts of aggravated murder and four counts aggravated arson and was sentenced to life in prison without the possibility of parole for 80 years.

I look forward to a continuing relationship of mutual cooperation with your department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

TLS/vjc
cc: Captain Philip Varckette
Sergeant Jeffrey Bradley
Detective James Oatman
Detective Robert Pouska
Detective Alan Altonen
[redacted]

PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
ROGER S. KRAMER
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN R. THOMAS
JASON M. TOTH
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440)576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
CYNTHIA VANALLEN
(440)576-3223
GLEN V. OSBURN
(440)576-3523

August 12, 2002

Chief David Colucci
Ashtabula City Police Department
110 West 44th Street
Ashtabula, Ohio 44004-6915

RE: State of Ohio vs. Christopher P. Combs
Ashtabula County Court of Common Pleas Court No [redacted]

Dear Chief Colucci:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically Capt. Phillip Varkette, Ptlm. Aaron Greenberg, [redacted] Det. Robert Pouska, Ptlm. James Rantamaki, Det. Alan Altonen and Ptlm. David O. Clemens for their efforts during the prosecution of Christopher Combs in the above referenced case. Their hard work and thorough investigation greatly assisted this office in bringing the appropriate conclusion to this case. The defendant was convicted of Aggravated Robbery, Receiving Stolen Property and Failure to Comply With a Signal of a Police Officer. Although we requested eleven years, the Defendant did receive a total of six years in prison.

I look forward to a continuing relationship of mutual cooperation with your department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

TLS/pas

cc: Capt. Phillip Varkette
Det. Robert Pouska
Ptlm. Aaron Greenberg
[redacted]
Ptlm. David O. Clemens
Ptlm. James Rantamaki
Det. Alan Altonen

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
BRENDA S. KAMINSKY
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
JASON M. TOTH
TAMARA A. WETHERHOLT
JOHN N. ZOMOIDA, JR.

TELEPHONE
(440)576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLATE)
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANCE
CYNTHIA VANALLEN
(440)576-3223
BONNIE ELLIOTT
(440)576-3523

July 18, 2003

Chief Phillip Varckette
Ashtabula Police Department
110 West 44th Street
Ashtabula, Ohio 44004

RE: State of Ohio vs. Joseph Ross
Ashtabula County Court of Common Pleas Case No. [redacted]

Dear Chief Varckette:

I would like to take this opportunity to extend my appreciation to you as well as to a number of employees of your Department, specifically [redacted] Det. Joe Cellitti, Det. Allen Altonen, Det. Robert Pouska, Det.James Oatman, Det. Sean Ward, Ptlm. Chad Brown, Ptlm. James Rantamaki, Ptlm. Adam Simons, Ptlm. William Parkomaki, Ptlm. Thomas Perry, Captain DiAngelo, and Sgt. Gerald Cornelius, for their efforts during the investigation and prosecution of this case. (Please apologize to anyone whose name I omitted.) Obviously this was a team effort and you should be very proud of all of the members of your department. As you know the defendant was convicted of two counts of murder and was sentenced on July 18, 2003 to a mandatory prison term of 15 years to life.

As always, we appreciate, the professional relationship we have with you and your entire department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

Ariana E. Tarighati
Chief Assistant Prosecutor

Teri L. Burnside
Assistant Prosecutor

AET/am

cc: [redacted] Det. Joe Cellitti, Det. Allen Altonen, Det, Robert Pouska, Det James Oatman, Det. Sean Ward, Ptlm. Chad Brown, Ptlm. James Rantamaki, Ptlm. Adam Simons, Ptlm. William Parkomaki, Ptlm. Thomas Perry, Captain DiAngelo and Sgt. Gerald Cornelius

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
HOLLY J. GRANT
ROBERT L. HERMAN
ROGER S. KRAMER
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
SUSAN R. THOMAS
JASON M. TOTH
TAMARA A. WETHERHOLT
JOHN N. ZOMBIDA, JR.

TELEPHONE
(440)576-3662
FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3600 (CIVIL/APPELLAT
TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANC
CYNTHIA VANALLEN
(440)576-3223
BONNIE ELLIOTT
(440)576-3523

May 8, 2003

Chief Philip Varkette
Ashtabula Police Department
110 West 44th Street
Ashtabula, Ohio 44004

RE: State of Ohio vs. Jeffery Westfall
Ashtabula County Court of Common Pleas Case No. [redacted]

State of Ohio vs. William Westfall
Ashtabula County Court of Common Pleas Case No. [redacted]

State of Ohio vs. Allan Welker
Ashtabula County Court of Common Pleas Case No [redacted]

State of Ohio vs. William Rogers
Ashtabula County Court of Common Pleas Case No [redacted]

Dear Chief Varkette:

I would like to take this opportunity to extend my appreciation to an employee of your Department, specifically [redacted] for his efforts during the prosecution of Jeffrey Westfall, William Westfall, Allen Welker and William Rogers in the above referenced cases. His thorough investigation greatly assisted this office in bringing the appropriate conclusion to this case. The Westfalls and Welker pled guilty to Possession of Marijuana and Conspiracy to Commit Felony Drug Trafficking and, where applicable, agreed to forfeiture of property. William Rogers is scheduled to plead guilty on May 12, 2003 to the same charges.

A sentencing hearing will be scheduled by the court at a later date following the completion of pre-sentence investigations

As always, this office appreciates the professional relationship we have with your entire Department

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

Ariana E. Tarighati
Chief Assistant Prosecutor

AET/am

cc: [redacted]

THOMAS L. SARTINI
PROSECUTING ATTORNEY
ASHTABULA COUNTY COURTHOUSE
25 WEST JEFFERSON STREET
JEFFERSON, OHIO 44047-1092

TELEPHONE
(440)576-3662

FACSIMILE
(440) 576-3692 (CRIMINAL)
(440) 576-3608 (CIVIL/APPELLAT

TAX UNIT
(440) 576-3734
VICTIMS/WITNESS ASSISTANC
CYNTHIA VANALLEN
(440)576-3223
BONNIE ELLIOTT
(440)576-3523

ARIANA E. TARIGHATI
CHIEF ASSISTANT

REBECCA K. BLECKERT
TERI L. BURNSIDE
DAVID F. FOSTER
CATHERINE R. COLGAN
HOLLY J. GRANT
ROBERT L. HERMAN
BRENDA S. KAMINSKY
NORA M. MASTERSON
ANGELA M. SCOTT
HAROLD E. SPECHT, JR.
JASON M. TOTH
TAMARA A. WETHERHOLT

October 15, 2003

Chief Raymond Mattson
Ashtabula Police Department
110 West 44th Street
Ashtabula, Ohio 44004

RE: State of Ohio vs. Richard Corpening, et al.
Ashtabula County Court of Common Pleas Case No. [redacted] Kenneth Curry [redacted]
[redacted] Bryant Mendenhall [redacted] Marcus Colbert [redacted]

Dear Chief Mattson:

I would like to take this opportunity to extend my appreciation to employees of your Department, specifically [redacted] Det. Sean Ward, Det. Joe Cellitti, Det. Alan Altonen, Sgt. James Oatman and Capt. Phillip Varckette for their efforts during the prosecution of Richard Corpening, et al., in the above referenced cases. Their thorough investigation greatly assisted this office in bringing the appropriate conclusion to these cases. Richard Corpening pled guilty to Murder with a Gun Specification and received a sentence of (18) eighteen years to life in prison. The defendants, Bryant Mendenhall, Kenneth Curry and Marcus Colbert each plead guilty to complicity to Manslaughter and Participating in Gang Activity charges, each receiving a (10) ten year sentence in prison.

As always, my office appreciates the professional relationship we have with your entire Department.

Sincerely,

THOMAS L. SARTINI,
PROSECUTING ATTORNEY

Ariana E. Tarighati,
Chief Assistant Prosecutor

TLS/ah

cc: [redacted]
Det. Sean Ward
Det. Joe Cellitti
Det. Alan Altonen
Sgt. James Oatman
Capt. Phillip Varckette

William R. Johnson
Sheriff

Ashtabula County Sheriff's Department

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047

Non Emergency (440) 576-904
Emergency 91
FAX (440) 576-591

10/02/07

Letter of Appreciation

Sgt. Jim Kemmerle
Deputy Tony Mino
Deputy Mike Roach
[redacted]
Detective Bryan Rose

On September 27th and 28th, 2007 you participated in a joint Criminal Patrol Operation with the Conneaut Police Department and the Ohio State Patrol in Conneaut. Through your efforts the operation was a complete success and resulted in numerous arrests. Your professionalism and dedication to duty during this detail reflects highly on not only your personal abilities but on the Ashtabula County Sheriff's Office as a whole and for this your efforts are appreciated.

Lt. G.B. Leonhard
Uniform Division Commander
Ashtabula County Sheriff's Office

Cc
File
Kemmerle
Mino
Roach
[redacted]
Rose

Ashtabula County Sheriff's Office

William R. Johnson, Sheriff

Inter – Office Memo

12 09 07

To: [redacted]

From: Sgt. Kemmerle

Re: [redacted]

Letter of Commendation

[redacted]

On December 2nd, 2007, you assisted with an assault complaint on Dunbar Ave. in Saybrook Twp. You located and arrested the assailant and, during and interview with him, you gathered information on an indoor marijuana growing operation at the victim's garage. A search warrant was obtained for a safe, in which a large quantity of marijuana was discovered. Additional information gathered during the investigation led to your discovery of another indoor marijuana growing operation in Ashtabula City. In total, over 5,000 grams of marijuana and a vehicle was seized and two individuals were charged with multiple felony offenses.

Without the information you gathered during your interview of the assault suspect, this operation would have gone undiscovered. Additionally, you obtained the suspect's consent to search his residence, leading to the discovery of his own marijuana growing operation. Your diligence to your duties and thorough investigation made these arrests possible. Your assistance in obtaining the search warrant and processing the evidence efficiently brought the matter to close. I commend you for your actions.

Sgt. James Kemmerle

Pc: Lt. Leonhard, file

William R. Johnson
Sheriff

Ashtabula County Sheriff's Department

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047

Non Emergency (440) 576-90
Emergency 9
FAX (440) 576-59

02/13/08

Letter of Commendation

[redacted]

During the early morning hours of February 1st, 2008 [redacted] was participating as a member of the entry team with the Ashtabula County SWAT Team in the City of Conneaut. During the entry the suspect brandished a handgun and pointed it in the direction of [redacted] and other team members. [redacted] responded without delay to the suspect's actions and was able to stop the threat without injuries to himself, other team members or residents of the household.
With these actions [redacted] showed his extreme bravery under fire and his dedication to duty. His commitment to his team and to training most likely prevented serious injury or death to fellow team members and for this he should be highly commended.

William R. Johnson
Sheriff, Ashtabula County

Lt. Greg Leonhard
Uniform Division Commander

Cc
[redacted]
file

CONNEAUT POLICE DEPARTMENT
294 Main Street, Conneaut, Ohio 44030
TELE: 440-593-7440

PROPERTY ISSUED TO NEW EMPLOYEES RECORD FORM

✓ EAGLE BADGE [redacted]
✓ CENTENNIAL BADGE [redacted]
HAT BADGE [redacted]
POLICE ID.
✓ FOB - [redacted]
✓ KEY PEG [redacted]
✓ ELEVATOR KEY [redacted]
✓ ARMORY KEY [redacted]

MANUALS [redacted]
✓ PORTABLE RADIO [redacted]
✓ CHARGER [redacted]
TRAFFIC VEST [redacted]
HAZMAT GUIDEBOOK [redacted]

X [redacted]
Received By

8-30-10
Date

Witnessed

CONNEAUT POLICE DEPARTMENT
294 Main Street, Conneaut, Ohio 44030
Phone: 440-593-7440

Jail Policy & Procedures Manual

I have received a copy of the Conneaut Police Department Jail Policy and Procedures Manual and understand that it is my responsibility to know the contents of this manual and abide by it.

I also understand that copies of the Conneaut Police Department Jail Policy and Procedures Manual are located throughout the police station and it is my responsibility to review them and stay abreast of any changes.

X [redacted]
Name

X [redacted]
Signatu

08.30.2010
Date

Witness

CONNEAUT POLICE DEPARTMENT
294 Main Street, Conneaut, Ohio 44030
Phone: 440-593-7440

Rules and Regulations Policy & Procedures

I have received a copy of the Conneaut Police Department Rules and Regulations and Policy and Procedures Manual and understand it is my responsibility to know the contents of them and abide by them.

I also understand that copies of the Conneaut Police Department Standard Operating Procedures are located throughout the Police Station and it is my responsibility to review them and stay abreast of any changes.

X [redacted]
Name

X [redacted]
Signature

X 08-30-2010
Date

Witness

CONNEAUT POLICE DEPARTMENT
294 Main Street, Conneaut, Ohio 44030
Phone: 440-593-7440

CONFIDENTIAL INFORMATION

As an employee of the Conneaut Police Department, I have a responsibility to keep all records and other information regarding police and fire investigations, persons involved and employees of the Conneaut Police Department strictly confidential.

I further recognize my responsibility to keep confidential all information pertaining to medical condition, financial status, or all information concerning police and fire investigations and persons involved in the investigation. In addition, all information about the operation of the Conneaut Police Department is confidential and not to be discussed with unauthorized persons. I understand that any request for a public record shall be directed to the office of the Chief of Police, and I shall not provide any individual with any access to any record within the Department, unless so directed by a superior officer.

For example only, and not by way of limitation, the medical condition, financial status or care of a jail inmate, information concerning a police or fire investigation, the financial status of a person involved in an investigation, and information about the operation of the Conneaut Police Department are confidential matters and should not be discussed with anyone except authorized persons. I understand that if I have any doubt about a person's authorization to receive information, I am to refer that person to my supervisor, the Lieutenant of Police or the Chief of Police.

X
Employee Signature

Supervisor's Name

X
Date

Law Enforcement Oath of Honor

On my honor, I will never betray my badge, my integrity, my character or the public trust.

I will always have the courage to hold myself and others accountable for our actions.

I will always uphold the constitution, my community and the agency I serve.

INTERNATIONAL ASSOCIATION OF CHIEFS OF POLICE
POLICE
SINCE 1893

[redacted] [redacted]

Officer's Signature Date

These documents have been copied to remove addresses & SS#'s.

Ohio's Sharpest Corner

A Resort Area

onneaut

ROBERT HER
CITY MANAGE

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

[redacted]

[redacted]

Dear [redacted]

Due to the resignation of Kathy Bailey, the City has a permanent vacancy in the ranks of its full-time dispatchers. Upon Chief Russo's recommendation, you are hereby appointed temporarily and provisionally to serve in this vacancy until Civil Service makes provisions for a permanent appointment. Said appointment is effective [redacted]

Civil Service will be notified of your appointment and of the City's intent to appoint you provisionally to this position. Pursuant to Local Civil Service Rule 5.02, you may be required to take a non-competitive exam in order to qualify for provisional appointment. Failure to qualify for provisional appointment will result in your being restored to the part-time ranks. During your provisional appointment, you will be placed on probation for one (1) year and may be removed for failing to satisfactorily complete such probation.

Once your appointment becomes provisional, you will receive the following wage and benefits during such provisional status.

1) Your rate of pay will be $9.54 per hour;

2) You will be eligible for health insurance provided you pay an $18.00 per month premium;

3) You will accrue vacation and sick time as a full-time employee of the City; and

4) P.E.R.S. pickup.

You will be required to perform any and all duties required the full-time dispatching staff.

Should you have any questions, please contact Chief Russo.

Very truly yours,

Robert Herron
City Manager

cc: Rocco Russo
Anthony Zampedro
Finance Dept.

ROBERT HERRON
CITY MANAGER



A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

October 11, 1996

[redacted]

Dear [redacted]

Effective [redacted] you are appointed as part-time dispatcher for the City of Conneaut Police Department. You will be assigned as needed within the Department.

This appointment is contingent upon your passing a physical examination, background investigation and successful completion of all training required by the Chief of Police. You will also serve a 6 month probationary period, and you are required to live within the city limits of Conneaut.

You will be compensated at the rate of $5.25 per hour, payable bi-weekly. This appointment is made in the classified service within the rules and regulations of the Civil Service Commission and the rules and regulations of the City of Conneaut Police Department.

Please report to the Finance Department to obtain the necessary forms required for employment. Also, please contact Police Chief Rocco Russo in regard to training and shift assignment.

Congratulations, and I look forward to working with you.

Sincerely,

Robert Herron
City Manager

RDH/pb

cc: Chief Russo
Vicki Jackson, Payroll
Civil Service Commission

ROBERT HERRON
CITY MANAGER



A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

October 23, 1995

[redacted]

Dear [redacted]:

Effective [redacted] you have been selected for the pool of part-time Corrections Officer within the Conneaut Police Department. In accordance with Ordinances No. 186-89, 131-90, 300-91, and 233-92. This position is compensated at the rate of $7.25 per hour. There are no other benefits. Your appointment in contingent on passing a physical examination.

This appointment is in the classified service and requires a six (6) month probationary period. Chief of Police, Rocco N. Russo will provide you with Departmental Rules and Regulations and applicable schedules. The City will notify you of the date and time for your physical examination

In accordance with Ordinance No. 142-85 and Ordinance No. 340-89, you must reside within the Corporation limits of the City of Conneaut within six (6) months of the date of your appointment. A ninety (90) day extension can be granted with the approval of the City Manager

Thank you for your interest in the City of Conneaut. I'm looking forward to working with you. If you have any questions, please contact Chief Russo at 593-6292.

Sincerely,
THE CITY OF CONNEAUT

Robert Herron
City Manager

RDH:pjb
CC: Chief Rocco N. Russo
Finance Department
Civil Service Commission

[redacted]

Chief Bim Orrenmaa
Conneaut Fire Department
294 Main St.
Conneaut, Ohio 44030

[redacted]

Chief Orrenmaa,

Effective immediately, I resign my position as a [redacted] at [redacted]. It is my intention however, to continue my employment at [redacted]. My experience at [redacted] has been a positive one and I have enjoyed the job as well as the working environment. I sincerely hope that this letter is not met with any hard feelings. I feel that we have a good working relationship, and hope to continue with that. I hope that my employment has been a positive experience for you.

Respectfully,

[redacted]

RECEIVED
AUG - 6 1996
CITY MANAGER'S OFFICE

ROBERT HERRON
CITY MANAGER

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

July 10, 1995

[redacted]

Dear [redacted]:

Effective [redacted] you are appointed as a temporary, provisional employee at will, for the City of Conneaut Fire Department as a Utility Fire Fighter. This appointment is contingent upon your passing a physical examination and an agility test.

This appointment is made in the unclassified service, and you are subject to the Rules and Regulations of the Conneaut Fire Department.

You will be compensated at the rate of $4.50 per hour. Please report to the Finance Department for the necessary paperwork regarding employment.

Congratulations and I will look forward to working with you.

Sincerely,
THE CITY OF CONNEAUT

Robert Herron
City Manager

RDH:lc
CT: Fire Chief
Civil Service Commission

City of Conneaut
Office of the City Manager

Robert Schaumleffel, Jr.
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

August 27, 2010

[redacted]

Dear [redacted]:

Effective [redacted] I am hereby appointing you to the position of [redacted] for the City of Conneaut. You will be paid at the rate of $20.46 per hour payable bi-weekly.

You will be required to pass the Conneaut Police Department's field training program, a pre-employment physical and drug screening. This appointment is in the classified service and requires a one (1) year probationary period. Chief Jon J. Arcaro will provide you with Departmental Rules and Regulations and other applicable policies and schedules. He will also notify you of the date and time for your examinations. Please report to the Finance Department to fill out employment forms prior to your starting date.

Congratulations and I look forward to working with you.

Sincerely,
CITY OF CONNEAUT

Robert Schaumleffel, Jr.
City Manager

RS/pb

cc: Chief Arcaro
Finance/Payroll
Civil Service Commission
Personnel File

OHIO PUBLIC SAFETY
EDUCATION · SERVICE · PROTECTION

Ohio Department of Public Safety
DIVISION OF HOMELAND SECURITY
http://www.homelandsecurity.ohio.gov

PUBLIC EMPLOYMENT

In accordance with section 2909.34 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NO ASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division Web site for the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

LAST NAME [redacted]	FIRST NAME [redacted]	MIDDLE INITIAL [redacted]
HOME ADDRESS [redacted]		
[redacted]	STATE OH	[redacted]
HOME PHONE [redacted]	WORK PHONE [redacted]	

DECLARATION

In accordance with section 2909.32 (A)(2)(b) of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism? ☐ Yes ☒ No

In the event of a denial of licensure due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division Web site.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization. If I am signing this on behalf of a company, business or organization, I hereby acknowledge that I have the authority to make this certification on behalf of the company, business or organization referenced above.

X [redacted] 8-30-10

APPLICANT SIGNATURE DATE

Patricia Beckwith

From: Bim Orrenmaa [chiefbim@hotmail.com]
Sent: Monday, March 13, 2006 11:57 AM
To: mjsmith@suite224.net; conneautcityhall@suite224.net

Vince, Mike:

The SO is doing a background check on [redacted] for a job there. If you have anything in a file that should be release for a background check, please take it to Pat Beckwith in the next couple days.

Bim

Don't just search. Find. Check out the new MSN Search!
http://search.msn.click-url.com/go/onm00200636ave/direct/01/

DET. B. NIGH

Ashtabula County Sheriff's Department

William R. Johnson
Sheriff

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047

Non Emergency (440) 576-9046
Emergency 911
FAX (440) 576-5915

AUTHORITY TO RELEASE INFORMATION

To: CONNEAUT FIRE DEPT.

I hereby authorize you to release any and all information the Ashtabula County Sheriff's Department may request.

Full Name: [redacted] Date 03-07-06
[redacted] (signature)

Full Name: [redacted] Date 03-07-06
(print or type)

Current Address [redacted] Date of Birth: [redacted]
[redacted]

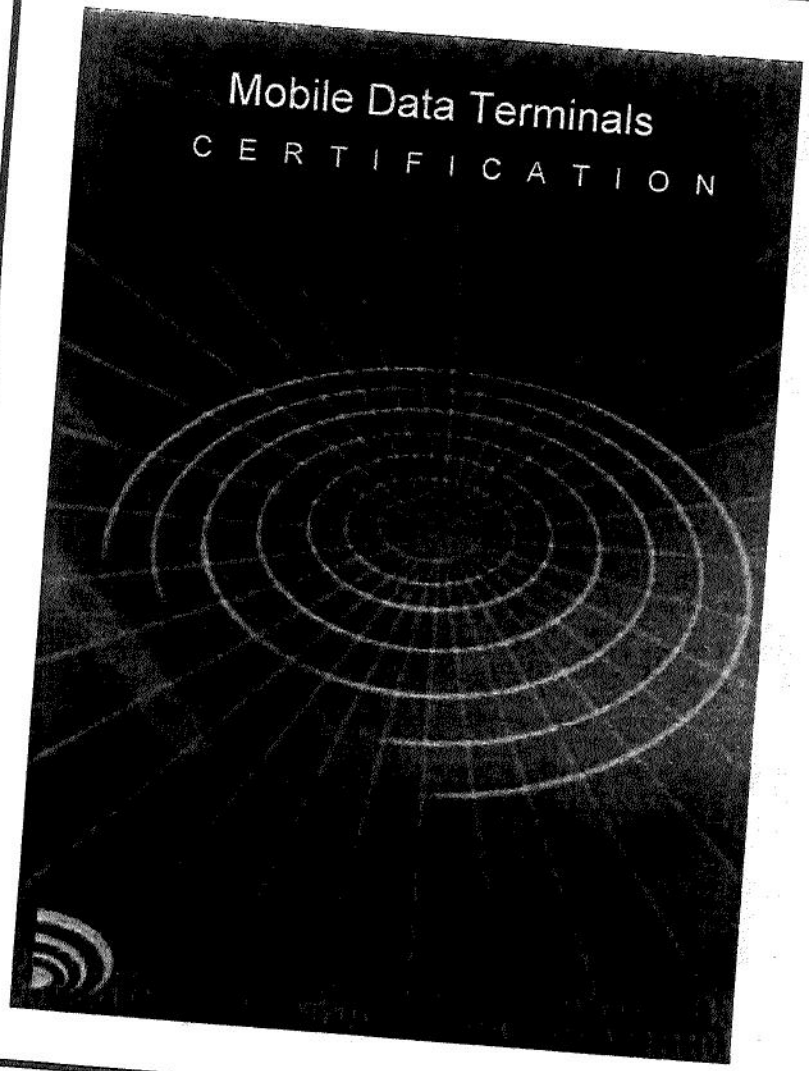
Social Security Number: [redacted]

Witness: _____

We are requesting that you furnish us with the following information:

ANY INFORMATION PERTAINING TO HIS EMPLOYMENT WITH YOUR AGENCY.

NOTE: THIS FORM MAY BE RETAINED FOR YOUR RECORDS



This document certifies that

[redacted]

has passed the

Mobile Data Terminals

test and should be afforded the rights and responsibilities pertaining thereto.

Awarded this
01 day of May, 2007

Ron Fenton

From: Sgt. William M. Parkomaki [wparkomaki@cityofashtabula.com]
Sent: Tuesday, May 27, 2008 8:26 AM
To: Ron Fenton
Subject: training

The following team members were at training on 05202008

AM	PM
√Siebeneck	[redacted] ✓
√Febel (NFDD/Bean bag only)	Felt ✓
√Tulino	Simons ✓
√Barger (NFDD/bean bag only)	Distel ✓
√Emmett	Gerics ✓
√Zetlaw	Colby ✓
√Thomas	Pearce ✓
√Truckey (NFDD/bean bag/shield)	Tobie

Nelson and Brodsky stopped in.

Topics covered:
Re-Cert. NFDD
Re-Cert. .12ga bean bags
Shooting M4's with the shield (stationary and moving)
5 man arrest team w/shield
Officer down drills
Officer/victim rescue w/patrol car, shooting from moving vehicle.

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: HANDGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Glock MODEL: 22 SERIAL #: [redacted]

CALIBER: .40 AMMUNITION USED: Fogeal METHOD CARRY: Security Holster

COURSE OF FIRE NUMBER: ***OPOTC-HG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	LONG RANGE SIGHT ALIGNMENT	1	50 Feet	18 Seconds	Normal	Carry Ready	6	5
2	AMIDEXTRIOUS ONE-HANDED	1	12 Feet	20 Seconds	Normal	Secured In Holster	12	12
3	LOW LEVEL LIGHT (Rounds Fired With Flashlight In Hand/Hold)	1	21 Feet	12 Seconds	Low Level	Secured In Holster	6	
4	PROTECTIVE COVER	2 or 4 Depending On The Size Of The Range	21 Feet Shooting Distance 50 Feet Starting Distance	40	Normal	Secured In Holster	8	8
5	HIP POSITION/REACT AND SHOOT/MULTIPLE TARGETS	3	5 Feet to 21 Feet	15	Normal	Secured In Holster	12	11
6	SHOOTING WHILE MOVING (F/B)	2	Forward – 30 Foot to 10 Feet Backward – 10 Feet to 30 Feet	20 Seconds	Normal	Secured In Holster	8	7
7	SHOOTING WHILE MOVING (L to R & R to L)	2	On Line Parallel To Targets, at 15 Feet	20 Seconds	Normal	Secured In Holster	8	8
						PASSING SCORE IS 80% or 48 Rounds	60 54	TOTAL HITS 51

DATE TESTED: 9.21.07 PASSED: ✓ FAILED: ____

TESTED BY: [illegible]

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: SHOTGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Mossberg MODEL 500 SERIAL #: [redacted]

AMMUNITION USED: _____

COURSE OF FIRE NUMBER: ***OPOTC-SG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	SNAP SHOOTING	1	20 Feet	2 Seconds Per Round	Normal	Carry-Ready	3 Buckshot	3
2	LOW LEVEL LIGHT	1	20 Feet	2 Seconds Per Round	Low Level	Carry-Ready	3 Buckshot	3
3	MULTIPLE TARGETS	2	20 Feet	3 Seconds Per 2 Rounds	Normal	Carry-Ready	2 Buckshot	2
4	PROTECTIVE COVER	2	20 Feet Shooting Distance; 30 Feet Starting Distance	15 Seconds	Normal	Carry-Ready	2 Buckshot	2
5	SLUG RUN (Optional)	5 or 1	50 Feet	12 Seconds Per 5 Rounds	Normal	Shooting Position Of Choice	5 Slug	5
					NOTE: If The Department Does Not Use Slugs, Then The Slug Run Omitted For Requal.	PASSING SCORE 100%	10 Buckshot, If Slug Run Included, 5 Slugs	TOTAL HITS 15

DATE TESTED: 9-21-07 PASSED: ✓ FAILED: ____

TESTED BY: Dep R. Siebenaler II OPOTC REQUAL #: PEO 34/13 EXP: 4-30-10

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: POLICE RIFLE CARBINE

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Colt MODEL M4 SERIAL #: [redacted]

AMMUNITION USED: Federal

COURSE OF FIRE NUMBER: ***OPOTC-PRC-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	NUMBER OF ROUNDS	TOTAL ROUNDS
1	SNAP SHOOTING	1	20 Feet	2 Seconds Per 2 Shot String	Instructor's Option	12	12
2	MULTIPLE TARGETS	3	30 Feet	8 Seconds Per 12 Round String	Instructor's Option	12	12
3	PROTECTIVE COVER	4	30 Feet	20 Seconds Overall	Instructor's Option	12	10
4	MEDIUM RANGE	1	75 Feet	12 Seconds Per 12 Round String	Instructor's Option	12	12
5	MEDIUM RANGE (Shooting Position Of Choice)	1	150 Feet	15 Seconds Per 12 Round String	Instructor's Option	12	12
					Passing Score is 80% or 48 Rounds	60 Rounds Total	TOTAL HITS 58

DATE TESTED: 11-10-07 PASSED: ✓ FAILED: ____

TESTED BY: Ronald Fenton OPOTC REQUAL #: 2633 EXP: 10-10-09

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: SHOTGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Mossberg MODEL 500 SERIAL #: [redacted]

AMMUNITION USED: Aco

COURSE OF FIRE NUMBER: ***OPOTC-SG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	SLUG SHOOTING	1	20 Feet	2 Seconds Per Round	Normal	Carry Ready	3 Buckshot	3
2	LOW LIGHT	1	20 Feet	2 Seconds Per Round	Low Light	Carry Ready	3 Buckshot	3
3	MULTIPLE TARGETS	2	20 Feet	3 Seconds Per 2 Rounds	Normal	Carry Ready	2 Buckshot	2
4	PROTECTIVE COVER	1	20 Feet Shooting Distance 10 Feet Of Barrier Distance	15 Seconds	Normal	Carry Ready	2 Buckshot	2
5	SLUG RUN (Optional)	5 or 10	50 Feet	12 Seconds For 5 Rounds	Normal	Shooting Position Of Choice	5 Slug	5
					NOTE: If The Department Does Not Use Slugs Then The Slug Run Omitted For Requal.	PASSING SCORE: 100%	10 Buckshot If Slug Run Included, 5 Slugs	TOTAL HITS 15

DATE TESTED: 03/27/08 PASSED: ✓ FAILED: ____

TESTED BY: Sgt R Siebenaler II OPOTC REQUAL #: BR13413 EXP: 03-30-2010

OHIO PEACE OFFICER TRAINING COMMISSION

FIREARMS REQUALIFICATION PROGRAM

OHIO PEACE OFFICER TRAINING ACADEMY RANGE PROFICIENCY RECORD: HANDGUN

NAME: [redacted] AGENCY: Acso

WEAPON MAKE: Glock MODEL: 22 SERIAL #: [redacted]

CALIBER: .40 AMMUNITION USED: Federal METHOD CARRY: _____

COURSE OF FIRE NUMBER: ***OPOTC-HG-06 (EFFECTIVE 1/1/06)***

STAGE	TITLE	TARGET(S)	DISTANCE	TIME	LIGHT CONDITIONS	MODE OF CARRY	NUMBER OF ROUNDS	TOTAL ROUNDS
1	LONG RANGE SIGHT ALIGNMENT	1	50 Feet	15 Seconds	Normal	Carry Ready	6	6
2	AMBIDEXTROUS ONE-HANDED	1	12 Feet	20 Seconds	Normal	Secured In Holster	12	11
3	LOW LEVEL LIGHT (Rounds Fired With Flashlight In Hand/Hold)	1	21 Feet	12 Seconds	Low Level	Secured In Holster	6	10-15-08 ~ 6
4	PROTECTIVE COVER	2 or 4 Depending On The Size Of The Range	21 Feet Shooting Distance, 50 Feet Starting Distance	40	Normal	Secured In Holster	8	8
5	HIP POSITION/REACT AND SHOOT/MULTIPLE TARGETS	3	5 Feet to 21 Feet	15	Normal	Secured In Holster	12	12
6	SHOOTING WHILE MOVING (F/B)	2	Forward – 30 Feet to 10 Feet Backward – 10 Feet to 30 Feet	20 Seconds	Normal	Secured In Holster	8	7
7	SHOOTING WHILE MOVING (L to R & R to L)	2	On Line Parallel To Targets, at 15 Feet	20 Seconds	Normal	Secured In Holster	8	8
						PASSING SCORE IS 80% or 48 Rounds	60	TOTAL HITS 58

DATE TESTED: 9-24-08 PASSED: ✓ FAILED: _____

TESTED BY: 10-15-08 [signature] OPOTC REQUAL #: 803259 EXP: 12/09

Shaker Heights Police Department
SWAT Team 1*
Firearms Re-qualification Program

Range Proficiency Record: Scope-Sighted Rifle

Name: [redacted] **Date:** 12 / 18 / 08

Weapon: SIGARMS **Model:** R93 LRS2 **Caliber:** .308
Weapon: REMINGTON **Model:** 700 **Caliber:** .308
Weapon: COLT **Model:** CAR-A3 HBAR **Caliber:** .223

Ammunition used: FEDERAL 308WIN Match 168gr. Sierra Matchking BTHP
WINCHESTER Ranger .223REM 64gr. Power Point

Course of fire number: OPOTC-SSR-06 (Effective 01/01/2006)

Stage	Title	Target(s)	Distance	Time	Light Conditions	Mode of Carry	# of Rds.	Total Rds.
1	Medium Range .308	5	150 ft. (50 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	5
2	Long Range .308	5	300 ft. (100 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	5
	Total					Passing score is 100%	10	10
1	Medium Range .308	5	150 ft. (50 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
2	Long Range .308	5	300 ft. (100 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
	Total					Passing score is 100%	10	
1	Medium Range .223	5	150 ft. (50 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
2	Long Range .223	5	300 ft. (100 yds.)	5 seconds per round	Instructor's Option	Position of choice	5	
	Total					Passing score is 100%	10	

Passed: ✓ **Failed:** ___

Tested by: James A. Maciejewski #70 [redacted]

Notes: _____

OHIO PUBLIC SAFETY
EDUCATION · SERVICE · PROTECTION

OHIO DEPARTMENT OF PUBLIC SAFETY

- Administration
- Bureau of Motor Vehicles
- Emergency Management Agency
- **Emergency Medical Services Division**
- Office of Criminal Justice Services
- Ohio Homeland Security
- Ohio Investigative Unit
- Ohio State Highway Patrol

Bob Taft, Governor
Kenneth L. Morckel, Director
Richard N. Rucker
Executive Director

Emergency Medical Services
1970 West Broad Street
P.O. Box 182073
Columbus, Ohio 43218-2073
(614) 466-9447 • (800) 233-0785
www.ems.ohio.gov

November 5, 2007

[redacted]

Cert. #: [redacted]
Expiration Date: 11/05/2009

The above named person is issued this Certificate to Teach Special Topics as outlined in 4765.23 of the Ohio Revised Code and 4765-8-14 of the Ohio Administrative Code. The Certificate to Teach Special Topics is limited to the following topics:

Paramedic - Behavioral Emergencies
Paramedic - Communications
Paramedic - Environmental Emergencies
Paramedic - Patient Assessment (Medical
Paramedic - Triage/Transportation

Certified by:

Richard N. Rucker,
Executive Director

City of Conneaut
Office of the City Manager

Robert Schaumleffel, Jr.
City Manager
294 Main Street
Conneaut, Ohio 44030

440-593-7401 telephone
440-593-6908 fax

December 29, 2010

[redacted]
City of Conneaut Police Department
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

I am in receipt of a letter from Sergeant Chuck Burlingham regarding an incident that you were involved in on [redacted] in the Conneaut Jail. Due to the fact that you are a probationary employee, the severity of the incident, and based on a recommendation from Sergeant Burlingham, I am hereby extending your probationary period for three months.

If you have any questions pertaining to this letter, please feel free to contact either Sergeant Burlingham, or myself for further explanation.

Sincerely,
CITY OF CONNEAUT

John Williams
Acting City Manager

JW/pb

cc: Chuck Burlingham, Sergeant
Finance Office
Civil Service Commission
Personnel File

Conneaut City Police
Serving Since 1902

Jon. J Arcaro
Chief of Police

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: conneautpd@suite224.net

Date: December 21, 2010

To: Acting City Manager John Williams

From: Sergeant Burlingham

Re: [redacted]

On November 14, 2010 I received a grievance/complaint form from an inmate alleging improper treatment by [redacted]

During the subsequent weeks an internal investigation was conducted and the investigating officers concluded that the allegation was unsubstantiated.

Although this allegation was unsubstantiated, it was clear that [redacted] did violate several sections of our Departmental Policy and Procedures as well as several sections of the Jail Manual, Policy and Procedures.

In addition to these policy violations I am concerned as to [redacted] decision to enter the jail area to handle an issue when he was not the assigned jail officer, nor the officer in charge of the shift.

This, in conjunction with the poor judgment used by [redacted] shortly after being released for Solo Patrol when his driving actions were in direct violation of General Order 3.6. Including 129 mph on I90 without lights and siren looking for a semi straddling lanes and 107 mph on St. Rt. 7 between Welton Rd. and Gateway Ave. again without lights and siren responding to a domestic call.

To follow is a list of the violation on November 11, 2010.
Departmental Rules and Regulations Violated:

1.03 – Unsatisfactory Performance
1.06 - Obedience of Rules and Regulations
1.30 – Unbecoming Conduct
3.07 – Courtesy

Jail Manual Policy and Procedures Violated:

10.03 Security
L. Written Entry for significant activities (use of force and movement in jail)
CC. Use of force documentation

I would recommend that [redacted] have his Probationary Period extended by 3 (three) months and a written reprimand.

This written reprimand should remain in his file for a period of 12 months unless there is intervening subsequent or like offense during that time period. If this is the case I would recommend, at that time, his continued employment be subject to reconsideration.

Sgt. Burlingham

Cc: FOP 51 President, Steve Gerics
Personnel File
file

Policies & Administrative Orders

Traffic Safety Policy	Adopted 3-21-09
Sick Leave Donation Program	Ordinance No. 86-07
City of Conneaut's Safety Policy	Updated 9-17-07
Telephone Usage Policy	Ordinance No. 126-06
City Credit Card Usage Policy	Ordinance No. 127-06
Travel & Reimbursement Policy	Ordinance No. 128-06
City Vehicle Use Policy	Ordinance No. 129-06
Drug-Free Workplace Policy & Testing Procedure -	Ordinance No. 02-05
City Office Dress Code	Updated 5-12-04
Sexual Harassment Policy	Ordinance No. 87-04
Employment Provisions	Ordinance No. 20-04
Firearms & Weapons Policy	Adopted 3-30-04
No Smoking Policy	Adopted 3-30-04
Transitional Work Policy & Procedures	Adopted 3-4-04
Technology Use Policy	Adopted 8-21-03
Light Duty Work Policy	Adopted 10-11-96

I have received a copy of the City of Conneaut Employment Handbook and agree to read and become familiar with its contents.

Please date, print and sign your name below then return this form to the Finance Office.

[redacted] 08-29-2010

Printed Name Date

[redacted] [redacted]

Signature Employee Number

CONNEAUT FIRE DEPARTMENT

Fire Station 1 - City Hall Building - Conneaut, Ohio 44030 - 216-593-4889

Fire Chief
Bim Orrenmaa

February 13, 1997

[redacted]:

On Thursday, Feb. 6, 1997, a meeting was held to discuss your alleged wrongful actions at 475 Harbor St. on [redacted]

Per your request, the following persons were in attendance: Jon Arcaro, your representative, Battalion Chief Vince Gildone, your station supervisor, and Lt. John Chapin, the fireground officer at 475 Harbor St. An audio tape of the radio traffic was also provided at your request.

I reviewed the written statements which indicated wrongful actions and asked for your response.

After consultation with Jon Arcaro, you admitted to the wrongful acts and asked to explain why you performed as you did. In regards to using profanity, you did not recall doing this which you attributed to being hypoxic from smoke inhalation. You did offer an apology to the N. Kingsville Fire Dept..

The radio tape was listened to and you provided a typed 7 page reply.

Battalion Chief Gildone stated that you have been counseled and reprimanded by himself and by Asst. Batt. Chief Mike Smith. John Chapin also reprimanded you at the time of the incident.

After reviewing the facts and information presented, I find that it was improper for you to enter the burning structure alone under the circumstances. The correct action would have included setting up attack lines and advising the fireground commander of your readiness but lack of manpower.

It was improper action to re-enter the burning structure and take unnecessary risks which resulted in your suffering smoke inhalation. The proper action would have included wearing breathing apparatus when exposed to smoke and dangerous gases.

RECEIVED
FEB 13 1997
CITY MANAGER'S OFFICE



It was improper conduct to use profanity towards N. Kingsville firefighters and proper conduct would have included respectful conduct.

You are issued a written reprimand and will receive remedial training for the improper conduct at a fire scene. Similar conduct in the future may lead to further discipline including a 2nd written reprimand, suspension, or dismissal.

If you have any questions or wish to appeal this discipline, please contact me.

Regards,

Bim Orrenmaa
Fire Chief

cc:file

Chief R.N. Russo
Conneaut Police Department
294 Main St.
Conneaut, OH 44030

Dear Chief Russo,

As you know, on July 8, I was forced to withdraw my previous resignation dated for [redacted] due to an unforseen problem with my pre-employment testing. The problem has since been corrected and I am now submitting my final letter of resignation. My official start date at the City of Ashtabula Police Department i[redacted] Subsequent to this, I would like my resignation to take effect on [redacted] my last scheduled day would be [redacted]

I would like to take this opportunity to thank you as well as the City Manager for your unprecedented latitiude with regard to the withdrawal of my first resignation. This is just another example of why my tenure at the Conneaut Police Department has been a pleasurable one.

Thank you,

[redacted]

CONNEAUT FIRE DEPARTMENT

Fire Station 1 - City Hall Building - Conneaut, Ohio 44030 - 216-593-4889

Fire Chief
Bim Orrenmaa

May 1, 1998

[redacted]:

On April 30, 1998 I spoke to you regarding an incident with Lt. John Chapin on Old Main Road, [redacted] You were argumentative with Lt. Chapin concerning Station 1's response to an open burning call.

Previously, on Feb. 13, 1997 you received a written reprimand concerning fireground behavior which included using prafinity towards N. Kingsville firefighters.

You are an intelligent firefighter but you must refrain from being argumentative with officers and other firfighters. Emergency operations require team-work and coordination of events.

This is a 2nd written reprimand for insubordination, being argumentative with an officer at an incident. Similar conduct in the future will result in additional and more severe discipline.

If you have any questions, please see me.

Sincerely,

Bim Orrenmaa

RECEIVED
MAY 11 1998
CITY MANAGER'S OFFICE

cc: file
Personnel file

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

May 6, 1998

MEMO TO: [redacted] Roger Litwiler and Steve Perkio
Dispatchers Gayle Gurto and [redacted]

SUBJECT: Incident of [redacted]

Dear Steve:

[redacted] I would like to take this opportunity to thank you for coming out to assist on [redacted] the incident involving the shooting of two firemen in Monroe Township.

Whether it was to handle other calls or to assist dispatch, however you helped made a difference and was appreciated.

Once again, thank you.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

Cc: Robert Herron, City Manager

CITY OF CONNEAUT
TECHNOLOGY USE POLICY
ACKNOWLEDGMENT

I hereby acknowledge that I have received a copy of Administrative Order 1.03 (Technology Use Policy) and that I have read and understand the content of said policy.

[redacted] [redacted] _____ 9-10-03

Print Employee Name Date

[redacted] _____

[redacted] Signature

CITY OF CONNEAUT
DRUG-FREE WORK PLACE POLICY
ACKNOWLEDGMENT

I hereby acknowledge that I have received a copy of Administrative Order 1.01 (Drug-Free Work Place Policy) and that I have read and understand the content of said policy.

[redacted]

[redacted]name

9.16.03
Date

[redacted]

[redacted]nature

ROCCO N. RUSSO
CHIEF OF POLICE

JON J. ARCARO
DEPUTY CHIEF OF POLICE

Ohio's Sharpest Corner A Resort Area

City of Conneaut

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

May 30, 2001

To: [redacted], **Lt. Lonnie Hutchens, FF. Kirk Hutchens, FF. Bob Dibell, FF. Andy Specht, FF. Jeremy Young, FF. Mark Powers, FF. Sondra Smith**

From: **Deputy Chief Arcaro**

Re: **Mock D.U.I. Crash Demonstration**

RECEIVED
JUN - 1 2001
CITY MANAGER'S OFFICE

I would like to take this opportunity to thank you for participating in the mock D.U.I. crash demonstration at Conneaut High School.

Your professionalism and skill was evident and appreciated by those that attended the demonstration. I'm sure that you made an impact on many of the students that attended.

Again, fine job and keep up the good work.

c.
Batt. Chief Gildone
City Manager ✓
file

ROBERT HERRON
CITY MANAGER

City of Conneaut

City Hall Building
294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7401
Fax (440) 593-6908
E-mail: conneautcityhall@suite224.net

July 22, 1998

[redacted]
Conneaut Police Department
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

Effective [redacted] you are appointed as a [redacted] within the City of Conneaut Police Department. This appointment is contingent on passing a medical physical which will be scheduled by Chief Russo.

As a [redacted] you will be required to work a minimum of twelve (12) hours per month. You will also be assigned to work only with Sgt. Arcaro, Field Training Officer for a period of one year.

This appointment is made in accordance with Ordinance No. 2-77, and you will work under the direction of the Chief of Police or his designee.

Congratulations and I look forward to continuing to work with you.

Sincerely,
CITY OF CONNEAUT

Robert Herron
City Manager

RDH:pb

cc: Chief Russo
Finance Director
Law Director

Chief Russo,

I am writing to ask for your assistance in gaining vacation credit for my years of service with the City of Conneaut. According to our contract, vacation will be awarded after a specific number of "years of employment with the City." I am unclear about what steps to take to gain credit for the time I have been employeed at [redacted] and at the Police Department as a [redacted]

I have asked other officers who have been given credit for this time what paperwork I need to complete and they have been unable to tell me, so I thought that you would be able to help. Thank you in advance for any assistance you can give me.

Respectfully,

[redacted]

ROBERT HERRON
CITY MANAGER

Ohio's Sharpest Corner A Resort Area

City of Conneaut

City Hall Building
294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7401
Fax (440) 593-6908
E-mail: conneautcityhall@suite224.net

May 13, 1998

Mr. [redacted]
Conneaut Police Department
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

I am writing to indicate that you have successfully completed your six month probationary period for the position of [redacted] for the City of Conneaut Police Department.

Effective [redacted] you are hereby granted your permanent appointment as [redacted] This appointment is being made based on your probationary evalution and after a recommendation from the Chief of Police. Please note that City Ordinance requires that you reside within the City limits of Conneaut during your tenure with the City

Congratulations, and I will look forward to continuing to work with you.

Sincerely,

Robert Herron
City Manager

RDH/pb

cc: Chief Russo
Finance/Payroll
Civil Service

c:\wp\employee\[redacted].per

CITY OF CONNEAUT
PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classificati [redacted]

Department Police Payroll Number _____

Rating Period Jan. 98 Date Completed Dec. 98

Completed by Daniel T Asmus S-7

Employee self evaluation _____

TYPE OF REVIEW

_____ End Probation ✓ Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

5 **OUTSTANDING:** Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

4 **ABOVE AVERAGE:** Employee's performance is above or exceeds job requirements.

3 **SATISFACTORY:** The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

2 **MARGINAL:** The employee's performance doesn't consistently meet the normal job requirements or expectations. Employee needs to improve job performance to insure satisfactory performance throughout the entire year.

1 **UNSATISFACTORY:** The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

Rating					General Factor	Comments
5	4	3	2	1		
		✓			QUANTITY: Is the amount of work generated by the employee expected by all employees in the same classification. Employee's complete duties should be taken into consideration.	Respectable amount of work generated
	✓				QUALITY: Is work completed accurate, neat, thorough, timely, well-organized, and applicable to the duties of the employee.	Does a Fine job on Wants and Warrants and personnel deployment
	✓				WORKING RELATIONSHIPS: Does the employee have positive working relationships with other employees? Contributes to the group effort of the department the employee works in.	All employees on [redacted] enjoy his companionship
	✓				PUBLIC CONTACTS: Helpful, useful, tactful, and projects a professional image when in contact with the general public, either on duty or off duty.	Police and Fire Training place [redacted] at an advantage
		✓			PLANNING/ORGANIZATION: Work is planned out thoughtfully, and in an organized fashion, stays with said plan and will implement any changes to the plan if situations demand.	Has abicity to prioritize
		✓			ACCEPTS RESPONSIBILITY: Accepts job responsibility, does not pass blame, admits failure and correction, acts in a responsible manner during performance of duties.	Very Few complaints voiced, Good image

[redacted] 03-18-99

Employee's initials Date

Rating					General Factor	Comments
5	4	3	2	1		
	✓				ACCEPTS DIRECTION: Accepts direction from supervisors, department heads, and/or administrative personnel, does not challenge all directives, accepts direction without complaining to fellow employees.	From my experience Disp. [redacted] has been very supportive and receptive
	✓				INITIATIVE: Are suggestions made by the employee? Does employee exercise initiative in job duties and performance? Is constructive criticism offered by the employee?	[redacted] will discuss an issue in a logical manner *Can think for himself!
	✓				JUDGEMENT: Is judgement consistent and reliable? Does poor judgement continue after instructing? Does employee's judgement effect fellow employees?	Knowledge training again a plus / maturing
	✓				SAFETY: Is the employee conscientious about safety? Does the employee take reasonable precautions when handling equipment and/or working with others?	Alert, understanding on top of new techniques & Philosophy
		✓			EQUIPMENT: Is equipment used in an appropriate manner? Are necessary repairs reported immediately? Is appropriate care taken with equipment?	As far as I know reasonable caution used

[redacted] 03-18-99

Employee's initials Date

SECTION II

Rater should list any **STRENGTHS** of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

[redacted] does a good job as a dispatcher. He has a well rounded background w/ his dispatching duties, EMS and fire, not to mention his current training as a Reserve Officer. Chief Lewis

SECTION III

Rater should list any **DEFICIENCIES** of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

Rater's Signature Darrell Lewis Date 2-18-99

Darrell Lewis 3/18/99

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signatu [redacted] **Date** 03-18-99

[redacted]

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

February 4, 1999

MEMO TO: All Police Department Personnel

SUBJECT: Employee Evaluations

Attached is a copy of the City's Employee Evaluation Form for 1998. Each employee of the department will be evaluated based on the parameters of their job duties.

This form being presented to you is to be completed by each employee. Your supervisor will complete a separate evaluation form. In turn, your supervisor will submit his/her completed evaluation to me and I will then schedule a time to go over your evaluations with you. At that time, you will be required to bring your completed evaluation form to the meeting that I schedule with you.

Any comments that I add to your evaluations will be done so on the form submitted by your supervisor.

You should have your forms completed as soon as possible as the evaluation meetings will begin on February 20, 1999.

If you have any questions with regard to this process, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

CITY OF CONNEAUT

EMPLOYEE EVALUATION

INSTRUCTIONS FOR EMPLOYEE:

Attached is the Employee Evaluation Form that will be used by your supervisor in evaluating your performance over the past year. Evaluate yourself on how you feel you have undertaken your job duties over the past year. This accomplishes two purposes, first it familiarizes you with the form and its contents and secondly; it prepares you to constructively discuss your evaluation with your supervisor. It is very important to note that this process is to improve the overall performance of you as an employee by objectively and constructively reviewing any areas that need improvement and to expound on the areas in which you excel. This is an opportunity to talk about yourself, and your job directly with your supervisor. A specific appointment will be set up with your supervisor for your evaluation. The meeting will be as informal as possible to insure that you have an opportunity to comment on each aspect of the evaluation.

To be effective, it is essential that this process be taken seriously and that you clearly think about your own strengths and weaknesses. The evaluation completed by your supervisor and your own self evaluation will be placed in your personnel file. The goal of the evaluations is to improve the delivery of local government services to our community, which is a goal shared by City Council, the City Administrative Staff and employees.

If you have any questions concerning the evaluation, please feel free to contact your supervisor.

Thank you for your anticipated cooperation.

Sincerely,



Robert Herron
City Manager

RDH/pb
Enclosure

CITY OF CONNEAUT
PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classification [redacted]

Department Police Payroll Number [redacted]

Rating Period 1/1/98 - 12/31/98 Date Completed 02-04-99

Completed by [redacted]

Employee self evaluation yes

TYPE OF REVIEW

_____ End Probation ✓ Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

5 **OUTSTANDING:** Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

4 **ABOVE AVERAGE:** Employee's performance is above or exceeds job requirements.

3 **SATISFACTORY:** The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

2 **MARGINAL:** The employee's performance doesn't consistently meet the normal job requirements or expectations. Employee needs to improve job performance to insure satisfactory performance throughout the entire year.

1 **UNSATISFACTORY:** The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

Rating					General Factor	Comments
5	4	3	2	1		
	X				QUANTITY: Is the amount of work generated by the employee expected by all employees in the same classification. Employee's complete duties should be taken into consideration.	I Feel I AM ABOVE Average Due to The NUMBER OF Calls ON [redacted]
		X			QUALITY: Is work completed accurate, neat, thorough, timely, well-organized, and applicable to the duties of the employee.	
	X				WORKING RELATIONSHIPS: Does the employee have positive working relationships with other employees? Contributes to the group effort of the department the employee works in.	I feel that I have A good relationship with Almost Every Employee in the Department.
	X				PUBLIC CONTACTS: Helpful, useful, tactful, and projects a professional image when in contact with the general public, either on duty or off duty.	I feel that I Am Always Courteous to the public Both on And off Duty
		X			PLANNING/ORGANIZATION: Work is planned out thoughtfully, and in an organized fashion, stays with said plan and will implement any changes to the plan if situations demand.	
		X			ACCEPTS RESPONSIBILITY: Accepts job responsibility, does not pass blame, admits failure and correction, acts in a responsible manner during performance of duties.	I feel that I have MADE improvements in this Area Over the past year.

[redacted] 03-09-09

Employee's initials Date

Rating					General Factor	Comments
5	4	3	2	1		
		X			ACCEPTS DIRECTION: Accepts direction from supervisors, department heads, and/or administrative personnel, does not challenge all directives, accepts direction without complaining to fellow employees.	This has been the focus of my improvement over the past year and I feel I have made significant gains.
		X			INITIATIVE: Are suggestions made by the employee? Does employee exercise initiative in job duties and performance? Is constructive criticism offered by the employee?	
	X				JUDGEMENT: Is judgement consistent and reliable? Does poor judgement continue after instructing? Does employee's judgement effect fellow employees?	I feel that ~~the~~ my job necessitates good judgement.
		X			SAFETY: Is the employee conscientious about safety? Does the employee take reasonable precautions when handling equipment and/or working with others?	
		X			EQUIPMENT: Is equipment used in an appropriate manner? Are necessary repairs reported immediately? Is appropriate care taken with equipment?	

[redacted] 02-04-99

Employee's initials Date

SECTION II

Rater should list any **STRENGTHS** of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

SECTION III

Rater should list any **DEFICIENCIES** of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

Rater's Signature [redacted] Date 03-18-99

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature [redacted] **Date** 03-04-99

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 22, 1997

MEMO TO: Robert Herron, City Manager

SUBJECT: Six Month Probation Completed by Dispatcher [redacted]

Dear Mr. Herron:

On [redacted] completed his six month probationary period.

Please find his self-evaluation form, along with the evaluation form which I have completed, enclosed.

At this time, I am recommending that [redacted] be granted his permanent appointment as a Dispatcher for the Conneaut Police Department.

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

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

RECEIVED
DEC 22 1997
CITY MANAGER'S OFFICE

CITY OF CONNEAUT
PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classification [redacted]

Department Police Payroll Number _____

Rating Period: from 1-1-96 to 12-31-96 Date Completed 12/18/97

Completed by Rocco N. Russo, Chief of Police

TYPE OF REVIEW

✓ End Probation _____ Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

5 **OUTSTANDING:** Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

4 **ABOVE AVERAGE:** Employee's performance is above or exceeds job requirements.

3 **SATISFACTORY:** The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

2 **MARGINAL:** The employee's performance doesn't consistently meet the normal job requirements or expectations. Employee needs to improve job per- formance to insure satis- factory performance throughout the entire year.

1 - **UNSATISFACTORY:** The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

Rating					General Factor	Comments
5	4	3	2	1		
		✓			QUANTITY: Is the amount of work generated by the employee expected by all employees in the same classification. Employee's complete duties should be taken into consideration.	Yes, [redacted] has not been given extra duties such as Leads etc., but he does work one of the more busy shifts.
		✓			QUALITY: Is work completed accurate, neat, thorough, timely, well-organized, and applicable to the duties of the employee.	[redacted] work is generally completed on time. He appears to be organized in the performance of his dispatching duties.
	✓				WORKING RELATIONSHIPS: Does the employee have positive working relationships with other employees? Contributes to the group effort of the department the employee works in.	Yes [redacted] interacts effectively w/others and appears to get along with other employees.
		✓			PUBLIC CONTACTS: Helpful, useful, tactful, and projects a professional image when in contact with the general public, either on duty or off duty.	[redacted] generally demonstrates a professional attitude in his contacts with the public. In answering the phones [redacted] always identifies the dept., sometimes could identify himself
		✓			PLANNING/ORGANIZATION: Work is planned out thoughtfully, and in an organized fashion, stays with said plan and will implement any changes to the plan if situations demand.	[redacted] planning as a dispatcher is limited to the scope of his duties. He does appear to have plans in place on how to handle various situations or calls when they present themselves.
		✓			ACCEPTS RESPONSIBILITY: Accepts job responsibility, does not pass blame, admits failure and correction, acts in a responsible manner during performance of duties.	For the most part [redacted] acts responsibly, but sometimes he does stray from policy in his performance.

[redacted] 12-18-97

Employee's Initials Date

Rating					General Factor	Comments
5	4	3	2	1		
		✓			ACCEPTS DIRECTION: Accepts direction from supervisors, department heads, and/or administrative personnel, does not challenge all directives, accepts direction without complaining to fellow employees.	[redacted] accepts direction, At times I sense if the response is not what he is looking for he appears to display his disappointment readily.
	✓				INITIATIVE: Are suggestions made by the employee? Does employee exercise initiative in job duties and performance? Is constructive criticism offered by the employee?	yes yes yes - [redacted] has made suggestions concerning dispatch, and he has made several good suggestions.
		✓			JUDGEMENT: Is judgement consistent and reliable? Does poor judgement continue after instructing? Does employee's judgement effect fellow employees?	Yes no yes - Particularly, since he is the first person to gather information on a call. This can be critical for officers safety.
	✓				SAFETY: Is the employee conscientious about safety? Does the employee take reasonable precautions when handling equipment and/or working with others?	yes yes
	✓				EQUIPMENT: Is equipment used in an appropriate manner? Are necessary repairs reported immediately? Is appropriate care taken with equipment?	yes yes yes

[redacted] 12-18-97

Employee's initials Date

==========

SECTION II

Rater should list any **STRENGTHS** of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

[redacted] strengths comes from the fact he is eager to learn. He is willing to attend schools and training to enhance his abilities.

SECTION III

Rater should list any **DEFICIENCIES** of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

[redacted] deficiencies lie in his tendency to do things in a fashion that may represent his way. It is not generally a hindrance, but he does stray away from policy at times.

==========

Rater's Signature [signature] Date 12/18/97

==========

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature [redacted] Date 12-18-97

CITY OF CONNEAUT
PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classification [redacted]

Department Police Payroll Number [redacted]

Rating Period: from 1-1-97 to 12-31-97 Date Completed 12-18-97

Completed by _____

TYPE OF REVIEW

X End Probation _____ Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

5 **OUTSTANDING:** Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

4 **ABOVE AVERAGE:** Employee's performance is above or exceeds job requirements.

3 **SATISFACTORY:** The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

2 **MARGINAL:** The employee's performance doesn't consistently meet the normal job requirements or expectations. Employee needs to improve job per- formance to insure satis- factory performance throughout the entire year.

1 **UNSATISFACTORY:** The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

Rating					General Factor	Comments
5	4	3	2	1		
X					QUANTITY: Is the amount of work generated by the employee expected by all employees in the same classification. Employee's complete duties should be taken into consideration.	
	X				QUALITY: Is work completed accurate, neat, thorough, timely, well-organized, and applicable to the duties of the employee.	I Need to Be Slightly Neater/ Typo/ Spelling
		X			WORKING RELATIONSHIPS: Does the employee have positive working relationships with other employees? Contributes to the group effort of the department the employee works in.	Lynn and I Do Not get Along. But I Do with All of the other Employees
X					PUBLIC CONTACTS: Helpful, useful, tactful, and projects a professional image when in contact with the general public, either on duty or off duty.	
X					PLANNING/ORGANIZATION: Work is planned out thoughtfully, and in an organized fashion, stays with said plan and will implement any changes to the plan if situations demand.	
	X				ACCEPTS RESPONSIBILITY: Accepts job responsibility, does not pass blame, admits failure and correction, acts in a responsible manner during performance of duties.	

[redacted] 12-18-97

Employee's Initials Date

Rating					General Factor	Comments
5	4	3	2	1		
			X		ACCEPTS DIRECTION: Accepts direction from supervisors, department heads, and/or administrative personnel, does not challenge all directives, accepts direction without complaining to fellow employees.	I tend to argue A little.
	X				INITIATIVE: Are suggestions made by the employee? Does employee exercise initiative in job duties and performance? Is constructive criticism offered by the employee?	
X					JUDGEMENT: Is judgement consistent and reliable? Does poor judgement continue after instructing? Does employee's judgement effect fellow employees?	
X					SAFETY: Is the employee conscientious about safety? Does the employee take reasonable precautions when handling equipment and/or working with others?	
X					EQUIPMENT: Is equipment used in an appropriate manner? Are necessary repairs reported immediately? Is appropriate care taken with equipment?	

[redacted] 12-18-97

[redacted]oye's initials Date

==========

SECTION II

Rater should list any **STRENGTHS** of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

SECTION III

Rater should list any **DEFICIENCIES** of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

==========

Rater's Signature [redacted] Date 12-18-97

==========

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature [redacted] **Date** 12-11-97

c:\wp\document\evaluate.pg3

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 22, 1997

MEMO TO: Julia Sanger, Finance Director

SUBJECT: End of Probationary Period for [redacted]

Dear Julie:

I am writing to advise you that [redacted] has completed his six month probationary period effective [redacted]

As per the contract with the [redacted] and the City of Conneaut, Article 7, Clothing Allowance, the contract allows for a new dispatcher to receive one half of their uniform allowance upon completion of their probationary period. Additionally, Article 28, Probationary Period, allows for the dispatcher, upon completion of their probationary period, to increase their salary by $.50 per hour.

Should you have any questions with regard to this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo

Rocco N. Russo
Chief of Police

RNR/las

cc: Robert Herron, City Manager

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 11, 1997

MEMO TO: [redacted], Dispatcher

SUBJECT: Employee Evaluation

Dear [redacted]:

In reviewing your appointment letter of [redacted] I discovered an error as the letter indicates that you will be placed on a one year probationary period. This period should actually be for six months, and thus your probationary period ended on [redacted]

As with all individuals on probation, I am required to complete an employee evaluation before I am able to make a recommendation for permanent appointment. I have, therefore, enclosed a Performance Evaluation Form which you are to complete as a self-evaluation.

I am scheduling an appointment for you to be in my office on Thursday, December 18, 1997 at 3:30 p.m. to go over your performance evaluation. If you have any questions on how to complete the evaluation form, please feel free to contact my office.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

cc: Robert Herron, City Manager

Enclosure

RECEIVED
DEC 11 1997
CITY MANAGER'S OFFICE

ROBERT HERRON
CITY MANAGER



Ohio's Sharpest Corner

A Resort Area

City of Conneaut

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

[redacted]

Mr. [redacted]
Conneaut Police Department
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

I am writing to indicate that you have successfully completed your six month probationary period for the position of [redacted] for the City of Conneaut Police Department.

Effective [redacted] you are hereby granted your permanent appointment as [redacted]. This appointment is being made based on your probationary evalution and after a recommendation from the Chief of Police. Please note that City Ordinance requires that you reside within the City limits of Conneaut during your tenure with the City

Congratulations, and I will look forward to continuing to work with you.

Sincerely,

Robert Herron
City Manager

RDH/pb

cc: Chief Russo
Finance/Payroll
Civil Service

c:\wp\employee\cleveland.per

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (216) 593-6291
Fax (216) 593-6966

[redacted]

MEMO TO: Robert Herron, City Manager

SUBJECT: Permanent Part-time Appointment of [redacted]

Dear Mr. Herron:

I am writing to advise you that [redacted], who is employed as a [redacted], has successfully completed his six month probation period.

I am recommending that he be appointed to a permanent part-time position.

If you have any questions with regard to this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

RECEIVED
MAY 16 1997
CITY MANAGER'S OFFICE

ROBERT HERRON
CITY MANAGER



Ohio's Sharpest Corner

A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

[redacted]

[redacted]
Conneaut City Police Dept.
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

This letter is to appoint you effective [redacted] as a temporary and provisional dispatcher in the City Police Department. This temporary appointment is due to the temporary leave of absence created by Gayle Gurto.

Your rate of pay will be $7.49 per hour. Mrs. Gurto expects to return to work on September 1, 1997, at which time your appointment would end. Due to the fact that this is a temporary appointment, you will not receive health insurance benefits or PERS pick-up. You will report to the Police Chief and he will provide you with your shift schedule.

Congratulations and I look forward to continuing to work with you.

Sincerely,

Robert Herron
City Manager

RH/pb

cc: Chief Russo
Finance Department

CITY OF CONNEAUT

PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classification [redacted]

Department POLICE Payroll Number

Rating Period: from 1/1/96 to 12/31/96 Date Completed 2/19/97

Completed by LT. R. ZIMMERMAN

TYPE OF REVIEW

End Probation ANNUAL Annual Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

E. EXCELLENT: Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

M. MEETS: The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

A. ABOVE: Employee's performance is above or exceeds job requirements.

B. BELOW: The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

RATING				GENERAL FACTOR	COMMENTS
E	A	M	B		
	X			QUANTITY: IS THE AMOUNT OF WORK PERFORMED IN THE JAIL FACILITY EXPECTED BY ALL EMPLOYEES IN THE SAME CALSSIFICATION. EXAMPLE: LAUNDRY, CLEANING IN GENERAL AND ANY OTHER DUTIES ASSOCIATED WITH THE JAIL ASSIGNMENT.	[redacted] has Almost always Come Above what is Considered to be the Average Amt of work Performed by CO's in our Facility
	X			QUALITY: ARE BOOKING FORMS AND OTHER DOCUMENTATION COMPLETED IN A NEAT, THOROUGH, WELL-ORGANIZED MANNER AND APPLICABLE TO THE JAIL ASSIGNMENT. ARE FINGER-PRINT CARDS DONE PROPERLY. ARE INCIDENT REPORTS DONE IF REQUIRED	[redacted] Paperwork is always neatly done and well-organized. will never hesitate to fill out an incident Report when needed
	X			WORKING RELATIONSHIPS. DOES THE EMPLOYEE HAVE A POSITIVE WORKING RELATIONSHIP WITH OTHER CORRECTIONS OFFICERS, POLICE OFFICERS, DISPATCHERS. DOES THE EMPLOYEE HAVE A GOOD RELATIONSHIP WITH INMATES.	Seems to Get Along Very well with all Police Personnel as well as Jail inmates
X				SAFETY. DOES THE EMPLOYEE PRACTICE GOOD SAFETY HABITS. IS THE EMPLOYEE CONSCIOUS OF JAIL SECURITY, DOORS BEING SECURED AS WELL AS PROPER HANDLING OF INMATES WITHIN THE JAIL FACILITY (PREPARING FOR COURT OR TRANSPORT TO ANOTHER FACILITY)	has Always exhibited excellent Safety habits regarding Jail Security as well as inmate handling + transportation
	X			ACCEPTS RESPONSIBILITY. ACCEPTS RESPONSIBILITY OF CORRECTIONS OFFICER. ADMITS FAILURE IF AND WHEN IT OCCURS. DOES NOT PASS BLAME.	Accepts his Job responsibilities well + on occasion he was having Difficulty getting to work when scheduled But seems to have Corrected that Problem
	X			EQUIPMENT IS JAIL FACILITY EQUIPMENT USED IN AN APPROPRIATE MANNER. ect... CLEANING ITEMS... HANDCUFFS....COOKING UTENSILS. IF NECESSARY, ARE REPAIRS REPORTED IMMEDIATELY.	[redacted] has always shown a Great Deal of Respect For equipment in the Facility - reporting any needed repairs or areas requiring improvement

RATING				GENERAL FACTOR	COMMENTS
E	A	M	B		
X				INITIATIVE. DOES EMPLOYEE EXERCISE INITIATIVE WHEN WORKING IN JAIL FACILITY. DOES EMPLOYEE REQUIRE SUPERVISION. DOES A SUPERVISOR HAVE TO REVIEW THE EMPLOYEE'S WORK ON A REGULAR BASIS.	I CAN ALWAYS COUNT ON [redacted] WORK BEING DONE PROPERLY - I HAVE NEVER FELT THE NEED TO HAVE TO SUPERVISE his WORK ETHICS
X				JUDGEMENT. WHILE IN THE JAIL FACILITY DOES THE EMPLOYEE DEMONSTRATE GOOD JUDGEMENT. CAN THE EMPLOYEE MAKE SOUND DECISIONS WHEN FACED WITH AN EMERGENCY SITUATION. ect...combative or hostile inmate.	[redacted] HAS ALWAYS EXHIBITED GOOD JUDGEMENT. I HAVE NEVER QUESTIONED his JUDGEMENT. I FEEL he COULD REACT WELL IN AN EMERGENCY SITUATION.
		X		RULES & REGULATIONS IS THE EMPLOYEE FAMILIAR WITH AND KNOWLEDGEABLE OF THE JAIL FACILITY RULES & REGULATIONS MANUAL.	TO MY KNOWLEDGE [redacted] IS FAMILIAR WITH THE JAIL RULES & REGULATIONS

==========

SECTION II
Rater should list any STRENGTHS of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

[redacted] PERFORMS HIS JOB IN A VERY PROFESSIONAL MANNER.

SECTION III
Rater should list any DEFICIENCIES of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

NONE- other than the problem mentioned in section DEALING with "ACCEPTS RESPONSIBILITY" CONCERNING PERIODS OF TIME when he would not show up for work AS SCHEDULED - But also - this problem seems to have been erased.

==========

Rater's Signature J.T.R. Zimmerman **Date** 2/19/97 3/7/97

==========

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature [redacted] **Date** 3-7-97

CITY OF CONNEAUT

EMPLOYEE EVALUATION

INSTRUCTIONS FOR EMPLOYEE:

Attached is the Employee Evaluation Form that will be utilized by your supervisor in evaluating your performance over the past year. Evaluate yourself on how you feel you have undertaken your job duties over the past year. This accomplishes two purposes, first it familiarizes you with the form and its contents and secondly; it prepares you to constructively discuss your evaluation with your supervisor. It is very important to note that this process is to improve the overall performance of you as an employee by objectively and constructively reviewing any areas that need improvement and to expound on the areas in which you excel. It is an opportunity to talk about yourself, and your job directly with your supervisor. A specific appointment will be set up with your supervisor for your evaluation. The meeting will be as informal as possible to insure that you have an opportunity to comment on each aspect of the evaluation.

To be effective, it is essential that this process be taken seriously and that you clearly think about your own strengths and weaknesses. The evaluation completed by your supervisor and your own self evaluation will be placed in your personnel file. The goal of the evaluations is to improve the delivery of local government services to our community, which is a goal shared by City Council, The City Administrative Staff and employees.

If you have any questions concerning the evaluation, please feel free to contact your supervisor.

Thank you for your anticipated cooperation.

Sincerely,
THE CITY OF CONNEAUT

Robert Herron
City Manager

RDH:lc
Enclosure

CITY OF CONNEAUT

PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classification [redacted]

Department Police Payroll Number [redacted]

Rating Period: from _____ to 2-6-97 Date Completed 2-6-97

Completed by [redacted]

Employee Self Evaluation _____ X GR
(please initial)

TYPE OF REVIEW

_____ End Probation X Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

E. *EXCELLENT:* Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

M. *MEETS:* The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

A. *ABOVE:* Employee's performance is above or exceeds job requirements.

B. *BELOW:* The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

RATING				GENERAL FACTOR	COMMENTS
E	A	M	B		
X				QUANTITY: IS THE AMOUNT OF WORK PERFORMED IN THE JAIL FACILITY EXPECTED BY ALL EMPLOYEES IN THE SAME CALSSIFICATION. EXAMPLE: LAUNDRY, CLEANING IN GENERAL AND ANY OTHER DUTIES ASSOCIATED WITH THE JAIL ASSIGNMENT.	
X				QUALITY: ARE BOOKING FORMS AND OTHER DOCUMENTATION COMPLETED IN A NEAT, THOROUGH, WELL-ORGANIZED MANNER AND APPLICABLE TO THE JAIL ASSIGNMENT. ARE FINGER-PRINT CARDS DONE PROPERLY. ARE INCIDENT REPORTS DONE IF REQUIRED	
	X			WORKING RELATIONSHIPS. DOES THE EMPLOYEE HAVE A POSITIVE WORKING RELATIONSHIP WITH OTHER CORRECTIONS OFFICERS, POLICE OFFICERS, DISPATCHERS. DOES THE EMPLOYEE HAVE A GOOD RELATIONSHIP WITH INMATES.	
X				SAFETY. DOES THE EMPLOYEE PRACTICE GOOD SAFETY HABITS. IS THE EMPLOYEE CONSCIOUS OF JAIL SECURITY, DOORS BEING SECURED AS WELL AS PROPER HANDLING OF INMATES WITHIN THE JAIL FACILITY (PREPARING FOR COURT OR TRANSPORT TO ANOTHER FACILITY)	
X				ACCEPTS RESPONSIBILITY. ACCEPTS RESPONSIBILITY OF CORRECTIONS OFFICER. ADMITS FAILURE IF AND WHEN IT OCCURS. DOES NOT PASS BLAME.	
X				EQUIPMENT IS JAIL FACILITY EQUIPMENT USED IN AN APPROPRIATE MANNER. ect... CLEANING ITEMS... HANDCUFFS....COOKING UTENSILS. IF NECESSARY, ARE REPAIRS REPORTED IMMEDIATELY.	

RATING				GENERAL FACTOR	COMMENTS
E	A	M	B		
X				INITIATIVE. DOES EMPLOYEE EXERCISE INITIATIVE WHEN WORKING IN JAIL FACILITY. DOES EMPLOYEE REQUIRE SUPERVISION. DOES A SUPERVISOR HAVE TO REVIEW THE EMPLOYEE'S WORK ON A REGULAR BASIS.	
X				JUDGEMENT . WHILE IN THE JAIL FACILITY DOES THE EMPLOYEE DEMON STRATE GOOD JUDGEMENT. CAN THE EMPLOYEE MAKE SOUND DECISIONS WHEN FACED WITH AN EMERGENCY SITUATION. ect...combative or hostile inmate.	
X				RULES & REGULATIONS IS THE EMPLOYEE FAMILIAR WITH AND KNOWLEDGEABLE OF THE JAIL FACILITY RULES & REGULATIONS MANUAL.	

==========

SECTION II
Rater should list any STRENGTHS of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

SECTION III
Rater should list any DEFICIENCIES of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

Attendance

==========

Rater's Signature [redacted] Date 2-6-97

==========

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature_____ Date_____

CITY POLICY

PROCEDURES AND INSTRUCTIONS FOR ON-THE-JOB INJURIES

1) All work related injuries must be reported by the employee to the supervisor immediately following the incident (or by a co-worker if employee is not able).

   All injuries that require medical treatment will be fully investigated by the Department Head.

2) The Supervisor/Department Head will see that the injured employee is transported to receive the initial appropriate medical attention, if necessary. Our primary concern is to ensure that the employee received prompt medical attention.

   While ensuring the employee's right to choose his/her medical provider, the City will direct all injured employees to the Brown Memorial Hospital Emergency Room for prompt medical Attention and/or referral to an appropriate specialist.

3) All injures employees must complete an injury/accident report as soon as possible following the incident or initial medical treatment.

4) All employees seeking outside medical treatment with the exception of medical emergencies, must obtain a physician report from their Department Head or Finance/Personnel Office before leaving for medical treatment.

   It is the employee's responsibility to keep his/her Department Head informed of any and all medical providers from whom treatment is administered for the work-related injury.

   In cases of ongoing medical treatment, it is the employee's responsibility to keep his/her Department Head updated with all subsequent medical appointments and must request that their physician call/or provide the Department Head with a status report.

5) All employees must report to the Department Head immediately after receiving the initial medical treatment to submit the Physician Report and to complete the appropriate workers' compensation claim form. The only exception is a medical condition that prevents your return and in that case a phone call is required. Medical proof of the exception will be required upon return to work.

6) Forms contained in the "on-the-job injury" packet are to be completed as follows:

   A) Incident Report
   B) Medical Release
   C) BWC Claim Form -
      "First Report of an Injury, Occupational Disease or Death"

D) Physician Report Form to be taken to initial medical treatment and returned in person following the treatment.

7) It is the employee's responsibility to inform any and all medical providers of your assigned claim number upon receipt of same from the Bureau of Workers' Compensation. This is necessary in order for related fee bills to be properly submitted and considered for payment by the Bureau.

8) Any employee who is unable to return to his/her regular work may be assigned to alternative or light duty work within prescribed medical restrictions based on availability and physical capabilities at the discretion of the City Manager.

This policy shall take immediate effect.

Robert Herron, City Manager Date: 9-25-96

****

I hereby certify that the above City's Policy on Procedure and Instructions for Work Related Injuries/Diseases has been provided to me. I fully understand this policy and certify that I will follow the policy to the fullest extent. I hereby acknowledge receipt of a copy of this policy.

[redacted] Date: 10-8-96

[redacted] Signature

Witness Signature

CITY OF CONNEAUT'S
LIGHT DUTY WORK POLICY

Whereas, it is in both the City's and employees' interest to provide, when appropriate and available, temporary light duty work for employees unable to immediately return to their regular work due to injury; and

Whereas, in the past the City has allowed temporary light duty at the request of injured employees when it was appropriate and available; and

Whereas, in connection with the City's Policy regarding Procedures and Instructions for On-The-Job Injures, the City adopts the following policy regarding alternative or light duty work:

1) At the sole discretion of the City Manager, an employee who is unable to return to his/her regular work due to an injury, may be offered the option of temporary alternative or light duty work within prescribed medical restrictions.

2) Such alternative or light duty work, when offered, is intended to be of a temporary nature designed to provide a transitional period for those employees whom it is expected will be able to eventually return to his/her regular duties upon recovery.

3) The availability and duration of temporary alternative or light duty will be determined at the sole discretion of the City Manager.

4) An employee who chooses to accept assignment to temporary alternative or light duty work will receive his/her current hourly rate of pay.

5) An employee who declines an offer of temporary alternative or light duty may continue to use available sick time accrued due to employment with the City. However, an employee who has applied or might apply for lost time benefits through the Bureau of Worker's Compensation may be jeopardizing said benefits by refusing the proffered temporary alternative or light duty work.

6) Nothing contained within this Policy shall be construed as a contract, either expressed or implied, between the City and its employees, or as imposition of any obligation upon the City. This Policy is intended to provide guidance and information regarding the City's Light Duty Work program. The City expressly reserves its right to amend or revoke all or any portion of this Policy at will.

This Policy shall take immediate effect.

Robert Herron, City Manager

Date: 10-11-96

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (216) 593-6291
Fax (216) 593-6966

October 11, 1996

MEMO TO: Robert Herron, City Manager

SUBJECT: Part time Dispatcher Candidates

Dear Mr. Herron

On October 8, 1996, interviews for prospective part time dispatchers candidates were held. The interview panel consisted of Dispatcher Kathleen Bailey, Sgt. Jon Arcaro and myself.

As a result of the interviews, the order of the candidates was ranked from first place to sixth place. I am requesting that at least four positions be appointed to part time dispatch. The top candidates are listed in order as follows:

1 [redacted]
2 Mary Marvin
3 Doris Tackett
4 Donna Smith
5 Jack Martilla
6 Paul Stewart

I would appreciate it if the top four people would be appointed as part time dispatchers contingent upon passing a medical examination, background investigation and training. Lastly, they must serve a six month probationary period.

I would be happy to discuss these appointments with you, prior to any appointments being made.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

ROBERT HERRON
CITY MANAGER



Ohio's Sharpest Corner

A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

May 6, 1996

Mr. [redacted]
Conneaut Police Department
294 Main Street, City Hall Building
Conneaut, OH 44030

Dear [redacted]:

I am writing to indicate that you have successfully completed your six month probationary period for the position of Corrections Officer for the City of Conneaut Police Department.

Effective [redacted] you are hereby granted your permanent appointment as a part-time Corrections Officer.

Also, please note that, this appointment was made after your probationary period evaluation of April 22, 1996, conducted by Sergeant Zimmerman.

Congratulations, and I will look forward to continuing to work with you.

Sincerely,
THE CITY OF CONNEAUT

Robert Herron
City Manager

RDH/pb

cc: Chief Russo
Finance Office
Civil Service

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (216) 593-6291
Fax (216) 593-6966

May 3, 1996

MEMO TO: Robert Herron, City Manager

SUBJECT: Permanent Appointment for [redacted]

Dear Mr. Herron:

On [redacted] who has been hired as a part-time corrections officer will have completed his six month probation period.

I am recommending that he be appointed to a permanent part-time position as his job performance has been within guidelines of the department.

If you have any questions or require anything further, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

RECEIVED
MAY - 3 1996
CITY MANAGER'S OFFICE

CITY OF CONNEAUT

PERFORMANCE EVALUATION AND/OR REVIEW

Employee Nam[redacted] Classification [redacted]

Department Police Payroll Number _____

Rating Period: from ~~1-1-95 to 12-31-95~~ 11/6/95 - 5/6/96 Date Completed _____

Completed by Self

TYPE OF REVIEW

✓ End Probation _____ Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

5 **OUTSTANDING:** Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

4 **ABOVE AVERAGE:** Employee's performance is above or exceeds job requirements.

3 **SATISFACTORY:** The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

2 **MARGINAL:** The employee's performance doesn't consistently meet the normal job requirements or expectations. Employee needs to improve job performance to insure satisfactory performance throughout the entire year.

1 **UNSATISFACTORY:** The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

Rating					General Factor	Comments
5	4	3	2	1		
		X			QUANTITY: Is the amount of work generated by the employee expected by all employees in the same classification. Employee's complete duties should be taken into consideration.	PERFORMS AMT OF WORK ASSOCIATED WITH & DEMANDED OF the POSITION
		X			QUALITY: Is work completed accurate, neat, thorough, timely, well-organized, and applicable to the duties of the employee.	FOR the MAJORITY OF the time -YES- ON A FEW OCCASIONS PORTIONS OF [redacted] FORMS HAVE not been DONE completely
	X				WORKING RELATIONSHIPS: Does the employee have positive working relationships with other employees? Contributes to the group effort of the department the employee works in.	[redacted] APPEARS to HAVE A GOOD WORKING RELATIONSHIP WITH OFFICERS - IS A "TEAM PLAYER" - SHOWS CONCERN FOR HIS JOB
	X				PUBLIC CONTACTS: Helpful, useful, tactful, and projects a professional image when in contact with the general public, either on duty or off duty.	IS ALWAYS HELPFUL & VERY PROFESSIONAL ACTING ON DUTY. I CANNOT COMMENT ABOUT OFF DUTY
	X				PLANNING/ORGANIZATION: Work is planned out thoughtfully, and in an organized fashion, stays with said plan and will implement any changes to the plan if situations demand.	IS VERY ORGANIZED, IS WILLING & ABLE to INSTITUTE CHANGES WHEN NECESSARY
		X			ACCEPTS RESPONSIBILITY: Accepts job responsibility, does not pass blame, admits failure and correction, acts in a responsible manner during performance of duties.	PERFORMS JOB DUTIES IN A RESPONSIBLE MANNER. IS WILLING to LISTEN AND ACCEPTS ADVICE & DIRECTION WELL

[redacted] 4-22-96

Employee's Initials Date

Rating					General Factor	Comments
5	4	3	2	1		
		X			ACCEPTS DIRECTION: Accepts direction from supervisors, department heads, and/or administrative personnel, does not challenge all directives, accepts direction without complaining to fellow employees.	ADDRESSED IN PREVIOUS SECTION
		X			INITIATIVE: Are suggestions made by the employee? Does employee exercise initiative in job duties and performance? Is constructive criticism offered by the employee?	FEW SUGGESTIONS TO DATE BUT DOES EXERCISE INITIATIVE WORKS WELL ON HIS OWN
	X				JUDGEMENT: Is judgement consistent and reliable? Does poor judgement continue after instructing? Does employee's judgement effect fellow employees?	JUDGEMENT IS VERY RELIABLE & CONSISTENT AS OF YET I HAVE SEEN NO EVIDENCE OF POOR JUDGEMENT EFFECT ON FELLOW EMPLOYEES ?
		X			SAFETY: Is the employee conscientious about safety? Does the employee take reasonable precautions when handling equipment and/or working with others?	HANDLES PRISONERS & EQUIPMENT PER REGULATIONS
		X			EQUIPMENT: Is equipment used in an appropriate manner? Are necessary repairs reported immediately? Is appropriate care taken with equipment?	LOOKED PREVIOUSLY

[redacted] [redacted] 4-22-96

Employee's initials Date

==========

SECTION II

Rater should list any **STRENGTHS** of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

to reiterate: FOR A NEW C.O. - [redacted] DOES A VERY GOOD JOB- I DO not FEEL I HAVE to LOOK OVER his SHOULDER. IF he HAS A QUESTION he is not AFRAID to ASK it- IF he SEES SOMETHING he FEELS NEEDS ATTENTION he is not AFRAID to MAKE SOMEONE IN A HIGHER POSITION AWARE OF it. [redacted] being a relatively new employee has done very well as a Correction Officer. He works well w/ fellow employees and the inmates. I believe he will be a good correction officer.

SECTION III

Rater should list any **DEFICIENCIES** of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

NO REAL DEFICIENCIES other than AS I STATED PREVIOUSLY - ON OCCASION I HAVE noticed some AREAS of BOOKING FORMS have not been FILLED out completely.

==========

Rater's Signature Sgt K. Zimmerman Date 4/18/96

==========

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature [redacted] Date 4-22-96

CITY OF CONNEAUT

PERFORMANCE EVALUATION AND/OR REVIEW

Employee Name [redacted] Classification [redacted]

Department Police Payroll Number [redacted]

Rating Period: from ~~1-1-95 to 12-31-95~~ 11/5/96 – 5/26/96 Date Completed _____

Completed by _____

Employee self evaluation X

TYPE OF REVIEW

✓ End Probation _____ Annual _____ Promotional

INSTRUCTIONS: Rater should check each factor in the appropriate column using the following Rating Identification.

RATING IDENTIFICATION

5 **OUTSTANDING:** Performance is above and beyond expectations of other employee's in the same classification. Performance is superior.

4 **ABOVE AVERAGE:** Employee's performance is above or exceeds job requirements.

3 **SATISFACTORY:** The employee's performance meets the normal job requirements. Employee's performance is at the level expected.

2 **MARGINAL:** The employee's performance doesn't consistently meet the normal job requirements or expectations. Employee needs to improve job performance to insure satisfactory performance throughout the entire year.

1 **UNSATISFACTORY:** The employee's performance falls below levels of expectation, or generally fails to meet job requirements and thus improvement is needed.

Rating					General Factor	Comments
5	4	3	2	1		
	X				QUANTITY: Is the amount of work generated by the employee expected by all employees in the same classification. Employee's complete duties should be taken into consideration.	
		X			QUALITY: Is work completed accurate, neat, thorough, timely, well-organized, and applicable to the duties of the employee.	
X					WORKING RELATIONSHIPS: Does the employee have positive working relationships with other employees? Contributes to the group effort of the department the employee works in.	
	X				PUBLIC CONTACTS: Helpful, useful, tactful, and projects a professional image when in contact with the general public, either on duty or off duty.	
		X			PLANNING/ORGANIZATION: Work is planned out thoughtfully, and in an organized fashion, stays with said plan and will implement any changes to the plan if situations demand.	
	X				ACCEPTS RESPONSIBILITY: Accepts job responsibility, does not pass blame, admits failure and correction, acts in a responsible manner during performance of duties.	

[redacted] 4-22-96

Employee's initials Date

Rating					General Factor	Comments
5	4	3	2	1		
		X			ACCEPTS DIRECTION: Accepts direction from supervisors, department heads, and/or administrative personnel, does not challenge all directives, accepts direction without complaining to fellow employees.	
		X			INITIATIVE: Are suggestions made by the employee? Does employee exercise initiative in job duties and performance? Is constructive criticism offered by the employee?	
	X				JUDGEMENT: Is judgement consistent and reliable? Does poor judgement continue after instructing? Does employee's judgement effect fellow employees?	
	X				SAFETY: Is the employee conscientious about safety? Does the employee take reasonable precautions when handling equipment and/or working with others?	
	X				EQUIPMENT: Is equipment used in an appropriate manner? Are necessary repairs reported immediately? Is appropriate care taken with equipment?	

[redacted] 4-2296

Employee's initials Date

==========

SECTION II

Rater should list any **STRENGTHS** of the rated employee that, in the opinion of the rater, demonstrates performance over and above the normal job duties and has not been rated in SECTION I above.

I ASK for help when I Am unsure of what Do Do in unfamiliar Situations

---

SECTION III

Rater should list any **DEFICIENCIES** of the rated employee that, in the opinion of the rater, demonstrates performance below normal job duties and has not been rated in SECTION I above.

==========

Rater's Signature [redacted] Date 4-22-96

==========

I certify that this review has been reviewed with me. I have had the opportunity to discuss and respond in writing to any comment listed herein. My signature may not indicate agreement with this review.

COMMENTS:

Employee's Signature [redacted] Date 4-22-96

Conneaut City Police

Serving Since 1902

Michael Bertolasio
Acting Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: michaelbertolasio@conneautpd.com

Letter of Commendation – [redacted]

Date: September 24, 2025
To: [redacted]
From: Acting Chief Michael Bertolasio
Subject: Commendation for Investigative Excellence

Dear [redacted],

This letter serves to formally commend your outstanding investigative work following the incident on September 20, 2025; #[redacted]. Your analytical skill, attention to detail, and commitment to uncovering the facts were critical to the progress of the case.

Your professionalism and dedication to justice reflect the highest standards of this department and are deeply appreciated.

Please accept this commendation in recognition of your exemplary service.

Respectfully,
Michael ~~Bertolasio~~

Acting Chief
Conneaut Police Department

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2025 New Hire ✓Change __Separation
Employee Name [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$28.85	$30.33	per Contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___ Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature [redacted]

Supervisor Signature Micha Colby, dir

Payroll Clerk Signature _____

CITY OF CONNEAUT DIRECT DEPOSIT FORM

THIS SECTION MUST BE FILLED OUT BY YOUR BANK:

NAME OF CITY EMPLOYEE [redacted]

TYPE OF ACCOUNT **CHECKING** **SAVINGS** (CIRCLE ONE)

RTN [redacted]

ACCT. NUMBER [redacted]

BANK EMPLOYEE FILLING OUT INFORMATION [redacted]

NAME OF BANK

CONTACT NUMBER

ALL INFORMATION MUST BE LEGIBLE

THIS SECTION TO BE FILLED OUT BY EMPLOYEE:

EMPLOYEE EMAIL ADDRESS: [redacted]

YOUR STUB WILL BE EMAILED TO YOU EACH PAY!

I AUTHORIZE THE CITY OF CONNEAUT TO START DIRECT DEPOSIT OF MY PAYCHECK TO THE ACCOUNT LISTED ABOVE.

[redacted]

EM[redacted]EE SIGNATURE (MUST BE LEGIBLE) 09-10-2004 DATE

[redacted]

PRINTED NAME

I WILL NOT CLOSE THE ABOVE ACCOUNT UNTIL I HAVE INFORMED THE FINANCE OFFICE TO STOP MY DIRECT DEPOSIT OR CHANGE IT TO ANOTHER ACCOUNT.

REQUESTS TO STOP DIRECT DEPOSIT MUST BE MADE IN WRITING NOT LATER THAN THE PAY ENDING DATE (THE FRIDAY BEFORE PAYDAY).

ALL INFORMATION ABOVE MUST BE FILLED OUT!

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2023 __New Hire ✓Change __Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number XXX-XX [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$27.74	$28.29	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature [redacted] [redacted]

Supervisor Signature Micha Cooley, clerk

Payroll Clerk Signature _____

CONNEAUT AREA CITY SCHOOLS

"Home of the Spartans"

Lori A. Riley, Superintendent



November 22, 2022

[redacted]

RE: INSURANCE BENEFITS

Dear [redacted]

You recently contacted our office to provide verification of insurance coverage for your husband and your children. Your family coverage was effective 10/01/2021 and it includes the following dependents:

[redacted]

Please let us know if you should need additional information.

Sincerely,

Abbie Brockway

Abbie Brockway
Assistant to the Treasurer

/ab

230 Gateway Avenue, Suite B
Conneaut OH 44030

Phone: 440-593-7200
FAX: 440-593-6253
Website: www.cacsk12.org

We are an equal opportunity employer who fully and actively supports equal access for all people, regardless of Race, Color, Religion, Gender, Age, Sexual Orientation, National Origin or Disability. We support the hiring and advancement of all minorities.

Health Benefits Buy-Out
Election Form

To be eligible for Health, Dental and Vision Buy-Out, other coverage must be provided by another Employer Benefit Plan through your Spouse. When both Employee and Spouse work for the City of Conneaut, the following rules apply:
1) Employee and Spouse, no other dependents: Both employees will each be covered under a single policy
2) Employee , Spouse and dependents: Both employees will be covered by <u>one</u> Family Contract.
Both Employees working for the City of Conneaut does not qualify as eligible for the Buy-Out option.

Section A: EMPLOYEE MUST COMPLETE THIS FORM

Employee Name: [redacted] Social Security # [redacted]

I request waiver of health benefits for the following persons on my coverage with City of Conneaut:

Name	Birthdate	Relationship	Name	Birthdate	Relationship
[redacted]					

All persons will be covered by employer coverage offered by: [redacted]

.....

Section B: YOU MUST PROVIDE A COPY OF YOUR ALTERNATE INSURANCE CARD WITH YOUR NAME ON IT THAT SHOWS CURRENT COVERAGE.

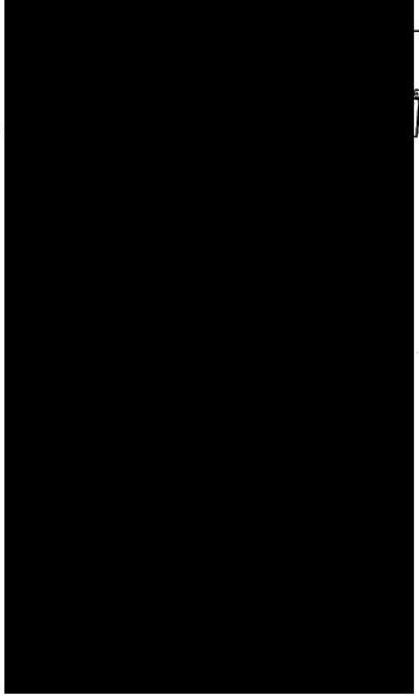
ALL the above listed persons are covered by our medical plan through the following insurance company: [redacted]

Employee Printed Name [redacted]

Employee Signature: [redacted] Date: 11-15-24

NOTE: Buy-Out option will take effect the first of the month following receipt of the completed election form.
Date received by City of Conneaut _____

THIS FORM WILL NEED TO BE FILLED OUT EACH YEAR TO PARTICIPATE.



HSA PAYROLL DEDUCTION

I [redacted] authorize the City of Conneaut Finance Office to deduct [redacted] per pay to be deposited to my HSA Account.

I understand that this deduction is pretax and will start with the pay ending 06-04-2021.

This deduction can be rescinded at any time by filling out a copy of this form with -0- as the amount to deduct.

[redacted]
Printed Name

[redacted]
Signature

06-01-21
Date

MELLON BANK _____

OTHER BANK(IF ACCOUNT HAS BEEN MOVED) _____

NAME AND ADDRESS OF OTHER BANK AND ACCT NUMBER

_____

_____

_____

3-30-2021 - Found out [redacted] was an Evidence Technician
Effective 6-3-2019 to 3-26-2021 - extra $.25/hour

	# of weeks	Regular Hours	Regular Pay Owed	OT Hours (not DEA)	OT Pay Owed	OT Hours total
2019	30	1200	$300.00	57	$21.38	179
2020	52	2080	$520.00	11	$4.13	460.5
2021	13	520	$130.00	0	$0.00	127
TOTALS			**$950.00**		**$25.50**	

paid P/E 4-23-2021

2021 EMPLOYEE ATTENDANCE CALENDAR

Absence Codes	
[T] Tardy	[H] Holiday
[P] Partial Hrs. Worked	[L] Layoff
[ ] _____	[V] Vacation

Red number denotes unexcused absence.

Black number denotes excused absence.

No.	Reason
1.	Lack of work
2.	Sick (Employee)
3.	Family sickness
4.	Accident -self or family - out of plant
5.	Plant injury
6.	Personal
7.	Discipline
8.	Leave of absence
9.	Transportation
10.	No call / No show
11.	Death (family)
12.	Jury/Court

No.	Reason
13.	Birthday
14.	Military
15.	Weather
16.	Medical Appt.
17.	FMLA
18.	Termination
19.	Left Early
20.	Suspension
21.	Unexcused
22.	_____
23.	_____
24.	_____
25.	_____

Name: _____

Employee #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ SS# _____

Dept. _____ Birth Date: _____

Position: _____ Hire Date: _____

Vacation Time: _____

JANUARY

S	M	T	W	T	F	S	Total
					1	2	1
3	4	5	6	7	8	9	2
10	11	12	13	14	15	16	3
17	18	19	20	21	22	23	4
24 31	25	26	27	28	29	30	5

FEBRUARY

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	6
7	8	9	10	11	12	13	7
14	15	16	17	18	19	20	8
21	22	23	24	25	26	27	9
28							

MARCH

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	10
7	8	9	10	11	12	13	11
14	15	16	17	18	19	20	12
21	22	23	24	25	26	27	13
28	29	30	31				

APRIL

S	M	T	W	T	F	S	Total
				1	2	3	
4	5	6	7	8	9	10	
11	12	13	14	15	16	17	
18	19	20	21	22	23	24	
25	26	27	28	29	30		

MAY

S	M	T	W	T	F	S	Total
						1	
2	3	4	5	6	7	8	
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28	29	
30	31						

JUNE

S	M	T	W	T	F	S	Total
		1	2	3	4	5	
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
20	21	22	23	24	25	26	
27	28	29	30				

JULY

S	M	T	W	T	F	S	Total
				1	2	3	
4	5	6	7	8	9	10	
11	12	13	14	15	16	17	
18	19	20	21	22	23	24	
25	26	27	28	29	30	31	

AUGUST

S	M	T	W	T	F	S	Total
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30	31					

SEPTEMBER

S	M	T	W	T	F	S	Total
			1	2	3	4	
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30			

OCTOBER

S	M	T	W	T	F	S	Total
					1	2	
3	4	5	6	7	8	9	
10	11	12	13	14	15	16	
17	18	19	20	21	22	23	
24 31	25	26	27	28	29	30	

NOVEMBER

S	M	T	W	T	F	S	Total
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28	29	30					

DECEMBER

S	M	T	W	T	F	S	Total
			1	2	3	4	
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30	31		

2020

T = Tardy
P = Partial hrs. Worked
H = Holiday
L = Layoff
V = Vacation

* Red number denotes unexcused absence.
* Black number denotes excused absence.

#	Reason
1	Lack of Work
2	Sick (Employee)
3	Family Sickness
4	Accident – self or family – not at work.
5	Work Injury
6	Personal
7	Discipline
8	Leave of Absence
9	Transportation
10	Unknown (AWOL)

#	Reason
11	Death (Family)
12	Jury - Court
13	Birthday
14	Military
15	Weather
16	Medical
17	Dental
18	Recognition
19	
20	
21	

Employee Name & #: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ SSN: _____

Dept. _____ DOB: _____

Position: _____ Hired: _____

January

S	M	T	W	T	F	S
			1	2	3	4 1
5	6	7	8	9	10	11 2
12	13	14	15	16	17	18 3
19	20	21	22	23	24	25 4
26	27	28	29	30	31	

February

S	M	T	W	T	F	S
						1 5
2	3	4	5	6	7	8 6
9	10	11	12	13	14	15 7
16	17	18	19	20	21	22 8
23	24	25	26	27	28	29 9

March

S	M	T	W	T	F	S
1	2	3	4	5	6	7 10
8	9	10	11	12	13	14 11
15	16	17	18	19	20	21 12
22	23	24	25	26	27	28 13
29	30	31				

April

S	M	T	W	T	F	S
			1	2	3	4 14
5	6	7	8	9	10	11 15
12	13	14	15	16	17	18 16
19	20	21	22	23	24	25 17
26	27	28	29	30		

May

S	M	T	W	T	F	S
					1	2 18
3	4	5	6	7	8	9 19
10	11	12	13	14	15	16 20
17	18	19	20	21	22	23 21
24 31	25	26	27	28	29	30 22

June

S	M	T	W	T	F	S
	1	2	3	4	5	6 23
7	8	9	10	11	12	13 24
14	15	16	17	18	19	20 25
21	22	23	24	25	26	27 26
28	29	30				

July

S	M	T	W	T	F	S
			1	2	3	4 27
5	6	7	8	9	10	11 28
12	13	14	15	16	17	18 29
19	20	21	22	23	24	25 30
26	27	28	29	30	31	

August

S	M	T	W	T	F	S
						1 31
2	3	4	5	6	7	8 32
9	10	11	12	13	14	15 33
16	17	18	19	20	21	22 34
23 30	24 31	25	26	27	28	29 35

September

S	M	T	W	T	F	S
		1	2	3	4	5 36
6	7	8	9	10	11	12 37
13	14	15	16	17	18	19 38
20	21	22	23	24	25	26 39
27	28	29	30			

October

S	M	T	W	T	F	S
				1	2	3 40
4	5	6	7	8	9	10 41
11	12	13	14	15	16	17 42
18	19	20	21	22	23	24 43
25	26	27	28	29	30	31 44

November

S	M	T	W	T	F	S
1	2	3	4	5	6	7 45
8	9	10	11	12	13	14 46
15	16	17	18	19	20	21 47
22	23	24	25	26	27	28 48
29	30					

December

S	M	T	W	T	F	S
		1	2	3	4	5 49
6	7	8	9	10	11	12 50
13	14	15	16	17	18	19 51
20	21	22	23	24	25	26 52
27	28	29	30	31		

2019

T = Tardy
P = Partial hrs. Worked
H = Holiday
L = Layoff
V = Vacation

* Red number denotes unexcused absence.
* Black number denotes excused absence.

#	Reason
1	Lack of Work
2	Sick (Employee)
3	Family Sickness
4	Accident -- self or family -- not at work.
5	Work Injury
6	Personal
7	Discipline
8	Leave of Absence
9	Transportation
10	Unknown (AWOL)

#	Reason
11	Death (Family)
12	Jury - Court
13	Birthday
14	Military
15	Weather
16	Medical
17	Dental
18	Recognition
19	
20	
21	

Employee Name & #: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ SSN: _____

Dept. _____ DOB: _____

Position: _____ Hired: _____

January

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

February

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

March

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24 31	25	26	27	28	29	30

April

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June

S	M	T	W	T	F	S
						1
2	3 HD	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23 30	24	25	26	27	28	29

1
2
3
4

July

S	M	T	W	T	F	S
	1	2	3	4	5	6 5
7	8	9	10	11	12	13 6
14	15	16	17	18	19	20 7
21	22	23	24	25	26	27 8
28	29	30	31			

August

S	M	T	W	T	F	S
				1	2	3 9
4	5	6	7	8	9	10 10
11	12	13	14	15	16	17 11
18	19	20	21	22	23	24 12
25	26	27	28	29	30	31 13

September

S	M	T	W	T	F	S
1	2	3	4	5	6	7 14
8	9	10	11	12	13	14 15
15	16	17	18	19	20	21 16
22	23	24	25	26	27	28 17
29	30					

October

S	M	T	W	T	F	S
		1	2	3	4	5 18
6	7	8	9	10	11	12 19
13	14	15	16	17	18	19 20
20	21	22	23	24	25	26 21
27	28	29	30	31		

November

S	M	T	W	T	F	S
					1	2 22
3	4	5	6	7	8	9 23
10	11	12	13	14	15	16 24
17	18	19	20	21	22	23 25
24	25	26	27	28	29	30 26

December

S	M	T	W	T	F	S
1	2	3	4	5	6	7 27
8	9	10	11	12	13	14 28
15	16	17	18	19	20	21 29
22	23	24	25	26	27	28 30
29	30	31				

2019 Overtime Hours paid as of 12-31-2019

Activity	Date	Officer	Worked Hours	Comments
	[redacted]	[redacted]	4	[redacted] - Sgt Gerics on Vacation
			4	- Ptlm DeLisle on Vacation
			4	- Ptlm Patriarco on Vacation
			4	- Assault Call Out
			1	- Assault Investigation
			4	- Manpower
			3	- Ptlm Rose off Sick
			4	- Ptlm Rivers Bereavement
			1	- School Threats
			4	- Sgt Mackensen off Sick
			2	shift - Report & Recovery - Stolen Property
LEADS Certification			1	
5K Run			4	
D-Day			2.5	
D-Day			3.5	
D-Day			11	shift
			57	

2019 Overtime Hours paid as of 12-31-2019

Activity	Date	Officer	Worked Hours	Comments
	[redacted]	[redacted]	4	[redacted]Gerics on Vacation
			4	[redacted] DeLisle on Vacation
			4	[redacted] Patriarco on Vacation
			4	[redacted]ault Call Out
			1	[redacted]ault Investigation
			4	[redacted]power
			3	[redacted] Rose off Sick
			4	[redacted] Rivers Bereavement
			1	[redacted]ol Threats
			4	[redacted]Mackensen off Sick
			2	[redacted] Report & Recovery - Stolen Property
LEADS Certification			1	
OD Reports **QRT Grant**			2	
Overdose Follow Up List **QRT**			1	
Overdose Reports & List **QRT**			3	
Re-Intvw Witns & OD Rpts **QRT**			3	
Overdose Rpts & Mapping **QRT**			2	
Overdose Rpts & QRT List **QRT**			3	
5K Run			4	
OD List & Grant Reporting **QRT**			2	
QRT Grant Application **QRT**			4	
Trial Prep for OD Death **QRT**			3	
OD FU List & Reports **QRT**			4	
D-Day			2.5	
D-Day			3.5	
D-Day			11	
Safe Schools Meeting **QRT**			1	
Drug Purchase **QRT**			4	
Search Warrant **QRT**			2	
Life Skills Class CHS **QRT**			2	
QRT OD List **QRT**			2	

2019 Overtime Hours paid as of 12-31-2019

Activity	Date	Officer	Worked Hours	Comments
Interdiction Target List **QRT**	[redacted]	[redacted]	5	[redacted]
Finish Report **QRT**			4	
Reporting & Grant **QRT**			4	
Account & Billing Set Up **QRT**			4	
QRT Interdiction **QRT**			3	
QRT Life Skill **QRT**			1	
QRT Life Skills Class **QRT**			1	
Follow up & Arrest **QRT**			1	
Report **QRT**			4	
Report & Stats **QRT**			4	
Report / Interviews **QRT**			6	
Meth Lab **QRT**			4	
QRT Billing **QRT**			4	
Search Warrant **QRT**			5.5	
Evidence / Report **QRT**			4	
QRT List **QRT**			2	
Search Warrant **QRT**			2	
Meth Lab Report **QRT**			3	
QRT List & Billing **QRT**			2	n)
2016 OD Death **QRT**			5.5	m)
QRT			2	n)
Report **QRT**			3	n)
Search Warrant **QRT**			2	n)
Report **QRT**			2	n)
QRT List **QRT**			2	n)
Extra Patrol New Years Eve **QRT**			4	
			179	

2020 Overtime Hours paid as of 12-31-2020

Activity	Date	Officer	Worked Hours	Comments
	[redacted]	[redacted]	3	[redacted]ch Warrant for Vehicle
			2	[redacted]ch Warrant on Vehicle
			2	[redacted]ch Warrant Cell phone
			1	[redacted]Jury Trial - Thorr
			3	[redacted]Jury Trial - Hodges
			11	

2020 Overtime Hours paid as of 12-31-2020

Activity	Date	Officer	Worked Hours	Comments
	[redacted]	[redacted]	3	[redacted]
			2	
			2	
			1	
			3	
Assist with OD Death **QRT**			3	
QRT Overdose List **QRT**			2	
Grand Jury - Ownes **QRT**			1	
Interview Sus - Fulton County - **QRT**			2	
SW 471 Liberty Street - **QRT**			2	
Report & Evidence **QRT**			4	
Report **QRT**			2	
QRT List **QRT**			2	
Evidence Log **QRT**			2	
Overdose Grant Paperwork *QRT**			2	
Search Warrant & Report **QRT**			3	
19-1678 - DNA & Report **QRT**			2	
Search Warrant & Report **QRT**			1	
SW Report **QRT**			3	
Gun/Drug Destruction **QRT**			8	
SW - 302 Cleveland **QRT**			2	
Report / Book Prisoner **QRT**			1	
List & Reports ***QRT***			2	
Transfer Prisoner from FL ***QRT***			16	
QRT Reimbursement ***QRT***			2	
OD Follow up List ***QRT***			2	
Trial Prep Shawn Smith ***QRT***			1	
Prisoner Transport ***QRT***			3	
Trial Prep Shawn Smith ***QRT***			2	
Blitz/Arrest/Paperwork ***QRT***			8	
Trial Prep - 16-0021 - ***QRT***			2	
Warrant and Report ***QRT***			11	
Grand Jury ***QRT***			1	
Drug Distruction ***QRT***			3	
Grant Reimbursement ***QRT***			2	

2020 Overtime Hours paid as of 12-31-2020

Activity	Date	Officer	Worked Hours	Comments
Policy Update ***QRT***	[redacted]	[redacted]	2	[redacted]
Interview Victim ***QRT***			3	
Drug Distruction ***QRT***			2	
COVID 19 **QRT**			4	
COVID 19 **QRT**			4	
COVID 19 **QRT**			4	
COVID 19 **QRT**			12	
COVID 19 **QRT**			16	
COVID 19 **QRT**			4	
Set up for Food Giveaway **QRT**			2	
OD Reimbursements **QRT**			2	
Evidence Submission **QRT**			1	
Evidence Review **QRT**			3	
Drug Destruction **QRT**			2	
QRT			2	
Drug Destruction **QRT**			2	
Report **QRT**			2	
Report **QRT**			4	
Report **QRT**			2	
Grant Re-application **QRT**			2	
Drugs to Lab **QRT**			2	
Report / Investigation **DEA**			2	
Grant Re-Application **DEA**			2	
OD List **DEA**			1	
Arrest Report **DEA**			1	
OD Report **DEA**			1	
Arrest / Report **DEA**			3	
OD List **DEA**			2	
Grant Re-Application **DEA**			1	
DEA Assist			12	
DEA Assist			2	
Trial Prep - Noble **DEA**			4	
Cell Phone Search **DEA**			2	
Ashtabula Protest **DEA**			7.5	
Report / Search Warrant **DEA**			3	

2020 Overtime Hours paid as of 12-31-2020

Activity	Date	Officer	Worked Hours	Comments
Trafficking Report **DEA**	[redacted]	[redacted]	4.5	[redacted]
Trafficking Interview **DEA**			1.5	
Case Prep **DEA**			2	
Evidence & Case Prep **DEA**			2	
Forensic Interview **DEA**			1	
Typo Interview **DEA**			2	
DEA			3	
Search Warrant **DEA**			2	
Trial Prep **DEA**			1	
Follow Up Report **DEA**			3	
Survelliance **DEA**			2	
Search Warrant Report **DEA**			2	
Trial Prep **DEA**			2	
Drug House Nuisance **DEA**			2	
Sex Assault Investigation **DEA**			2	
Furmage F/U Trial Prep **DEA**			2	
Young Trial Prep & Phone Search **DEA*			2	
OD List **DEA**			2	
Warrant Arrest **DEA**			3	
CSB & Report **DEA**			2	
Court / CMC - Poff ***DEA***			3	
Grand Jury - Arndt ***DEA***			3	
Sex Assault Meeting ***DEA***			3	
OD List ***DEA***			3	
Search Warrant & Report ***DEA***			2	
Report ***DEA***			1	
Search Warrant ***DEA***			4	
Evidence Room ***DEA***			4	
Arrest - Fugitive Task Force ***DEA***			6	
Protest **DEA**			3	
Protest **DEA**			4	
Reports **DEA**			1	
Trans Prisoner from UHHS Geauga **DEA**			4	
Process Vehicle **DEA**			2	
Photo Pack **DEA**			2	

2020 Overtime Hours paid as of 12-31-2020

Activity	Date	Officer	Worked Hours	Comments
OD List **DEA**	[redacted]	[redacted]	1	[redacted]
Report **DEA**			1	
Surveillance **DEA**			4	
Board Up 471 Liberty St **DEA**			2	
DEA Admin **DEA**			4	
Range **DEA**			2	
OD Task Force Zoom Meeting **DEA**			2	
Furmage Trial **DEA**			2	
Furmage Trial **DEA**			3	
Furmage Trial **DEA**			3	
BCI Evidence Review **DEA**			2	
Grand Jury - Furmage **DEA**			1	
ODTF Reporting **DEA**			2	
Arrest & Report **DEA**			2	
Report **DEA**			4	
Search Warrant - I8 - 20-0038 **DEA**			4	
Search Warrant - I8-20-0042 **DEA**			4	
Search Warrant - Root Road **DEA**			2	
Report - Aggravated Trafficking **DEA**			2	
I8-21-0001 - Search Warrant **DEA**			1	
Callout for Prosecution Trial Prep **DEA**			3	
Report **DEA**			1	
Report **DEA**			1	
Interview/Surveillance **DEA**			3	
Report (20-1290) **DEA**			2	
Surveillance - GF-I8-19-4011 **DEA**			4	
Controlled Delivery **DEA**			2	
Report **DEA**			1	
I8-21-0011 - Search Warrant **DEA**			7	
Report **DEA**			1	
Report **DEA**			1	
Admin **DEA**			3	
Report **DEA**			1	
Report **DEA**			1	
Report **DEA**			1	

2020 Overtime Hours paid as of 12-31-2020

Activity	Date	Officer	Worked Hours	Comments
Report (20-1241) **DEA**	[redacted]		1	[redacted]
Report (20-1272) **DEA**			1	
Evidence Training **DEA***			2	
Evidence Training **DEA***			4	
Evidence Training **DEA***			2	
Report (20-1404) **DEA**			4	
OD List **DEA**			3	
Search Warrant (I8-19-0052) **DEA**			4	
Search Warrant (I8-19-0052) **DEA**			4	
Equipment Return **DEA**			2	
Trial Prep Lautanan **DEA**			3	
OD List **DEA**			3	
Buy Bust I8-21-0026 **DEA			3	
Evidence to Lab **DEA**			1	
Training **DEA**			1	
Assist CEAAC w/warrants **DEA**			4	
OD Report & Arrest **DEA**			2	
OD Report / Search Warrant **DEA**			2	
Grand Jury Trial Prep **DEA**			6	
Report **DEA**			2	
Search Warrant **DEA**			2	
Interview Report **DEA**			2	
Forensic Interview **DEA**			2	
Report **DEA**			4	
			460.5	

2021 Overtime Hours paid as of 3-26-2021

Activity	Date	Officer	Worked Hours	Comments
Search Warrant **DEA**	[redacted]	[redacted]	2	[redacted]
Clan Lab Refresher **DEA**			2	
Report - 20-1513 **DEA**			2	
FB Search Warrant - 20-1513 **DEA**			2	
FB Search Warrant - 20-1514 **DEA**			2	
Search Warrant Prep - 20-1513 **DEA**			6	
SW & Interview - 20-1513 **DEA**			4	
Cell Phone Search - 20-1490 **DEA**			1	
Report #20-1456 **DEA**			2	
Report #20-1456 **DEA**			2	
OD List **DEA**			2	
Report #20-1413 **DEA**			2	
Subpoena Results - #20-0629 **DEA**			1	
Interview - #20-1424 **DEA**			4	
Interview - #20-1516 **DEA**			2	
Polygraph - #20-1516 **DEA**			4	
Cellphone Review - #20-0629 **DEA**			2	
Training in London OPOTA **DEA**			12	
Evidence Training **DEA**			2	
Surveillance - GFI84015 **DEA**			2	
Evidence & Training **DEA**			2	
Search Warrant - #21-0105 **DEA**			2	
Search Warrant - #21-0121 **DEA**			2	
Search Warrant - #21-0105 **DEA**			4	
Report #21-0124 **DEA**			2	
Report #21-0106 **DEA**			2	
Interview - #21-0105 **DEA**			2	
Interview - #20-1486 **DEA**			4	
Report #21-0093 **DEA**			2	
Search Warrant - #21-0121 **DEA**			2	
Search Warrant - #21-0105 **DEA**			2	
OD List **DEA**			2	
Interview **DEA**			2	
Interview - #20-1456 **DEA**			3	
#21-0093 **DEA**			2	
Interview - #20-1514 **DEA**			4	

2021 Overtime Hours paid as of 3-26-2021

Activity	Date	Officer	Worked Hours	Comments
OD List **DEA**	[redacted]	[redacted]	2	[redacted]
Interview - #21-0107 **DEA**			2	
Search Warrant - #21-0105 **DEA**			2	
Death Investigation - #21-0207 **DEA**			9	
Report - #21-0207 **DEA**			2	
Report - #21-0107 **DEA***			2	
Search Warrant Review - #21-0121 **DEA**			2	
Court - Mitchell **DEA**			1	
Report #21-0226 **DEA**			2	
Report #20-1275 to Prosecutor **DEA**			2	
Report #21-0207 **DEA**			2	
Range **DEA**			2	
			127	

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 6-3-19 (3-27-21)
Employee Name [redacted] (Last) [redacted] (First) [redacted] (M.I.) ___ __New Hire ✓Change Separation

Social Security Number XXX-XX [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$26.56	$26.81	Evidence Tech - 25¢/hr inc
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature _____

Supervisor Signature Micha Colby, Chief

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2021 __New Hire ✓Change Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$26.04	$26.56	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature _____

Supervisor Signature Micha Colby, Chief

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 6-3-2020 __New Hire __Change __Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ____Full Time ____Part Time ____Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
✓Other	Uniform Allow/Maint (Balance)		$825.00

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature [redacted]

Supervisor Signature Melissa Cooley, Chief

Payroll Clerk Signature _____

HSA PAYROLL DEDUCTION

I [redacted] authorize the City of Conneaut Finance Office to deduct [redacted] per pay to be deposited to my HSA Account.

I understand that this deduction is pretax and will start with the pay ending [redacted].

This deduction can be rescinded at any time by filling out a copy of this form with -0- as the amount to deduct.

[redacted]
Printed Name

[redacted]
Signature

04.03.2020
Date

MELLON BANK _____

OTHER BANK(IF ACCOUNT HAS BEEN MOVED) [redacted]

NAME AND ADDRESS OF OTHER BANK AND ACCT NUMBER

_____

_____

_____

SICK LEAVE BANK DONATION FORM

Name [redacted] Employee Number [redacted]

Department Police Position [redacted]

Home Address [redacted]

Telephone: Home [redacted]
Work [redacted]

By signing this form, I voluntarily donate two (2) days (16 hours) (48 hours for IAFF Local 651 members) of my sick/vacation/personal (circle one) leave days to the Sick Leave Bank. I understand that this donation is irrevocable and any request to utilize the sick leave bank will be considered in compliance with any Collective Bargaining Agreement, personnel policies, any the policies established by the Sick Leave Bank Committee.

Employee Signature [redacted]

RETURN THIS FORM TO THE OFFICE OF THE CITY FINANCE DIRECTOR

turned in to late .... eligible again in Sept (?)

HSA PAYROLL DEDUCTION

I [redacted] authorize the City of Conneaut Finance Office to deduct [redacted] per pay to be deposited to my HSA Account.

I understand that this deduction is pretax and will start with the pay ending [redacted].

This deduction can be rescinded at any time by filling out a copy of this form with -0- as the amount to deduct.

[redacted]
Printed Name

[redacted]
Signature

04.03.20
Date

MELLON BANK _____

OTHER BANK(IF ACCOUNT HAS BEEN MOVED) [redacted]

NAME AND ADDRESS OF OTHER BANK AND ACCT NUMBER

_____

_____

_____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2020 __New Hire ✓Change __Separation
Employee Name [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$25.53	$26.04	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature [redacted]

Supervisor Signature Melissa Colley, Clerk

Payroll Clerk Signature _____

Ashtabula County Sheriff's Department

William R. Johnson
Sheriff

25 W. JEFFERSON ST.
JEFFERSON, OHIO 44047

Non Emergency (440) 576-9046
Emergency 911
FAX (440) 576-5915

June 14, 2019

RECEIVED
JUN 17 2019
BY: _____

Conneaut Police Department
294 Main Street
Conneaut OH 44030

ATTENTION: Payroll

RE: [redacted] – Sick Time/Vacation

Please be advised that [redacted] had 1544.40 sick time hours available when he resigned from this department.

He was accruing vacation at the rate of 7.7 hours per pay, 200 hours per year, according to OPBA contract.

Sincerely,

William R. Johnson
Sheriff

CC: [redacted]

Conneaut City Police

Serving Since 1902

Michael Colby
Chief of Police

294 Main St.
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966
Email: mcolby@conneautpd.com

[redacted]

City of Conneaut Finance Dept

This is to advise that [redacted] (Employee [redacted]) has been hired into the [redacted]

Please begin paying [redacted] the phone stipend of $22.00 per month.

Sincerely,

Michael Colby
Chief of Police

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2023 __New Hire ✓Change Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$27.74	$28.29	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___ Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature [redacted]

Supervisor Signature Micha Cooley, clerk

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2022 New Hire ✓Change __Separation
Employee Name [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip
Telephone: ( ) _____
Status: ___Full Time ___Part Time ___Other _____
Job Title: _____ ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$26.81	$27.74	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
Voluntary Separation ___ Involuntary Separation ___ Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave (Explain Fully) _____

Additional
Comments _____

Employee Signature _____

Supervisor Signature _____

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-1-2024 New Hire ✓Change Separation
Employee Name [redacted]
Last First M.I.

Social Security Number XXX-XX-[redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address
Street City State Zip
Telephone: ( )
Status: ___Full Time ___Part Time ___Other
Job Title: ___Salaried ___Hourly ___W-4 Received

Change(s) for current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
✓Wage Increase	$28.29	$28.85	per contract
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
__Other			

Separation Separation Date ___ Last Day Worked ___ Last Pay Date ___
Voluntary Separation ___ Involuntary Separation ___ Notice of Cobra Rights provided on ___
Election of Cobra ___Yes ___No Start Date for Coverage ___
If yes, describe type of coverage elected ___

Leave of Absence Begin Leave ___ Return from Leave ___
Reason for Leave (Explain Fully) ___

Additional
Comments ___

Employee Signature [redacted]

Supervisor Signature Michael Colby, Chief

Payroll Clerk Signature ___

City of Conneaut

Finance Department

294 Main Street, Conneaut, Ohio 44030

Julie Sanger
Finance Director
Lawrence Gasch
Income Tax Administrator

John Williams, CPA
Assistant Finance Director
Victoria Jackson
Income Tax/Payroll

Finance: (440) 593-7416
Income Tax: (440) 593-7418
Fax: (440) 593-6908
Email: connfinance@suite224.net

[redacted] My records indicate that [redacted], employee , is currently making ~~9.5400~~ 10.04 AS OF 12/9/97 per hour.

Please fill in the new rate per hour here 10.34.

I will contact you if we do not agree on the amount.

Thank you for your help with this.

[redacted]
[redacted] Signature

Supervisor Signature

Payroll Clerk Signature

\\JULIE\C\LETTERS\LETTRHD5.FOR

ROBERT HERRON
CITY MANAGER



Ohio's Sharpest Corner

A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

April 11, 1997

Mr. [redacted]
Conneaut City Police Dept.
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

This letter is to appoint you effective [redacted] as a temporary and provisional [redacted] in the City Police Department. This temporary appointment is due to the temporary leave of absence created by Gayle Gurto.

Your rate of pay will be $7.49 per hour. Mrs. Gurto expects to return to work on September 1, 1997, at which time your appointment would end. Due to the fact that this is a temporary appointment, you will not receive health insurance benefits or PERS pick-up. You will report to the Police Chief and he will provide you with your shift schedule.

Congratulations and I look forward to continuing to work with you.

Sincerely,

Robert Herron
City Manager

RH/pb

cc: Chief Russo
Finance Department

ROBERT HERRON
CITY MANAGER

Ohio's Sharpest Corner A Resort Area

City of Conneaut

City Hall Building
294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7401
Fax (440) 593-6908
E-mail: conneautcityhall@suite224.net

May 13, 1998

Mr. [redacted]
Conneaut Police Department
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

I am writing to indicate that you have successfully completed your six month probationary period for the position of [redacted] for the City of Conneaut Police Department.

Effectiv[redacted] you are hereby granted your permanent appointment as [redacted]. This appointment is being made based on your probationary evalution and after a recommendation from the Chief of Police. Please note that City Ordinance requires that you reside within the City limits of Conneaut during your tenure with the City

Congratulations, and I will look forward to continuing to work with you.

Sincerely,

Robert Herron
City Manager

RDH/pb

cc: Chief Russo
Finance/Payroll
Civil Service

c:\wp\employee\cleveland.per

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 22, 1997

MEMO TO: Julia Sanger, Finance Director

SUBJECT: End of Probationary Period for [redacted]

Dear Julie:

I am writing to advise you that [redacted] has completed his six month probationary period effective [redacted]

As per the contract with the United Steelworkers of America, Local 6698-3 and the City of Conneaut, Article 7, Clothing Allowance, the contract allows for a new dispatcher to receive one half of their uniform allowance upon completion of their probationary period. Additionally, Article 28, Probationary Period, allows for the [redacted], upon completion of their probationary period, to increase their salary by $.50 per hour.

Should you have any questions with regard to this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo

Rocco N. Russo
Chief of Police

RNR/las

cc: Robert Herron, City Manager

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

July 27, 1999

Major Donald G. Goodman
Chairman, LEADS Steering Committee
660 E. Main Street
P.O. Box 7302
Columbus, Ohio 43205-7302

Dear Major Goodman:

My purpose in writing is to advise you that [redacted] is no longer employed by the Conneaut Police Department effective [redacted]

I am requesting that [redacted] name be removed from LEADS and from the list of individuals able to obtain inquiries or information from LEADS.

Should you have any questions concerning this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

cc: Lt. R. Zimmerman, Uniform Div. Commander
Disp. L. Wood, LEADS TAC

Chief R.N. Russo
Conneaut Police Department
294 Main St.
Conneaut, OH 44030

Dear Chief Russo,

As you know, on July 8, I was forced to withdraw my previous resignation dated for [redacted] due to an unforseen problem with my pre-employment testing. The problem has since been corrected and I am now submitting my final letter of resignation. My official start date at the City of Ashtabula Police Department is [redacted] Subsequent to this, I would like my resignation to take effect on [redacted] my last scheduled day would be [redacted]

I would like to take this opportunity to thank you as well as the City Manager for your unprecedented latitiude with regard to the withdrawal of my first resignation. This is just another example of why my tenure at the Conneaut Police Department has been a pleasurable one.

Thank you,

[redacted]

Chief R.N. Russo
Conneaut Police Department
294 Main St.
Conneaut, OH 44030

Dear Chief Russo,

As you know, on July 8, I was forced to withdraw my previous resignation dated for [redacted] due to an unforseen problem with my pre-employment testing. The problem has since been corrected and I am now submitting my final letter of resignation. My official start date at the City of Ashtabula Police Department is [redacted]. Subsequent to this, I would like my resignation to take effect on [redacted] my last scheduled day would b[redacted]

I would like to take this opportunity to thank you as well as the City Manager for your unprecedented latitiude with regard to the withdrawal of my first resignation. This is just another example of why my tenure at the Conneaut Police Department has been a pleasurable one.

Thank you,

[redacted]

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

July 8, 1999

MEMO TO: Robert Herron, City Manager

SUBJECT: Appointment of Lily Batchelor as Dispatcher

Dear Mr. Herron:

With the recent resignation of [redacted] as a [redacted], I am writing to recommend that Lily Batchelor be appointed to fill this vacancy.

Mrs. Batchelor has served as a part-time dispatcher since her appointment on August 20, 1997. She is currently E-911 and LEADS certified and trained as a police, fire and EMS dispatcher.

I am requesting that her appointment be effective July 29, 1999. As a condition of her appointment as full time dispatcher, she must serve a one year probationary period and receive $.50 per hour less than a non-probationary dispatcher for six months, per Article 28 of the Collective Bargaining Agreement between the United Steelworkers of America and the City of Conneaut.

Should you have any questions concerning this matter, please do not hesitate to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

My records indicate that [redacted], employee #0353, is currently making 10.3400 per hour.

Please fill in the new rate per hour to start 1/1/99 here 10.75.

I will contact you if we do not agree on the amount.

Thank you for your help with this.

Supervisor Signature

Payroll Clerk Signature

9-25

O'Leary Dental Group

J. Timothy O'Leary, D.D.S., F.A.C.D.
James J. Mahoney, D.D.S.
Dennis D. Doughty, M.S., D.D.S.
Elizabeth A. Gette, D.M.D.
Richard O'L. Gette, D.M.D.

EMERITI
Joseph T. O'Leary, D.D.S., F.A.C.D.
Bertha P. O'Leary, D.D.S.

Richard A. Gette, D.D.S., F.A.C.D., 1958-1988

FAX TRANSMIS

DATE: 08-25-98

TOTAL PAGES 1

TO: [redacted]

FAX # BEING SENT 1-440-

FROM Susan - 1-814-

SPECIAL INSTRUCTIONS [redacted]

CE
FOR RETURI

[redacted]

my care from [redacted]

and is able to return to wo

Limitations/Remarks:

[redacted]

To: Chief Rocco N. Russo Police
Name of Supervisor Department

CONNEAUT POLICE DEPARTMENT
CONNEAUT, OHIO

ABSENCE REPORT

Name [redacted]

Date of Absence [redacted]

Last Day Worked

Person Reporting Absence Himself

Reported To | By Phone | Messenger | Other Means | Date/Time

REASON FOR ABSENCE
(Check Appropriate Reason)

Accident on Duty ☐ Holiday ☐ Sickness--Self ☐

Accident off Duty ☐ Jury Duty ☐ Vacation ☐

Discipline ☐ Leave of Absence ☐ Unexcused Absence ☐

Death in Family ☐ Sickness in Family ☐ Excused (Other) ☐

Name of Hospital [redacted]

Name of Doctor

Reason for Absence Explained (As required)

Date Report Recorded by
Personnel Dept.

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

July 21, 1998

MEMO TO: Robert Herron, City Manager

SUBJECT: [redacted]

Dear Mr. Herron:

I am requesting that [redacted] be appointed to the [redacted] of the Conneaut Police Department.

I would request that his appointment be contingent on passing a medical physical. [redacted] has successfully completed a psychological evaluation with Thomas P. Lechowich, M.A. [redacted] has also undergone a criminal history check for his position as [redacted].

Once appointed, [redacted] would be assigned to work only with Sgt. Arcaro for a period of one year. He would be given a copy of the department's rules and regulations along with specific rules to the [redacted] of which I have enclosed a copy for you to review.

If this meets with your approval, I would like to appoint him before August 10, 1998 so he will be able to receive his certification from the State of Ohio for his attendance at the Police Academy.

Should you have any questions on this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

Enclosure

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

RESERVE OFFICER REGULATIONS

By accepting a commission of the Conneaut Police Reserve, I agree to abide by the following regulations and the Department Rules and Regulations.

1. You must work a **minimum of twelve (12) hours per month.**
2. You must **follow the rules and regulations** of the police department.
3. The officer you are working with is the lead officer. You are to follow his or her direction and command.
4. You are to ride with Sgt. Arcaro, Field Training Officer, for a period of not less than one year. At that time, the Chief of Police will determine whether you are ready to ride with other officers.
5. You are to only ride and assist the officer you are working with. You are always to ride in **UNIFORM ONLY**. On occasion you may be able to drive the police unit. I will determine if and when that will be possible for you to do so, based on your experience.
6. Your position is non-paid, and your commission will remain in effect as long as you follow the Department's Rules and Regulations and comply with the requirements to work the minimum number of hours.
7. You should be conscious of your conduct both on and off duty, as people will become aware of the fact that you represent Law Enforcement, not only when you are on duty.
8. You will be provided an ID card, badges, manuals and possibly some additional equipment. All of these items are the property of the City of Conneaut and the Conneaut Police Department. These items are to be returned upon your resignation or termination from the Conneaut Reserve Unit.

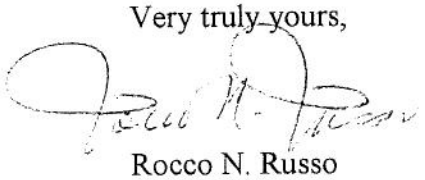
-Continued-

9. **You will NOT BE PERMITTED to carry an off duty firearm.**

10. Lastly, your appointment to the Reserves may be terminated at any time for just cause as deemed by the Chief of Police or his designee in his or her absence.

In closing, if you have any questions concerning these regulations, please feel free to contact me.

Very truly yours,



Rocco N. Russo
Chief of Police

RNR/las

Cc: Robert Herron, City Manager

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

July 17, 1998

MEMO TO: Robert Herron, City Manager

SUBJECT: [redacted]

Dear Mr. Herron:

I am requesting that [redacted] be appointed to the [redacted] of the Conneaut Police Department.

I would request that his appointment be contingent on passing a medical physical. [redacted] has successfully completed a psychological evaluation with Thomas P. Lechowich, M.A. [redacted] has also undergone a criminal history check for his position as [redacted].

Once appointed, [redacted] would be assigned to work only with Sgt. Arcaro for a period of one year. He would be given a copy of the department's rules and regulations along with specific rules to the [redacted], of which I have enclosed a copy for you to review.

If this meets with your approval, I would like to appoint him before August 10, 1998 so he will be able to receive his certification from the State of Ohio for his attendance at the Police Academy.

Should you have any questions on this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

Enclosure

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (216) 593-6291
Fax (216) 593-6966

January 11, 1996

Chief McBride
Lakeland Community College
Mentor, OH 44060

Dear Chief McBride:

I am writing concerning an application for enrollment by [redacted] into the Police Academy at Lakeland Community College.

[redacted] is currently a [redacted] with my department and has been since [redacted] has expressed an interest in law enforcement with his goal set on becoming a police officer. I, therefore, would like to recommend that he be considered for enrollment into the Police Academy.

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

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 11-1-97 ___ New Hire X Change ___ Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. Police

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ ___Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
XOther CERTIFICATE Telecommunicator Training	35.00	40.00	

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments Certificate Pay x1

Employee Signature [redacted]

Supervisor Signature [signature]

Payroll Clerk Signature _____

Conneaut Police Department
294 Main Street, Conneaut, Ohio 44030
(216) 593-6291

October 23, 1997

MEMO TO: [redacted], [redacted]

SUBJECT: [redacted] Training Request for Nov. 10 and 11

Dear [redacted]:

In respect to your recent training request concerning Fire Dispatch Training hosted by the Hudson Police Department, I am approving your request.

However, as per our conversation, the City will pay only the cost of the training which is $199.00. All other costs associated with this schooling will be your responsibility.

As you indicated, the class is on your days off and thus, it should not create a shortage of manpower. I would appreciate that upon completion of the course, you share your knowledge and handout information with your fellow [redacted].

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

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 22, [redacted]

MEMO TO: Julia Sanger, Finance Director

SUBJECT: End of Probationary Period for [redacted]

Dear Julie:

I am writing to advise you that [redacted] has completed his six month probationary period effective [redacted]

As per the contract with the United Steelworkers of America, Local 6698-3 and the City of Conneaut, Article 7, Clothing Allowance, the contract allows for a new [redacted] to receive one half of their uniform allowance upon completion of their probationary period. Additionally, Article 28, Probationary Period, allows for the [redacted], upon completion of their probationary period, to increase their salary by $.50 per hour.

Should you have any questions with regard to this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo

Rocco N. Russo
Chief of Police

RNR/las

cc: Robert Herron, City Manager

Student Name [redacted]

Instructor Name CINDY HERDY FL-C-1100

Date 10/31/97 **Course Type** BASIC TELECOMMUNICATOR I

For Office Use Only
0 0 0 0 0
1 1 1 1 1
2 2 2 2 2
3 3 3 3 3
4 4 4 4 4
5 5 5 5 5
6 6 6 6 6
7 7 7 7 7
8 8 8 8 8
9 9 9 9 9

Final Exam

1	A	B	C	D	E	51	A	B	C	D	E
2	A	B	C	D	E	52	A	B	C	D	E
3	A	B	C	D	E	53	A	B	C	D	E
4	A	B	C	D	E	54	A	B	C	D	E
5	A	B	C	D	E	55	A	B	C	D	E
6	A	B	C	D	E	56	A	B	C	D	E
7	A	B	C	D	E	57	A	B	C	D	E
8	A	B	C	D	E	58	A	B	C	D	E
9	A	B	C	D	E	59	A	B	C	D	E
10	A	B	C	D	E	60	A	B	C	D	E
11	A	B	C	D	E	61	A	B	C	D	E
12	A	B	C	D	E	62	A	B	C	D	E
13	A	B	C	D	E	63	A	B	C	D	E
14	A	B	C	D	E	64	A	B	C	D	E
15	A	B	C	D	E	65	A	B	C	D	E
16	A	B	C	D	E	66	A	B	C	D	E
17	A	B	C	D	E	67	A	B	C	D	E
18	A	B	C	D	E	68	A	B	C	D	E
19	A	B	C	D	E	69	A	B	C	D	E
20	A	B	C	D	E	70	A	B	C	D	E
21	A	B	C	D	E	71	A	B	C	D	E
22	A	B	C	D	E	72	A	B	C	D	E
23	A	B	C	D	E	73	A	B	C	D	E
24	A	B	C	D	E	74	A	B	C	D	E
25	A	B	C	D	E	75	A	B	C	D	E
26	A	B	C	D	E	76	A	B	C	D	E
27	A	B	C	D	E	77	A	B	C	D	E
28	A	B	C	D	E	78	A	B	C	D	E
29	A	B	C	D	E	79	A	B	C	D	E
30	A	B	C	D	E	80	A	B	C	D	E
31	A	B	C	D	E	81	A	B	C	D	E
32	A	B	C	D	E	82	A	B	C	D	E
33	A	B	C	D	E	83	A	B	C	D	E
34	A	B	C	D	E	84	A	B	C	D	E
35	A	B	C	D	E	85	A	B	C	D	E
36	A	B	C	D	E	86	A	B	C	D	E
37	A	B	C	D	E	87	A	B	C	D	E
38	A	B	C	D	E	88	A	B	C	D	E
39	A	B	C	D	E	89	A	B	C	D	E
40	A	B	C	D	E	90	A	B	C	D	E
41	A	B	C	D	E	91	A	B	C	D	E
42	A	B	C	D	E	92	A	B	C	D	E
43	A	B	C	D	E	93	A	B	C	D	E
44	A	B	C	D	E	94	A	B	C	D	E
45	A	B	C	D	E	95	A	B	C	D	E
46	A	B	C	D	E	96	A	B	C	D	E
47	A	B	C	D	E	97	A	B	C	D	E
48	A	B	C	D	E	98	A	B	C	D	E
49	A	B	C	D	E	99	A	B	C	D	E
50	A	B	C	D	E	100	A	B	C	D	E

Course Evaluation

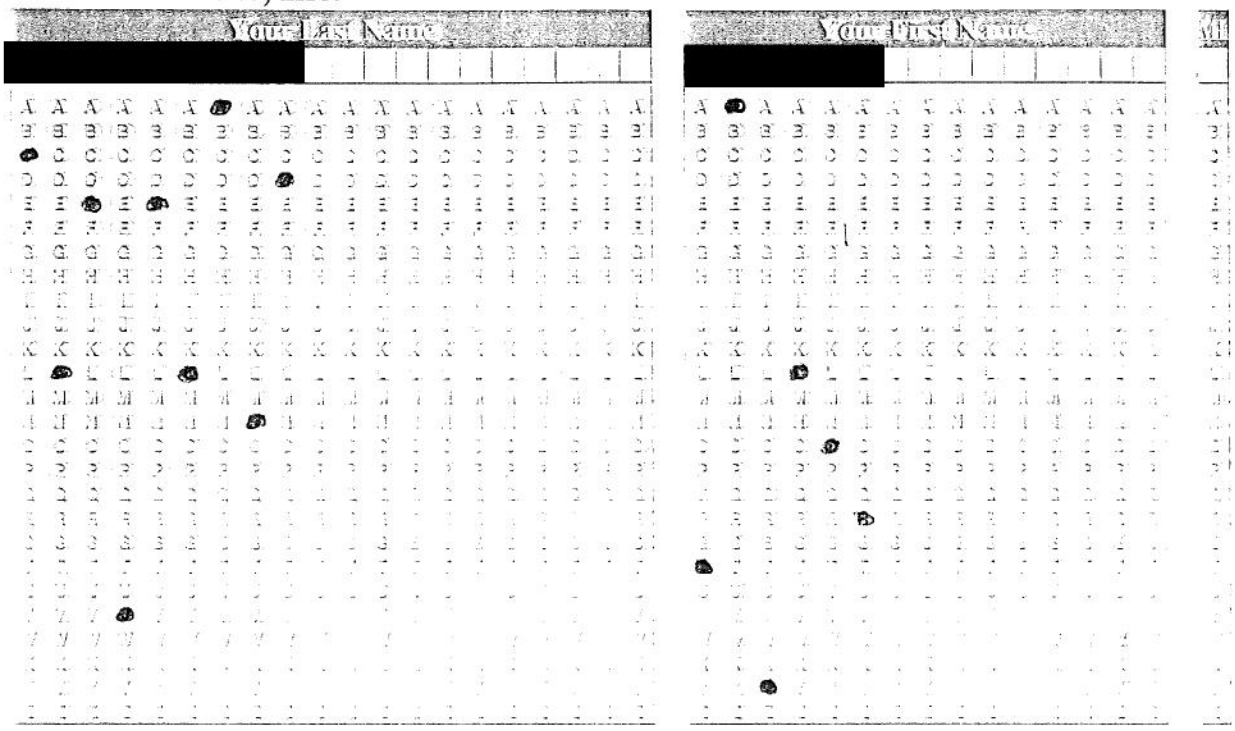
1	1	2	3	4	5	6	7
2	1	2	3	4	5	6	7
3	1	2	3	4	5	6	7
4	1	2	3	4	5	6	7
5	1	2	3	4	5	6	7
6	1	2	3	4	5	6	7
7	1	2	3	4	5	6	7
8	1	2	3	4	5	6	7
9	1	2	3	4	5	6	7
10	1	2	3	4	5	6	7
11	1	2	3	4	5	6	7
12	1	2	3	4	5	6	7
13	1	2	3	4	5	6	7
14	1	2	3	4	5	6	7
15	1	2	3	4	5	6	7
16	1	2	3	4	5	6	7
17	1	2	3	4	5	6	7
18	1	2	3	4	5	6	7
19	1	2	3	4	5	6	7
20	1	2	3	4	5	6	7

Instructor Evaluation

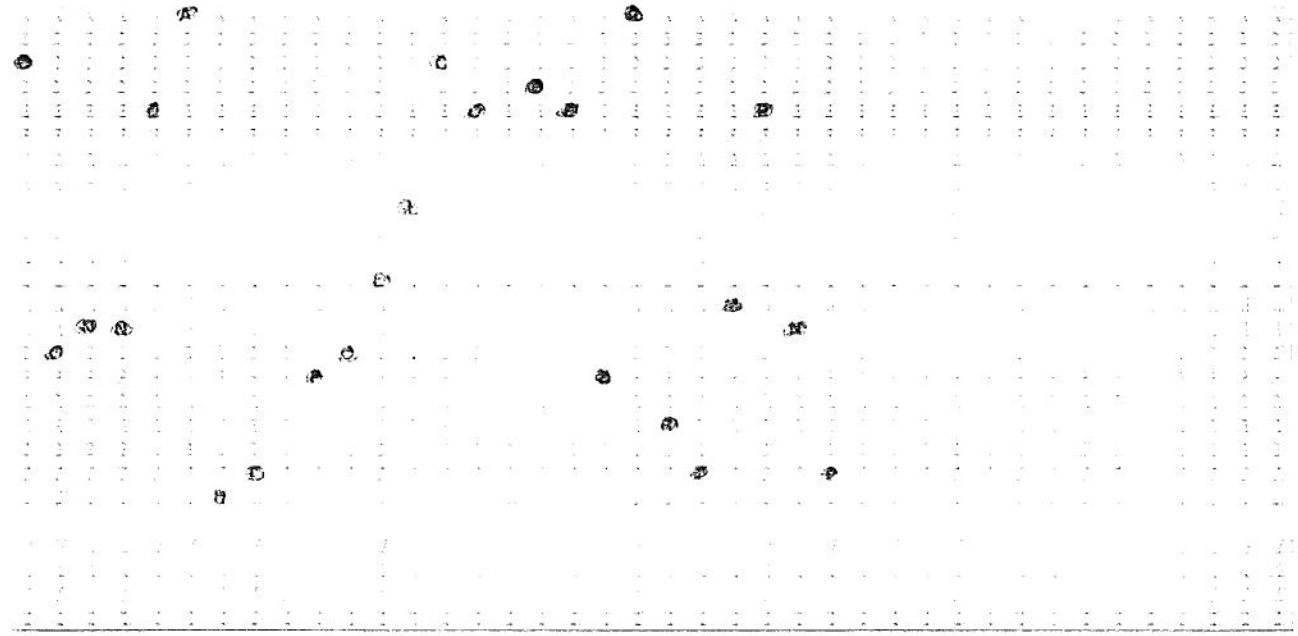
1	1	2	3	4	5	6	7
2	1	2	3	4	5	6	7
3	1	2	3	4	5	6	7
4	1	2	3	4	5	6	7
5	1	2	3	4	5	6	7
6	1	2	3	4	5	6	7
7	1	2	3	4	5	6	7
8	1	2	3	4	5	6	7
9	1	2	3	4	5	6	7
10	1	2	3	4	5	6	7
11	1	2	3	4	5	6	7
12	1	2	3	4	5	6	7
13	1	2	3	4	5	6	7
14	1	2	3	4	5	6	7
15	1	2	3	4	5	6	7
16	1	2	3	4	5	6	7
17	1	2	3	4	5	6	7
18	1	2	3	4	5	6	7
19	1	2	3	4	5	6	7
20	1	2	3	4	5	6	7

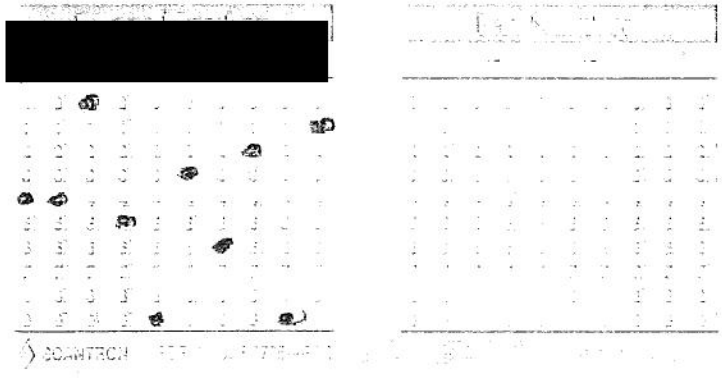
Training Innovation In Action

APCO Institute, Inc.



CONNECTICUT POLICE DEPARTMENT





Directions Box

- Please use a #2 pencil
- Fill in mark completely

Correct ● Incorrect ✓ ✗

- Do not staple form

23996

ROBERT HERRON
CITY MANAGER



A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

May 6, 1996

Mr. [redacted]
Conneaut Police Department
294 Main Street, City Hall Building
Conneaut, OH 44030

Dear [redacted]:

I am writing to indicate that you have successfully completed your six month probationary period for the position of [redacted] for the City of Conneaut Police Department.

Effective [redacted] you are hereby granted your permanent appointment as a [redacted].

Also, please note that, this appointment was made after your probationary period evaluation of April 22, 1996, conducted by Sergeant Zimmerman.

Congratulations, and I will look forward to continuing to work with you.

Sincerely,
THE CITY OF CONNEAUT

Robert Herron
City Manager

RDH/pb

cc: Chief Russo
Finance Office
Civil Service

To: Chief Rocco N. Russo — Police Department
Name of Supervisor

CONNEAUT POLICE DEPARTMENT
CONNEAUT, OHIO

ABSENCE REPORT

Name [redacted]

Date of Absence [redacted]

Last Day Worked [redacted]

Person Reporting Absence [redacted]

Reported To	By Phone	Messenger	Other Means	Date/Time
NICK	X			10/20 0232

REASON FOR ABSENCE
(Check Appropriate Reason)

Accident on Duty ☐ Holiday ☐ Sickness--Self ☒

Accident off Duty ☐ Jury Duty ☐ Vacation ☐

Discipline ☐ Leave of Absence ☐ Unexcused Absence ☐

Death in Family ☐ Sickness in Family ☐ Excused (Other) ☐

Name of Hospital _____

Name of Doctor _____

Reason for Absence Explained (As required) [redacted]

Date _____ Report Recorded by _____ Personnel Dept.

APCO Institute, Inc.

[redacted]

Connect PD

Basic Telecommunicator Training Course

Third Edition

Final Examination

Instructions: ***Do not write in this test booklet.*** Use the accompanying answer sheet to indicate your answers. Fill in the response of your choice.

1. There are four vital services provided by a communications center. They are communications between:
   A. The fire departments and the fire fighters, members of the agency, different public safety agencies and public safety agencies and outside support services.
   B. The public and the public safety agency, members of the agency, different public safety agencies, public safety agencies and outside support services.
   C. The EMS providers and the paramedics, members of the agency, different public safety agencies, public safety agencies and outside support services.
   D. The public works department and the road crews, members of the agency, different public safety agencies, public safety agencies and outside support services.

2. Failure to do something which a reasonable person, guided by those ordinary considerations which ordinarily regulate human affairs, would do, is called?
   A. Negligence.
   B. Liability.
   C. Alleged.
   D. Ministerial Duty

3. An obligation wherein one is bound in law or justice to perform is:
   A. Alleged
   B. Negligence
   C. Ministerial Duty
   D. Liability

4. Indirect legal responsibility , or the liability of an employer for the acts of an employee is known as:
   A. Vicarious Liability
   B. Ministerial Duty
   C. Alleged
   D. Tort

5. Acts wherein there is no hard and fast rule and it requires you to exercise judgement is know as:
   A. Vicarious Liability
   B. Liability
   C. Discretionary Acts
   D. Ministerial Duty

6. A function as to which there is no occasion to use judgement or discretion is known as:
   A. Ministerial Duty
   B. Liability
   C. Discretionary Acts
   D. Vicarious Liability

7. The three phases of dispatch are:
   A. Phone Phase, Dispatch Phase, Responder Phase
   B. Caller Phase, Dispatcher Phase, Supervisor Phase
   C. Call Receiving Phase, Dispatch Phase, Post-Dispatch Phase
   D. Call Receiving Phase, Tape Recorder Phase, CAD Phase

8. The transmission of an idea from the mind of one to the mind of another, with understanding is:
   A. Assumption
   B. Communication
   C. Experience
   D. Symbol

9. What are the five components of a communications cycle?
   A. Shipper, Receiver, Message, Medium, Feedback
   B. Sender, Receiver, Message, Language, Feedback
   C. Sender, Receiver, Message, Medium, Feedback
   D. Shipper, Transmitter, Message, Medium, Feedback

10. Communication from the receiver back to the sender is called:
   A. Feedback
   B. Observation
   C. Barrier
   D. Symbol

11. An OBSERVATION is:
   A. The act or practice of noting and recording assumptions.
   B. The act or practice of noting and recording facts.
   C. The act or practice of noting and recording opinions.
   D. The act or practice of noting and recording feelings.

12. An INFERENCE is:
   A. The deriving of a axiom based upon something unknown.
   B. The deriving of an extrapolation based upon something assumed or unknown.
   C. The deriving of a conclusion based upon something known or assumed.
   D. The deriving of a conclusion based upon something unknown.

13. Citizens attach a great deal of importance to what the telecommunicator says because:
   A. They want *somebody* to tell them what to think.
   B. They know they can sue the agency if the information is wrong.
   C. They generally assume that they are talking to the person in charge (PIC).
   D. They generally assume that the telecommunicator is the voice of authority.

14. The primary link between the public and the emergency service provider is:
   A. The Telephone System.
   B. The Emergency Radio System.
   C. The Data System.
   D. The Teletype System.

15. Before placing a caller on "hold," the telecommunicator should:
   A. Hit the "alert" tone.
   B. Ask the caller to call back later to avoid being put on hold.
   C. Provide a brief statement to preface the hold.
   D. Say "hold."

16. When answering multiple calls, the telecommunicator should:
    A. Handle one at a time, and let the others ring.
    B. Answer each with the inquiry, "Is this an emergency?" and prioritize appropriately.
    C. Yell out for others to handle the other lines.
    D. One-button transfer the other ringing lines to other agencies that are not busy.

17. When answering a 9-1-1 call, it is recommended that the telecommunicator:
    A. Answer with, "9-1-1, what is your emergency?".
    B. Answer with, "9-1-1, How can I be of assistance?"
    C. Answer with, "Emergency, go ahead."
    D. Answer with, "9-1-1 Emergency Line. Is this a real emergency?"

18. *Personality projection* is:
    A. Positive verbal actions on the part of the telecommunicator to break through the emotional barrier of the hysterical caller.
    B. Positive actions by on-scene personnel to work with the telecommunicator staff in calming emotionally charged incidents.
    C. Telecommunicator actions that calm otherwise emotional field personnel through the use of radio projections.
    D. An emotional response to callers who react hysterically to the telecommunicator's instructions.

19. *Persistent Repetition* is:
    A. A technique used to speak to children during emergency calls.
    B. A technique used to calm hysterical callers.
    C. A technique used to be certain that the caller understands instructions.
    D. A technique used to become emotional during a call.

20. The most significant benefit to the public of a 9-1-1 system is:
    A. Nine-eleven is easy to remember.
    B. You don't need a quarter from a pay phone.
    C. Cellular telephone calls are free to 9-1-1.
    D. A reduction in response time for obtaining assistance.

21. An ALI is:
    A. Automatic Linear Indicator.
    B. Automatic Location Indicator.
    C. Address Location Interface.
    D. Automatic Location Identification.

22. An ANI is:
    A. Address Number Identification.
    B. Address Numbering Interface.
    C. Automatic Number Identification.
    D. Automatic Numerical Indicator.

23. When a call is received and dispatched from the same location, it is referred to as:
    A. Call Transfer.
    B. Direct Dispatch.
    C. Call Relay.
    D. Call Referral.

24. A call that is answered at one point and then physically sent to another location, is called:
    A. Call Transfer.
    B. Call Relay.
    C. Direct Dispatch.
    D. Call Referral.

25. A call taken at one point and the information given to another point for dispatch is:
    A. Call Transfer.
    B. Direct Dispatch.
    C. Call Relay.
    D. Call Referral.

26. An informational call that is received on a 9-1-1 line and the caller is directed to dial another number for the information they request is referred to as:
    A. Call Transfer.
    B. Call Referral.
    C. Direct Dispatch.
    D. Call Relay.

27. There are three general components of a CAD computer, they are:
    A. The mouse, the screen, the printer.
    B. The hard drive, the disk, the monitor.
    C. The call taker terminal, the dispatch terminal, the supervisor terminal.
    D. The processor, the input devices, the output devices.

28. An MDT is:
    A. A Mobile Direction Tool.
    B. A Major's Disciplinary Tool.
    C. A Mobile Dispatching Terminal.
    D. A Mobile Data Terminal.

29. The agency that determines the use of frequencies through laws and regulations is the:
    A. Frequency Communications Commission.
    B. Frequency Congress Cops.
    C. Federal Communications Commission.
    D. Federal Communications Congress.

30. The Phonetic Alphabet is used in radio broadcasting to:
    A. Give broadcasts a decidedly paramilitary feel.
    B. Distinctly spell names which could be misinterpreted.
    C. Enhance the secrecy of transmissions.
    D. Provide the field units with a sense of discipline.

31. Numerics should be broadcast as:
   A. Whole numbers.
   B. Integers.
   C. Fractions.
   D. Dianics.

32. When broadcasting strings of numbers, you should:
   A. Pause every third number.
   B. Pause every fifth number.
   C. Pause when your out of breath.
   D. Pause between groups of numbers (at breaks, hyphens, etc.)

33. In 24-hour time, 15 minutes after midnight is:
   A. 0015.
   B. 2415
   C. 1515.
   D. 1215.

34. C-Y-M-B-A-L stands for:
   A. Car, Year, Model, Brand, All other, License.
   B. Color Year, Motor, Body, And, License.
   C. Color, Year, Make, Body, And (all other), License.
   D. Cadillac, Yugo, Mustang, Bonneville, Acura, Lincoln.

35. The average individual speaks at a rate of:
   A. 90-100 WPM.
   B. 70-80 WPM.
   C. 40-60 WPM.
   D. 30-50 WPM.

36. The average Individual can correctly copy at a rate of:
   A. 100-120 WPM.
   B. 90-100 WPM.
   C. 30-50 WPM.
   D. 20-40 WPM.

37. Telecommunicator should broadcast at a rate of:
   A. 80 WPM.
   B. 60 WPM.
   C. 40 WPM.
   D. 20 WPM.

38. The ECHO principle requires:
   A. The important parts of the message be repeated.
   B. The entire message be repeated several times.
   C. The message be "echoed" by all field units.
   D. The important parts of the message are repeated only to the command staff.

39. Radio broadcasts should normally not exceed:
   A. 20 seconds.
   B. 30 seconds.
   C. 45 seconds.
   D. 75 seconds.

40. Fire dispatches are often referred to as:
   A. Bells.
   B. Alarms.
   C. Sirens.
   D. Lights and sirens.

41. EMS and rescue type calls are often referred to as:
   A. Extrications.
   B. Bells.
   C. Sirens.
   D. Runs.

42. Preliminary dispatch information on fire dispatches should include:
   A. Units responding, location of responding units, important information.
   B. Units that will respond, location of incident, type of incident.
   C. Units to respond, location and type of incident, important information received.
   D. Units that are responding, type of incident.

43. The unconscious ability to be aware of many things going on around you is called:
   A. Multi-tasking.
   B. Networking.
   C. Multilingual.
   D. Dianics.

44. In most agencies, all telephone and radio conversations are documented through the use of a:
   A. Logging recorder.
   B. Digital voice repeater log device (DVRLD).
   C. Call check.
   D. Tape backup.

45. Once a call location and type of incident has been determined, the next critical determination should be:
   A. Suspect information.
   B. If the call is in progress.
   C. Callers name.
   D. Callers address.

46. In dealing with EMS calls, *BLS* stands for:
   A. Basic Life Support.
   B. Bad Looking Scene.
   C. Basic Level Service.
   D. Broad Level Service.

47. In dealing with EMS calls, *ALS* stands for:
   A. Actual Life Support.
   B. Advanced Level Service.
   C. Advanced Life Support.
   D. Advanced Life Service.

48. The NCIC is:
   A. Nationwide Crime Information Center.
   B. National Crime Information Center.
   C. National Criminal Informants Club.
   D. Nationwide Crime Informants Center.

49. What are two types of stress that effect telecommunicators:
   A. Physical Stress, Mental Stress.
   B. Attitude Stress, Burnout Stress.
   C. Critical Incident Stress, Carpal Tunnel Stress.
   D. Cumulative Stress, Tension Stress.

50. ADA as it relates to public safety communications stands for:
   A. Americans with Disabling Accidents.
   B. American Doctors Association.
   C. Americans with Disabilities Act.
   D. Association of Disabled Americans.

The remaining items are True/False. On the answer key mark (A) for a True answer and mark (B) for a False answer

F 51. The telecommunicator has no role in the departments ability to provide adequate levels of service.

T 52. In reviewing litigations and dispatch mistakes over the years, one of the three common factors involved is the claim that the telecommunicator failed to follow agency SOP's.

T 53. You can minimize your liability exposure by acting within the scope of your duties, executing regulations, policies and procedures, as well as exercising reasonable judgement or discretion.

T 54. In the communications cycle, feedback is the method used to verify that a message has been received properly from the sender.

T 55. When you speak to a citizen who has called your department looking for assistance, their "perception is reality." Therefore, they will accept anything you say to them.

F 56. Observations are drawn from inferences we make.

T 57. Multi-tasking is a technique used by telecommunicators that allows you to handle multiple incoming calls.

F 58. The use of "jargon" while speaking to the public displays a more professional image.

F 59. Giving legal advice to callers is part of the job of a telecommunicator.

F 60. Many complaints in reference to the telecommunicator's handling of a call result from the caller's frustration rather than from specific complaints about the telecommunicator's actions.

F 61. Anonymous callers should not be tolerated or taken seriously.

T 62. You should attempt to keep callers reporting "in progress" calls on the line.

F 63. Use of "scrap" paper is an acceptable method for taking phone messages.

T 64. AT&T made the digits 9-1-1 available as a ETNS in 1968.

T 65. One of the public benefits of a 9-1-1 system is that calls are received by trained telecommunicators.

F 66. PSAP stands for Public Safety Action Provider.

F 67. A basic 9-1-1 system provides both ANI and ALI.

T 68. An enhanced 9-1-1 system provides both ANI and ALI.

T 69. One of the major databases for a CAD system is the Master Street Address Guide (MSAG).

F 70. It is permissible to use any word that fits the appropriate letter in the phonetic alphabet.

T 71. The proper way to broadcast 2B3C7006G1 would be "2, B-Bravo, 3, C-Charlie, 7, 0, 0, 6, G-Golf, 1."

T 72. The word "*Niner*" is not acceptable in the pronunciation of numerals.

F 73. In 24-hour time, 3:30 pm would be 1330 hrs.

T 74. In 24-hour time, 9:15 pm would be 2115 hrs.

T 75. When taking descriptive information on a vehicle, the color scheme should be taken from top of the vehicle to the bottom of the vehicle. (example: black over red)

T 76. Because we have not reached the year 2000, it is OK to broadcast the year of a vehicle as a "76" Chevrolet rather than a "1976" Chevrolet.

T 77. When taking suspect information on multiple individuals, you should get the information on each individual separately rather than jumping back and forth.

T 78. On suspect descriptions, it is permissible to ask a leading question such as "was he wearing glasses."

T 79. For in-progress or crimes that just occurred, obtain sufficient information to initiate a *BOLO* broadcast; ask the caller to hold, and provide the information to responding units; then obtain additional information from the caller.

T 80. When broadcasting messages, choose words that are distinct and forceful in sound and that convey a definite meaning.

F 81. It is more important to get a broadcast message out quickly and timely rather than accurately.

T 82. The use of the "echo procedure" is extremely important for relaying or receiving information from fire ground communication.

F 83. It is acceptable to use "please", "thank-you" and "you're welcome" on the air.

F 84. It is important to take as much time as needed to broadcast a message because field units will have other channels to transmit on if they need to.

T 85. The telecommunicator should always acknowledge a unit or station requesting information.

T 86. An alert tone is an electronic tone in the 1000 Hertz frequency range.

F 87. Different tones (short tones or long tones) are to be used at the telecommunicator's discretion not necessarily because of the type of call.

T 88. Overuse of the alert tone may result in the "boy-who-cried-wolf" situation.

F 89. The fact that something is burning at a location will generally satisfy the requirements for a fire dispatch.

T 90. Fires are classified into structure fires, vehicle fires, and brush, woods, trash and miscellaneous outdoor fires.

T 91. A preliminary fire dispatch consists of the specific units to respond, location of the incident, type of incident, and important information.

T 92. A telecommunicator's role in responder safety lies with relaying all pertinent information as outlined in your policy and procedure.

T 93. While all dispatch centers are different, there are operational principles that are used in each, regardless of their differences.

T 94. Much of the information to which you have access to through computerized reference systems must be considered confidential.

F 95. Most telecommunicators are exempt from the effects of stress.

T 96. Proper diet and exercise can reduce the effects of stress.

T 97. Our society demands ethics of public safety professionals such as honesty, hard work, and to be above reproach.

F 98. The ADA does not pertain to public safety telecommunications.

T 99. Hearing and speech impaired callers may take extra time to try to solve a problem or deal with a situation before trying to call for emergency services assistance.

T 100. Call guides can help a telecommunicator sort out all the variables of a situation and guide you to make the right decisions.

ROBERT HERRON
CITY MANAGER



Ohio's Sharpest Corner

A Resort Area

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

April 11, [redacted]

[redacted]
Conneaut City Police Dept.
294 Main Street
Conneaut, OH 44030

Dear [redacted]:

This letter is to appoint you effecti[redacted] as a temporary and provisional [redacted] in the City Police Department. This temporary appointment is due to the temporary leave of absence created by Gayle Gurto.

Your rate of pay will be $7.49 per hour. Mrs. Gurto expects to return to work on September 1, 1997, at which time your appointment would end. Due to the fact that this is a temporary appointment, you will not receive health insurance benefits or PERS pick-up. You will report to the Police Chief and he will provide you with your shift schedule.

Congratulations and I look forward to continuing to work with you.

Sincerely,

Robert Herron
City Manager

RH/pb

cc: Chief Russo
Finance Department

BROWN MEMORIAL HOSPITAL
P.O. BOX 648
CONNEAUT, OHIO 44030

Patient Name [redacted]

Nature of Injury/Illness LATERAL SPRAIN [redacted]

Patient May Return To:

_____ School date _____

_____ Full Duty date 4/17/98

_____ Light Duty date _____

Limitations:
a.) Keep clean and dry
b.) Splint to be worn
c.) Elevation
d.) Non-weight bearing
e.) No lifting
f.) Must wear eye patch
g.) Other _____

_____

_____ Patient may not return to work or to school until rechecked by a Physician.

_____ Patient may not participate in Physical Education classes for _____ days.

X Patient has been advised to see Dr. [redacted] in ___ days.
IF NOT BETTER 2-3 DAYS

INDUSTRIAL INJURY CASES

It is your responsibility to contact your Supervisor or Personnel Office as soon as possible after discharge from the E.D.

[signature] 4/14/98

Physician Signature Date

ED-02 Revised 3/93

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

January 20, 1998

MEMO TO: [redacted]

SUBJECT: Request for Certificate Pay

Dear [redacted]:

I am writing in regard to your request to be compensated for Training Certificates. Per Article 10, Education and Schooling Policy, Section 2, Job Related Training, I find that your training in the Police Academy is a benefit, however it does not relate to [redacted] instruction and communication related courses and seminars.

Therefore, your request to be compensated for this course is denied.

Should you have any questions with regard to this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 1-15-98 ___ New Hire X Change ___ Separation
Employee Name [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. CPD

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ ___Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
___Address Change			
___Promotion			
___Wage Increase			
___Vacation Increase			
___Rehire			
___Resignation			
___Retirement			
___Separation			
___Insurance Change			
___Leave of Absence			
X Other CERTIFICATE	35.00	40.00	PEACE OFFICER BASIC TRAINING CERTIFICATION EXAM

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
___ Voluntary Separation ___ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra ___Yes ___No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments Certification pay

Employee Signatur [redacted]

Supervisor Signature _____

Payroll Clerk Signature _____

Attorney General
Betty D. Montgomery

Ohio Peace Officer
Training Commission

[redacted]

Re: ASHTABULA COUNTY BASIC ACADEMY
[redacted]

Dear [redacted]:

This letter is to verify that you have successfully completed peace officer basic training requirements and the peace officer certification examination as part of the above cited academy.

Rule 109:2-1-02(I), Ohio Administrative Code defines an open enrollment student as a person who is not employed by a law enforcement agency and has not received an appointment as a peace officer, but has successfully completed all peace officer basic training school requirements of the Ohio Peace Officer Training Commission (OPOTC).

The date of completion of your basic academy is recorded as the date you passed the peace officer basic training examination. The following paragraphs explain the provisions outlined in Rule 109:2-1-07(C) with respect to three time periods after school completion that affect when the certificate is issued and if further training is required.

If you are appointed as a peace officer or accept appointment or employment in a non-peace officer position that statutorily requires completion of peace officer training, the following time lines and training requirements will apply:

1) Prior to August 12, 1998, a peace officer basic training certificate will be issued to you provided that no additional training requirements have been mandated since completion of the school you attended.

2) After the above date but prior to August 12, 1999, you may perform the functions of a peace officer or perform the duties of employment. You will, however, be required to complete an OPOTC refresher course and the refresher course examination within one year of your appointment or employment date before a peace officer basic training certificate is issued.

P. O. Box 309 / London, Ohio 43140
Phone: (614) 644-7682 / 466-7771 / 852-4848
FAX: (614) 728-5150
An Equal Opportunity Employer

Printed on Recycled Paper

☞ This Certificate must be made by a Judge of the Supreme Court, Court of Appeals or Common Pleas Court. (Currently, Judges of the Supreme Court decline to sign such certificates.)

THE STATE OF OHIO, ASHTABULA *COUNTY, ss:*

It is hereby certified, that [redacted] *, an applicant for appointment to the office of NOTARY PUBLIC for the STATE OF OHIO is of good moral character, that* he XXX *is at least 18 years of age, a good citizen of the United States, a resident of Ohio for at least thirty days, and a resident of* ASHTABULA *county and of* his XXX *voting precinct for at least thirty days; and that* he XXX *possesses sufficient qualifications and ability to discharge the duties of the office of Notary Public.*

(Draw a line through whichever of the following statements does NOT apply.)

-I am satisfied from my personal knowledge that the applicant possesses the qualifications necessary to a proper discharge of the office.

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

, Judge,
GARY L. YOST
of the Ashtabula County Court of Common Pleas

January 16 *, 19* 98 .

AFFIDAVIT

(SEE SECOND PARAGRAPH ON REVERSE SIDE OF THIS FORM)

☞ **If the following affidavit is made before an officer having a seal, such officer must impress his seal below.**

THE STATE OF OHIO, ______ COUNTY, ss:

______, an applicant for appointment to the office of NOTARY PUBLIC for the STATE OF OHIO and whose term of office under his *her last appointment as a NOTARY PUBLIC expired ______ 19___, being duly sworn, say that* he *she has not, knowing that said term has expired, performed any notorial act since ______, and that* he *she will not perform any such act until reappointed and duly qualified.*

______

Subscribed in my presence, and sworn to before me, this ______ day of ______, 19 ___.

☞ This Certificate must be made by a Judge of the Supreme Court, Court of Appeals or Common Pleas Court. (Currently, Judges of the Supreme Court decline to sign such certificates.)

THE STATE OF OHIO, ASHTABULA *COUNTY, ss:*

It is hereby certified, that [redacted] *, an applicant for appointment to the office of NOTARY PUBLIC for the STATE OF OHIO is of good moral character, that* ~~XXX~~ he *is at least 18 years of age, a good citizen of the United States, a resident of Ohio for at least thirty days, and a resident of* ASHTABULA *county and of* ~~XXX~~ his *voting precinct for at least thirty days; and that* ~~XXX~~ he *possesses sufficient qualifications and ability to discharge the duties of the office of Notary Public.*

(Draw a line through whichever of the following statements does NOT apply.)

I am satisfied from my personal knowledge that the applicant possesses the qualifications necessary to a proper discharge of the office.

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

GARY L. YOST *, Judge,*

of the Ashtabula County Court of Common Pleas

January 16 *, 19* 98 .

AFFIDAVIT

(SEE SECOND PARAGRAPH ON REVERSE SIDE OF THIS FORM)

☞ **If the following affidavit is made before an officer having a seal, such officer must impress his seal below.**

THE STATE OF OHIO, ______ *COUNTY, ss:*

______ *, an applicant for appointment to the office of NOTARY PUBLIC for the STATE OF OHIO and whose term of office under* ~~her~~ his *last appointment as a NOTARY PUBLIC expired* ______ *19* ___ *, being duly sworn, say that* ~~she~~ he *has not, knowing that said term has expired, performed any notorial act since* ______ *, and that* ~~she~~ he *will not perform any such act until reappointed and duly qualified.*

Subscribed in my presence, and sworn to before me, this ______ *day of* ______ *, 19*

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 11, [redacted]

MEMO TO: [redacted]

SUBJECT: Employee Evaluation

Dear [redacted]:

In reviewing your appointment letter of [redacted] I discovered an error as the letter indicates that you will be placed on a one year probationary period. This period should actually be for six months, and thus your probationary period ended on [redacted]

As with all individuals on probation, I am required to complete an employee evaluation before I am able to make a recommendation for permanent appointment. I have, therefore, enclosed a Performance Evaluation Form which you are to complete as a self-evaluation.

I am scheduling an appointment for you to be in my office on Thursday, December 18, 1997 at 3:30 p.m. to go over your performance evaluation. If you have any questions on how to complete the evaluation form, please feel free to contact my office.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

cc: Robert Herron, City Manager

Enclosure

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 12-9-97 ___ New Hire X Change ___ Separation
Employee Name [redacted] [redacted]
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ ___Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
___Address Change			
___Promotion			
X Wage Increase	9.54	10.04	END OF PROBATION
___Vacation Increase			
___Rehire			
___Resignation			
___Retirement			
___Separation			
___Insurance Change			
___Leave of Absence			
___Other			

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
___ Voluntary Separation ___ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra ___Yes ___No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature [signature]

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change 11-1-97 __ New Hire X Change __ Separation
Employee Name X [redacted] [redacted] [redacted]
Last First M.I.

Social Security Number X [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	40.00	45.00	FIRE SERVICE DISPATCH

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

X **Employee Signature** [redacted]

Supervisor Signature [redacted]

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change JUNE 9, 1997 __ New Hire __ Change __ Separation
Employee Name [redacted] [redacted]
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	-0-	5.00	EMT.

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature _____

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change July 1, 1997 __ New Hire __ Change __ Separation
Employee Name _____
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	5.00	10.00	Crisis communications

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature Jesse N. Jones

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change JUNE 9, 1997 __ New Hire __ Change __ Separation
Employee Name _____
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	10.00	15.00	LEAD TERMINAL OPERATION

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature _____

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change JUNE 9, 1997 __ New Hire __ Change __ Separation
Employee Name _____
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	15.00	20.00	HAZ-MAT

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature Lou H. Jones

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change JUNE 9, 1997 __ New Hire __ Change __ Separation
Employee Name _____
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	20.00	25.00	JAILOR COURSE

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature _____

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change JUNE 9, 1997 __ New Hire __ Change __ Separation
Employee Name _____
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	25.00	30.00	BOMBAY SEMINAR

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature _____

Payroll Clerk Signature _____

PAYROLL/STATUS CHANGE NOTICE

Employee Information
Effective Date of Change JUNE 9, 1997 __ New Hire __ Change __ Separation
Employee Name _____
Last First M.I.

Social Security Number [redacted] Employee # [redacted] Dept. [redacted]

New Hire Information
Address _____
Street City State Zip

Telephone # ( ) _____
Status: ___Full Time ___Part-Time ___Other _____
Job Title _____ __Salaried ___Hourly W-4 Received _____

Change(s) for Current Employees

Type	From	To	Comments
__Address Change			
__Promotion			
__Wage Increase			
__Vacation Increase			
__Rehire			
__Resignation			
__Retirement			
__Separation			
__Insurance Change			
__Leave of Absence			
X Other CERTIFICATE	30.00	35.00	TDD calls

Separation Separation Date _____ Last Day Worked _____ Last Pay Date _____
__ Voluntary Separation __ Involuntary Separation Notice of Cobra Rights provided on _____
Election of Cobra __Yes __No Start Date for Coverage _____
If Yes, describe type of coverage elected _____

Leave of Absence Begin Leave _____ Return from Leave _____
Reason for Leave(Explain Fully) _____

Additional Comments _____

Employee Signature [redacted]

Supervisor Signature Lawn N. Jones

Payroll Clerk Signature _____

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (216) 593-6291
Fax (216) 593-6966

May 14, [redacted]

MEMO TO: Robert Herron, City Manager

SUBJECT: Permanent Part-time Appointment of [redacted]

Dear Mr. Herron:

I am writing to advise you that [redacted], who is employed as a [redacted] has successfully completed his six month probation period.

I am recommending that he be appointed to a permanent part-time position.

If you have any questions with regard to this matter, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

Ohio's Sharpest Corner

A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

December 22, [redacted]

MEMO TO: Robert Herron, City Manager

SUBJECT: Six Month Probation Completed by [redacted]

Dear Mr. Herron:

On [redacted] completed his six month probationary period.

Please find his self-evaluation form, along with the evaluation form which I have completed, enclosed.

At this time, I am recommending that [redacted] be granted his permanent appointment as a [redacted] for the Conneaut Police Department.

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

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

June 15[redacted]

MEMO TO: Julia Sanger, Finance Director

SUBJECT: Clothing Allowance –[redacted]

Dear Julie:

This is to advise you tha[redacted] was the one-year anniversary date of[redacted] employment as a[redacted] for the Conneaut Police Department.

According to the contract between the City of Conneaut, Ohio and the United Steelworkers of America,[redacted] should receive the remaining portion of his clothing allowance as stated in Article 7, Section 2 at this time.

Should you have any questions, or require anything further, please feel free to contact me.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

Cc: [redacted]

Attendance History [redacted]

DOB: [redacted] SSN: [redacted]

PLEASE PRINT

Name [redacted] (LAST / FIRST / MIDDLE) Telephone ( )

Department _____ Employee/Payroll Number [redacted]

Vacation Days Due _____ Sick Days Due _____ Hire Date ___/___/___

CODES

A	ACCIDENT ON JOB	M	FAMILY/MEDICAL LEAVE
D	DEATH IN FAMILY	P	PERSONAL
E	EXCUSED	Q	EARLY QUIT
F	FAMILY ILLNESS	S	SUSPENSION
H	HOLIDAY	T	TARDY
I	ILLNESS - SELF	U	UNEXCUSED
J	JURY DUTY	V	VACATION
L	LEAVE OF ABSENCE	O	OTHER _____

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	A	D	V	O
JAN AM	[redacted]																																		
JAN PM																																			
FEB AM																																			
FEB PM																																			
MAR AM																																			
MAR PM																																			
APR AM																																			
APR PM																																			
MAY AM																																			
MAY PM																																			
JUN AM																																			
JUN PM																																			
JUL AM																																			
JUL PM																																			
AUG AM																																			
AUG PM																																			
SEP AM																																			
SEP PM																																			
OCT AM																																			
OCT PM																																			
NOV AM																																			
NOV PM																																			
DEC AM																																			
DEC PM																																			

REQ PAY - 3 HOLIDAYS. 3/12/99

REQPAY-3 HOLIDAYS. 4/18/99

* DELETE

Totals

DOTTED LINE INDICATES HALF-DAYS

FRIENDLY FORMS® Call toll free 1-800-999-9111 to reorder Attendance History Card #R5A-0562
© 1992 G. Neil Companies, P.O. Box 450939, Sunrise, FL 33345-0939 • Printed in U.S.A. (4/94)
G. Neil Companies assumes no responsibility for any decision the employer makes which may violate applicable state or federal law.

Recycled Paper
Our commitment to protecting the environment

Attendance History 19[redacted]

PLEASE PRINT

Name [redacted] ______ Telephone (   ) ______
LAST FIRST MIDDLE

Department ______ Employee/Payroll Number [redacted]

Vacation Days Due ______ Sick Days Due ______ Hire Date __/__/__

CODES

A	ACCIDENT ON JOB	M	FAMILY/MEDICAL LEAVE
D	DEATH IN FAMILY	P	PERSONAL
E	EXCUSED	Q	EARLY QUIT
F	FAMILY ILLNESS	S	SUSPENSION
H	HOLIDAY	T	TARDY
I	ILLNESS - SELF	U	UNEXCUSED
J	JURY DUTY	V	VACATION
L	LEAVE OF ABSENCE	O	OTHER OK

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Summary A	D	E	F	H	I	J	L	M	P	Q	S	T	U	V	O
JAN	AM	[redacted]																																														
	PM																																															
FEB	AM																																															
	PM																																															
MAR	AM																																															
	PM																																															
APR	AM																																															
	PM																																															
MAY	AM																																															
	PM																																															
JUN	AM																																															
	PM																																															
JUL	AM																																															
	PM																																															
AUG	AM																																															
	PM																																															
SEP	AM																																															
	PM																																															
OCT	AM																																															
	PM																																															
NOV	AM																																															
	PM																																															
DEC	AM																																															
	PM																																															
Totals																																																

*provided Dr.'s notice

DOTTED LINE INDICATES HALF-DAYS

FRIENDLY® FORMS Call toll free 1-800-999-9111 to reorder Attendance History Card #R5A-0562
© 1992 G. Neil Companies, P.O. Box 450939, Sunrise, FL 33345-0939 • Printed in U.S.A. (4/94)
G. Neil Companies assumes no responsibility for any decision the employer makes which may violate applicable state or federal law.

Recycled Paper Our commitment to protecting the environment

Ohio's Sharpest Corner A Resort Area

City of Conneaut

ROCCO N. RUSSO
CHIEF OF POLICE

294 Main Street
Conneaut, Ohio 44030
Telephone (440) 593-7440
Fax (440) 593-6966

April 7, [redacted]

[redacted]

Dear [redacted]

This is to advise you that a second interview is scheduled for you with regard to the position of [redacted] with the City of Conneaut Police Department.

Your interview is scheduled for Tuesday, April 14, [redacted] at 1:00 p.m. in my office at the police department.

Very truly yours,

Rocco N. Russo
Chief of Police

RNR/las

ROBERT HERRON
CITY MANAGER



Ohio's Sharpest Corner

A Resort Area

City of Conneaut

City Hall Building
Conneaut, Ohio 44030
Telephone (216) 593-4357
Fax (216) 593-6908

June 9, [redacted]

[redacted]

Dear [redacted]

Due to the resignation of Kathy Bailey, the City has a permanent vacancy in the ranks of its [redacted]. Upon Chief Russo's recommendation, you are hereby appointed temporarily and provisionally to serve in this vacancy until Civil Service makes provisions for a permanent appointment. Said appointment is effective [redacted]

Civil Service will be notified of your appointment and of the City's intent to appoint you provisionally to this position. Pursuant to Local Civil Service Rule 5.02, you may be required to take a non-competitive exam in order to qualify for provisional appointment. Failure to qualify for provisional appointment will result in your being restored to the part-time ranks. During your provisional appointment, you will be placed on probation for one (1) year and may be removed for failing to satisfactorily complete such probation.

Once your appointment becomes provisional, you will receive the following wage and benefits during such provisional status.

1) Your rate of pay will be $9.54 per hour;

2) You will be eligible for health insurance provided you pay an $18.00 per month premium;

3) You will accrue vacation and sick time as a full-time employee of the City; and

4) P.E.R.S. pickup.

You will be required to perform any and all duties required the [redacted] staff.

Should you have any questions, please contact Chief Russo.

Very truly yours,

Robert Herron
City Manager

cc: Rocco Russo
Anthony Zampedro
Finance Dept.

Association of Public-Safety Communications Officials - International, Inc.
APCO Institute, Inc.

Basic Telecommunicator Training International Certificate

In recognition of having completed the requirements in the
Basic Telecommunicator Training Program
of APCO Institute, Inc., and having demonstrated a knowledge of
Telephone Techniques, Radio Broadcast Techniques, and
other Public Safety Telecommunication Issues,
APCO Institute, Inc. hereby awards International Certification as an
APCO Telecommunicator to:

[redacted]

October 31, 1997

OH-B-2114

Kevin R. Duffy, Institute Director

© Goes 461

LITHO. IN U.S.A.



POWERPHONE™

STAYING THE WORLD'S FIRST CALL STATION

It is hereby confirmed that

[redacted]

Has Successfully Completed the Requirements of the

Emergency Crime Scene Responder℠

Training Program

Held at Conneaut Police Dept., OH *on* May 2, 1998 .

Phil M. Salafia

Phil M. Salafia, President

M.D.

Patrick W. Lanzetta, MD, Medical Director

This continuing education activity is approved by the Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS).

Approval #: **28-F2A-0176** *CEH Type:* **7.0 Basic**

©1996 PowerPhone, Inc.

Ohio Peace Officer Training Council

State of Ohio
Office of the Attorney General

This is to certify that

[redacted]

Has Completed

36-HOUR JAILER TRAINING, 5 DAY FACILITY

Held at

SACS TRAINING CENTER

21st NOVEMBER 95

Betty D. Montgomery
Betty D. Montgomery
Attorney General

Col Warren H. Davies
Colonel Warren H. Davies, Chairman
Ohio Peace Officer Training Council

OHIO
PEACE OFFICER TRAINING COUNCIL

Vernon C. Chenevey
Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Council

School Commander

[redacted]

Printed on Recycled Paper

S.A.C.S.
TRAINING CENTER

November 6 - 10, 1995

CERTIFICATE OF ACHIEVEMENT

[redacted]

has successfully completed the 40 hour Training Course of

JAILER COURSE

T. A. Dimoff

TIMOTHY A. DIMOFF
PRESIDENT

WILLIAM MILLER
INSTRUCTOR

Certificate of Attendance

This is to certify that

[redacted]

has attended
"Responding Effectively to 9-1-1- TDD Calls"

March 26, 1997

Signed

Seminar on Bombs and Bombings

awarded to

[redacted]

presented by

Special Agent George Arruda of the Federal Bureau of Investigation

hosted by

Conneaut Police Department

March 3, 1997

Rocco N. Russo, Chief of Police

Ohio Peace Officer Training Council

State of Ohio
Office of the Attorney General

This is to certify that

[redacted]

Has Completed

36-HOUR JAILER TRAINING, 5 DAY FACILITY

Held at

SACS TRAINING CENTER

21st NOVEMBER 95

Betty D. Montgomery
Betty D. Montgomery
Attorney General

Col Warren H. Davies
Colonel Warren H. Davies, Chairman
Ohio Peace Officer Training Council

OHIO PEACE OFFICER TRAINING COUNCIL

Vernon C. Chenevey
Vernon C. Chenevey, Executive Director
Ohio Peace Officer Training Council

School Commander

[redacted]

Printed on Recycled Paper

OHIO FIRE ACADEMY

Certificate of Training

Awarded To

[redacted]

For Completion Of The Ohio Fire Academy Course

First Responder Haz Mat: Awareness

Course No.: 1714-95-302

Hours: 4

Date of Completion: March 17, 1995

A. Gregory Shaw

Superintendent

COM 5160

Ohio Fire Academy
Certificate of Training

Name: [redacted]

Course: First Responder Haz Mat: Awareness

Course No.: 1714-95-302

Hours: 4

Completion Date: March 17, 1995

DEPARTMENT COPY

Ohio Fire Academy
Certificate of Training

Name: [redacted]

Course: First Resp. Haz Mat Awar

Course No.: 1714-95-302

Hours: 4 Hours

Date of Completion: 03/17/95

A. Gregory Shaw

Superintendent

Detach This Wallet Card ⬆ And Carry With You For Your Personal Record

⬅ Detach This 3x5 Card For Your Departmen

OHIO LEADS

OHIO LEADS COMPUTER AND COMMUNICATIONS

Certifies that _____

has completed a course of instruction in

Leads Terminal Operation and Usage as prescribed

by the Steering Committee of

the Ohio Law Enforcement Automated Data System.

Law Enforcement Automated Data System

OCTOBER 27 19 96

_____

CHAIRMAN LEADS STEERING COMMITTEE



POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.®

Recognizes the Professional Accomplishment of

[redacted]

Upon Successful Completion of the

Law Enforcement Dispatch℠

Crisis Communications℠ *Training Program*

Held at Chagrin Falls Police Department, Ohio *on* July 21-22, 1997 .

Instructor

President

©1996 PowerPhone, Inc.

I0646511

National Registry of Emergency Medical Technicians SM

Hereby certifies

[redacted]

as an

Emergency Medical Technician-Intermediate

duly registered together with all the rights, and privileges appertaining thereto in consideration of the satisfactory completion of the prescribed educational and clinical requirements.

In Testimony Whereof, the seal of the National Registry of Emergency Medical Technicians and the signatures as authorized by the Board of Directors are hereunto affixed.

this Seventh *day of* [redacted] *A.D.*

Chairman of the Board

Executive Director

© National Registry of Emergency Medical Technicians, Inc.



POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.®

Recognizes the Professional Accomplishment of

[redacted]

Upon Successful Completion of the

Fire Service Dispatch℠

Crisis Communications℠ *Training Program*

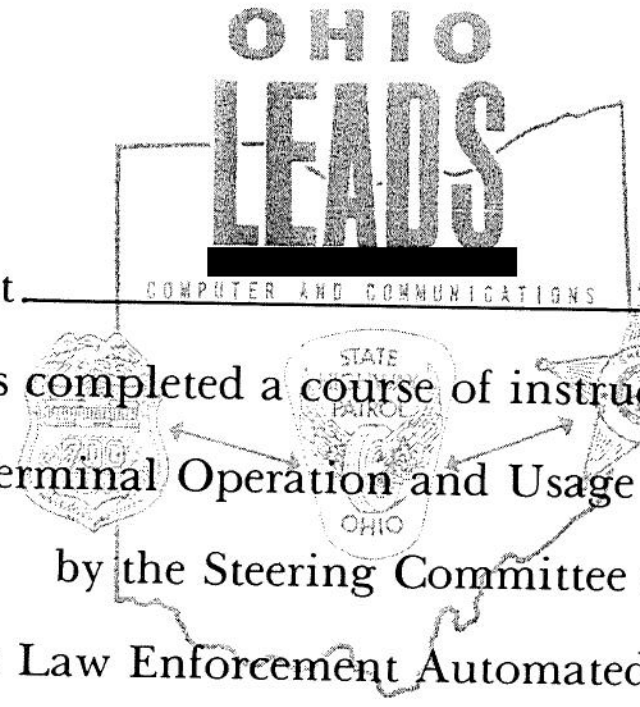
Held at Hudson Police Department, Ohio *on* November 10-11, 1997 .

Instructor

President

©1996 PowerPhone, Inc.

OHIO LEADS



Certifies that _____

has completed a course of instruction in

Leads Terminal Operation and Usage as prescribed

by the Steering Committee of

the Ohio Law Enforcement Automated Data System.

Law Enforcement Automated Data System

OCTOBER 27 19 96

CHAIRMAN/LEADS STEERING COMMITTEE

Seminar on Bombs and Bombings

awarded to

[redacted]

presented by

Special Agent George Arruda of the Federal Bureau of Investigation

hosted by

Conneaut Police Department

March 3, 1997

Rocco N. Russo, Chief of Police



POWERPHONE

SAVING THE WORLD . . . ONE CALL AT A TIME.®

Recognizes the Professional Accomplishment of

[redacted]

Upon Successful Completion of the

Law Enforcement Dispatch℠

Crisis Communications℠ *Training Program*

Held at Chagrin Falls Police Department, Ohio *on* July 21-22, 1997 .

Instructor

President

©1996 PowerPhone, Inc.

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE COURSE INDICATED BELOW

Sniper Subject Matter Expert (SME) Panel Discussion

June 11, 2026

OPOTC CPT Approved 26CPT1256 - 8 Hours Assignment-Based

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE COURSE INDICATED BELOW

Tactical Emergency Medical Support Track (TEMS)

June 8, 2026

OPOTC CPT Approved 26CPT1241 - 8 Hours Assignment-Based

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE COURSE INDICATED BELOW

21st Century Sentinels - Effective Investigations of Child Sexual Exploitation/Trafficking Cases

June 9, 2026

OPOTC CPT Approved 26CPT1233 - 1.5 Hours Assignment-Based

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE COURSE INDICATED BELOW

Red Dot Pistols for Law Enforcement by OTOA

June 10, 2026

OPOTC CPT Approval 26CPT1208 - 8 Hours Firearms

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

June 01, 2026

by completing the following exam:

Inquiry Test

This certificate is good through

June 01, 2027

NCJTC
National Criminal Justice Training Center
Fox Valley Technical College

Certificate of Completion

CLASSROOM TRAINING

This certificate recognizes that

[redacted]

completed Enhancing Investigations through Genetic Genealogy (16 hours of training)
on April 27-28, 2026

Bradley Russ
Executive Director
National Criminal Justice Training Center
Fox Valley Technical College

Dr. Christopher J. Matheny
President
Fox Valley Technical College

Fox Valley TECHNICAL COLLEGE
Knowledge That Works

Certificate *of* Excellence

THIS CERTIFICATE IS PRESENTED TO

[redacted]

FOR THE COMPLETION OF

OHLEG Smart Search powered by Peregrine Introductory Training

26CPT705

CPT CREDIT NUMBER

April 20, 2026

DATE

Peregrine Academy

1

NUMBER OF CREDITED HOURS

RYANN STEFANYE, HEAD OF TRAINING

Certificate of Completion

[redacted]

HAS COMPLETED

Chemical Agents & Munitions for LE

26CPT399



Ashtabula Police Department

March 12, 2026

Date

Lt Jason Erwin

Instructor

HEARTSAVER

Heartsaver®
First Aid CPR AED

American Heart Association.

[redacted]

has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association Heartsaver First Aid CPR AED Program.

Optional modules completed:

Issue Date
1/29/2025

Training Center Name
University Hospitals Conneaut Medical Center

Training Center ID
OH01876

Training Center City, State
Conneaut, OH

Training Center Phone Number
(440) 593-0190

Training Site Name

Renew By
01/2027

Instructor Name
Chad Carter

Instructor ID
12120136306

eCard Code
[redacted]

QR Code
[redacted]

To view or verify authenticity, students and employers should scan this QR code with their mobile device or go to www.heart.org/cpr/mycards.

© 2023 American Heart Association. All rights reserved. 20-3002 R3/23

PepperBall®

8 HOURS OF CREDIT

OPERATOR CERTIFICATE

This is to certify that

[redacted]

of the

Conneaut Police Department

Has successfully completed the PepperBall Operator Training Course

Daniel Pinkett	01-06-2026
INSTRUCTOR	**DATE**

PepperBall® is a registered trademark of United Tactical Systems, LLC, exclusive worldwide manufacturer and supplier of genuine PepperBall products.

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE COURSE INDICATED BELOW

Close Quarters Concepts for Patrol

November 25, 2025

OPOTC CPT Approved 25CPT871 (3hrs-Use of force, 1hr-Officer Wellness, 4hrs- Leadership, 8hrs - Elective)

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

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

This is to certify that

[redacted]

has successfully met the prescribed program requirements for

Clandestine Drug Lab Recertification/Refresher Course

January 16, 2026

Dave Yost
Ohio Attorney General

Thomas Quinlan, Executive Director
Ohio Peace Officer Training Commission

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission



- OHIO ATTORNEY GENERAL -
RECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

[redacted]

has completed the Ohio Attorney General's online training course

OHLEG Security
Training Course

Dave Yost

DAVE YOST, OHIO ATTORNEY GENERAL

June 06, 2025

DAVE YOST
OHIO ATTORNEY GENERAL

DAVE YOST
OHIO ATTORNEY GENERAL

Bureau Of Criminal Investigations
Ohio Law Enforcement Gateway
Agency/User Agreement

User Acknowledgment

I acknowledge that I am responsible for reading and understanding the OHLEG Security Policies. I acknowledge and agree that I will utilize this information exclusively for the administration of criminal justice for the official purposes of my agency. Access to OHLEG is a privilege subject to termination. Data accessed through OHLEG is continuously subject to limitations on use and dissemination and is not to be sold, transmitted, or disseminated to any unauthorized person. To protect the system from unauthorized use and to ensure that the system is functioning properly, individuals using this computer system are subject to having all of their activities monitored, recorded, and audited. Anyone using this system expressly consents to such monitoring and is advised that any evidence of possible abuse or criminal activity will be provided to appropriate officials. Unauthorized attempts to upload or change information, or otherwise cause damage to this service, are strictly prohibited. I acknowledge that any unauthorized access or misuse of the law enforcement information or data on this site is prohibited by Revised Code section 2913.04, and constitutes a fifth degree felony. I further acknowledge that any failure to abide by the conditions and restrictions in the user agreement and in the OHLEG Rules and Regulations will result in a loss of my privileges of access to this tool. The law enforcement data maintained by BCI on the OHLEG site is provided at and subject to the discretion of BCI. BCIs grant of access to OHLEG confers upon me no process or other rights in maintaining such access. I ACKNOWLEDGE THAT I HAVE READ THE CURRENT VERSION OF THE OHLEG RULES AND REGULATIONS AND WATCHED THE REQUIRED SECURITY TRAINING VIDEO, AVAILABLE ON THE OHLEG SITE.

Printed Name: [redacted] Date: 09-09-25

Signature: [redacted] OAI/ORI #: OH0040200

Agency Name: CONNEAUT POLICE DEPARTMENT

Agency Acknowledgment

I acknowledge that I am responsible for reading and understanding the OHLEG Security Policies. I also state that I am responsible for the users that are assigned to my charge and will adhere to these directives and that failure to do so may constitute a security violation resulting in denial of access to BCI/OHLEG information resources as well as other products and services provided by the AGO. I agree to cooperate with any OHLEG investigation and provide whatever information may be necessary for an OHLEG administrative review. I acknowledge and agree that I will utilize this information exclusively for the administration of criminal justice for the official purposes of my agency. Access to OHLEG is a privilege subject to termination. Data accessed through OHLEG is continuously subject to limitations on use and dissemination and is not to be sold, transmitted, or disseminated to any unauthorized person. To protect the system

DAVE YOST
OHIO ATTORNEY GENERAL

Bureau Of Criminal Investigations
Ohio Law Enforcement Gateway
Agency/User Agreement

from unauthorized use and to ensure that the system is functioning properly, individuals using this computer system are subject to having all of their activities monitored, recorded, and audited. Anyone using this system expressly consents to such monitoring and is advised that any evidence of possible abuse or criminal activity will be provided to appropriate officials. Unauthorized attempts to upload or change information, or otherwise cause damage to this service, are strictly prohibited. I acknowledge that any unauthorized access or misuse of the law enforcement information or data on this site is prohibited by Revised Code section 2913.04, and constitutes a fifth degree felony. I further acknowledge that any failure to abide by the conditions and restrictions in the user agreement and in the OHLEG Rules and Regulations will result in a loss of my privileges of access to this tool. The law enforcement data maintained by BCI on the OHLEG site is provided at and subject to the discretion of BCI. BCIs grant of access to OHLEG confers upon me no process or other rights in maintaining such access. I ACKNOWLEDGE THAT I HAVE READ THE CURRENT VERSION OF THE OHLEG RULES AND REGULATIONS AND WATCHED THE REQUIRED SECURITY TRAINING VIDEO, AVAILABLE ON THE OHLEG SITE.

CEO Printed Name: Michael Bertolasio Date: 9/9/25

Title: Acting Chief / Lieutenant

CEO Signature: MB OAI/ORI #: OH0040200

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

This is to certify that

[redacted]

has successfully met the prescribed program requirements for

Ethics Law - 2025

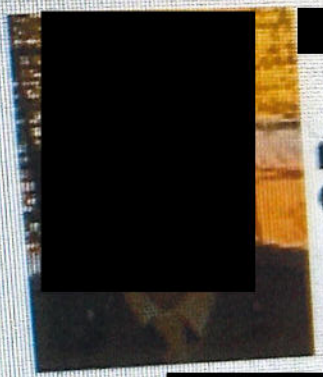
September 08, 2025

Dave Yost
Ohio Attorney General

Thomas Quinlan, Executive Director
Ohio Peace Officer Training Commission

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

low. If a



[redacted]

FULL FACE MASK DIVING

Cert: [redacted]

PDR

PROFESSIONAL DIVING RESOURCES

SSI ID: [redacted]

CERTIFICATION DATA

Date: 01 Jul 2025

Pro: Nicole Bowles

Pro ID: 97360

Professional Diving Resources

9 + LOGGED DIVES

TRAINED FULL FACE MASK TYPE

AGA FFM

[redacted]

DIVING SINCE 2025

DIVESSI.COM

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

July 10, 2025

by completing the following exam:

Inquiry Test

This certificate is good through

July 10, 2027

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

July 10, 2025

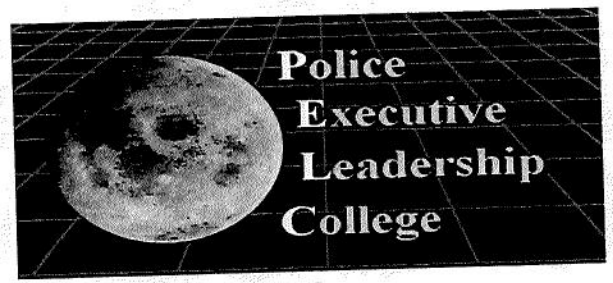
by completing the following exam:

Security and Privacy - General User

This certificate is good through

July 10, 2026

POLICE EXECUTIVE LEADERSHIP COLLEGE



Certificate of Completion

AWARDED TO

[redacted]

PELC 91, Spring 2025
On June 27, 2025



BY
THE LAW ENFORCEMENT FOUNDATION, INC.
IN COOPERATION WITH THE
OHIO ASSOCIATION OF CHIEFS OF POLICE, INC.



LEF PRESIDENT

PELC DIRECTOR

DIVE RESCUE INTERNATIONAL

Certificate of Training

Dive Rescue I

Let it be known that:

[redacted]

has successfully completed the Dive Rescue I program (24-hour course of study) addressing topics including drowning; dive team organization and management; search patterns; line tending; scene evaluation; victim retrieval; service to family, media and other agencies; vehicle accidents; and underwater investigation.

This program addresses specific Job Performance Requirements and Standards put forth in NFPA 1006 and 2500.

Justin Fox
President
Dive Rescue International

Fred Jackson
Instructor(s)

June 9 - 11, 2025
Course Dates

Certificate expires three years from date of issue.

SCUBA DIVING INTERNATIONAL

Verification Letter

2025-06-09

This letter is to verify that [redacted] (Number: [redacted]) has successfully completed the course requirements for:

SDI Open Water Scuba Diver

On: 2025-06-07

The instructor was Nicole Tupek, Member: #32424 at the location: Diver's World of Erie, Inc..

If you have any questions, please contact World HQ at +1-207-729-4201 or +1-888-778-9073 or by e-mail at worldhq@tdisdi.com

Thank you,

Scuba Diving International
International Training
www.tdisdi.com



[redacted]

SDI

Has completed the course requirements for the rating of:

Cert: [redacted]
Date: 2025-06-07

SDI Open Water Scuba Diver

Facility: Diver's World of Erie, Inc.
Erie, Pennsylvania United States
Inst: Nicole Tupek Member: #32424
Asst: Jason Travitz Member: #27566

RSTC Member | EUF/ISO #9001 Certified | www.tdisdi.com

diver's World

POLICE EXECUTIVE LEADERSHIP COLLEGE



Certificate of Completion

Leadership & Conflict Management (6.5 Leadership hours) on May 22, 2025 – course number 25CPT192

AWARDED TO

[redacted]

BY
THE LAW ENFORCEMENT FOUNDATION, INC.
IN COOPERATION WITH THE
OHIO ASSOCIATION OF CHIEFS OF POLICE, INC.

LEF PRESIDENT

PELC DIRECTOR

POLICE EXECUTIVE LEADERSHIP COLLEGE



Certificate of Completion

Legal Leadership on May 19, 2025

- *Legal Updates (2 hours) & Arrest, Search, & Seizure (1 hour) – course number 25CPT080*
- *Use of Force (3 hours) – course number 25CPT081*

AWARDED TO

[redacted]

BY
THE LAW ENFORCEMENT FOUNDATION, INC.
IN COOPERATION WITH THE
OHIO ASSOCIATION OF CHIEFS OF POLICE, INC.

LEF PRESIDENT

PELC DIRECTOR

DIVE RESCUE INTERNATIONAL

Certificate of Training

Med Dive

Let it be known that:

[redacted]

has successfully completed the Med Dive program (16-hour course of study) addressing topics including human factors in dive related accidents and illnesses; gas laws and their effects on divers; understanding appropriate fitness to dive; non-pulmonary barotrauma; neurological injuries; decompression illness; pulmonary over-inflation syndrome; arterial gas emboli; inert gas disorders and unique gas problems, oxygen therapy and field stabilization of compressed gas injuries.

Justin Fox
President
Dive Rescue International

Fred Jackson
Instructor(s)

February 7 - 9, 2025
Course Dates

Cleveland Clinic
Emergency Medical Services

This certifies that

[redacted]

has successfully completed 24 hour of the following continuing education course:

Med Dive - Selected Readings in Diving Physiology and Medicine

CARDIOLOGY: 0 CE HOURS GERIATRIC: 0 CE HOURS PEDIATRIC: 0 CE HOURS TRAUMA: 0 CE HOURS INSTRUCTOR CE: 0 HOURS

Course Dates
Feb 7 - 9, 2025

Michael G Simon, MBA, NRP, EMS-I
Enterprise EMS Education Manager
Program Director

Christopher Myers, DO
Enterprise Medical Director
Cleveland Clinic

CLEVELAND CLINIC IS AN APPROVED CE PROVIDER BY THE OHIO EMFTS BOARD APPROVAL #1409.

United States Department of Justice
National Domestic Communications
Assistance Center

Certificate of Completion
Is hereby presented to:

[redacted]

Conneaut Police Department

On this 5rd day of February 2025

For participating in 16 hours of the
Introduction to Geolocation Data for Law Enforcement Investigations Course held on
February 4-5, 2025 in Columbus, Ohio

Mervin Rodriguez
Director of the National Domestic Communications Assistance Center

DIVE RESCUE INTERNATIONAL

Certificate of Training

Humminbird® Sonar Technician

Let it be known that:

[redacted]

has successfully completed the Humminbird® Sonar Technician program(16-hour course of study) addressing topics including basic sonar theory, types and use; sonar beams, range zones, and resolution; sonar shadows, reflectivity, and noise; imaging aircraft, automobile, drownings/fatalities, evidence, and weapons; search patterns; mapping and GPS.

This program addresses specific Job Performance Requirements and Standards put forth in NFPA 1006 and 2500.

Justin Fox
President
Dive Rescue International

Devon Otwell
Instructor(s)

August 11-12, 2024
Course Dates

Ohio SCHOOL SAFETY CENTER

ALL HAZARDS
A University of Findlay Training Center

Certificate of Completion

awarded by

THE ALL HAZARDS TRAINING CENTER

to

[redacted]

for Successful Completion of

After-School Preparedness - Zoom Training
(Contact Hours: 3 hrs)
9/30/2024

SENIOR DIRECTOR

INSTRUCTOR

NORTH COAST POLYTECHNIC INSTITUTE

This is to certify that

[redacted]

Conneaut PD

has completed 24 hrs of CPT instruction in

24CPT006: Search and Seizure/ Search Warrants (8 hrs)
24CPT007: Team Building and Motivation (3 hrs)
24CPT009: Testifying in Court (2 hrs)
24CPT075: Officer Safety (3 hrs)
24CPT2024LU: Legal Updates (2 hrs)
24CPT2024NO: NIBIN (1 hr)
24CPT2024MH: Responding to Mental Health Issues (2 hrs)
24CPT2024CM: Crisis Mitigation (2 hrs)
24CPT2024VR: Victim's Rights-Marsy's Law (1 hr)

Oct 8-10, 2024
Date

William D. Healy
Training Director

DIVE RESCUE INTERNATIONAL

Certificate of Training

Boat Based Operations

Surface Support

Let it be known that:

[redacted]

has successfully completed the Boat Based Operations program (24-hour course of study) addressing topics including types of boats, capacities, IDs, and registrations; types of hulls, fueling, and propulsion; rules of navigation; vessel lighting, sizes and classes; radios; man overboard; anchors and anchoring principles; docking; and search patterns.

This program addresses specific Job Performance Requirements and Standards put forth in NFPA 1006 and 2500.

Justin Fox
President
Dive Rescue International

Jeff Morgan
Instructor(s)

July 27-29, 2024
Course Dates

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

This is to certify that

[redacted]

has successfully met the prescribed program requirements for

Clandestine Drug Lab Recertification/Refresher Course

July 09, 2024

Dave Yost
Ohio Attorney General

Thomas Quinlan, Executive Director
Ohio Peace Officer Training Commission

Vernon P. Stanforth, Chairperson
Ohio Peace Officer Training Commission

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE CONFERENCE COURSE INDICATED BELOW

High-Risk Unified Commander (HRUC)

June 12, 2024

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

OTOA

OHIO TACTICAL OFFICERS ASSOCIATION

THIS CERTIFIES THAT

[redacted]

HAS SUCCESSFULLY COMPLETED THE CONFERENCE COURSE INDICATED BELOW

Search Warrant Planning Ops by Dayton PD

June 13, 2024

Patrick Fiorilli
Executive Director

OTOA

Terry Graham
President

The United States of America

Department of Homeland Security
Federal Law Enforcement Training Centers

Accredited by the Federal Law Enforcement Training Accreditation Board

By virtue of the authority vested therein, the Faculty hereby confers upon

[redacted]

the honor of this

Certificate of Training

BASIC TACTICAL MEDICAL INSTRUCTOR TRAINING PROGRAM G_XP_BTMITP-2403SLTD

Austinburg, OH

Course Hours: 24

For successful completion of all theoretical and practical aspects of the training and examinations as set forth in the requirements for graduation from an advance program, with all of the honors, rights, and privileges thereunto appertaining.

In testimony whereof, this diploma is awarded under the seal of the U. S. Department of Homeland Security at the Federal Law Enforcement Training Centers, this 13th day of December, 2023

Director
Federal Law Enforcement Training Centers

NORTH COAST POLYTECHNIC INSTITUTE

North Coast Polytechnic Institute 1999

This is to certify that

[redacted]

Conneaut PD

has completed 24 hrs of CPT instruction in

CPT002: Ethical Leadership (4 hrs)
CPT003: Crucial Conversations (4 hrs)
CPT004: Verbal Judo (2 hrs)
CPT005: Officer Wellness (2 hrs)
CPT006: Criminal Patrol (4 hrs)
CPT007: Arrest, Search & Seizure (2 hrs)
CPT065: Legal Updates (3 hrs)
CPT076: School Safety (3 hrs)

October 10-12, 2023
Dates

William D. Healy
Training Director

© 2022 Great Papers

CERTIFICATE

OF ATTENDANCE

[redacted]

For participating in the 90-minute Training "Corroborating Evidence: For Prosecutors, Law Enforcement, Forensic Interviewers, and Other MDT Members" on October 3, 2023

Kerri Mongenel

Coordinator, Ashtabula Area Child Advocacy Center

zero abuse PROJECT

aacac ashtabula area CHILD ADVOCACY CENTER INSIDE SIGNATURE HEALTH

This is a certificate of attendance only and does not guarantee Continuing Education Credit through your licensing board.

CERTIFICATE

OF ATTENDANCE

[redacted]

For participating in the 90-minute Training "Rapport - It's Not Just a Phase"
on October 3, 2023

Kerri Mongenel

Coordinator, Ashtabula Area Child
Advocacy Center

zero abuse PROJECT

aacac
ashtabula area
CHILD ADVOCACY CENTER
INSIDE SIGNATURE HEALTH

This is a certificate of attendance only and does not guarantee Continuing Education Credit through your licensing board.

CERTIFICATE

OF ATTENDANCE

[redacted]

For participating in the 90-minute Training "Leveraging Medical Experts and Evidence in Child Exploitation Investigations" on October 3, 2023

Kerri Mongenel

Coordinator, Ashtabula Area Child Advocacy Center

zero abuse PROJECT

aacac ashtabula area CHILD ADVOCACY CENTER INSIDE SIGNATURE HEALTH

This is a certificate of attendance only and does not guarantee Continuing Education Credit through your licensing board.

LEADS

Law Enforcement Ohio Automated Data System

This is to certify that

[redacted]

has successfully completed the Ohio LEADS testing on

July 11, 2023

by completing the following exam:

Inquiry Test

This certificate is good through

July 11, 2025

Legal and Liability

Risk Management Institute

CERTIFICATE OF ATTENDANCE

[redacted]

has completed the online training course

Investigating Child Homicides and Unexplained Death of Children

Instructors: Robert Lowery and Michael Murphy

Credit Hours: 6.0

June 26, 2023

DIRECTOR
Legal & Liability Risk Management Institute

LEGAL & LIABILITY RISK MANAGEMENT INSTITUTE

NCJTC
National Criminal Justice Training Center
Fox Valley Technical College

Certificate of Attendance
Live Webinar

This certificate recognizes that

[redacted]

attended **IoT Webinar: Connected Vehicles for Law Enforcement**
on March 28, 2023 for 80 minutes

Bradley Russ
Executive Director
National Criminal Justice Training Center
Fox Valley Technical College

Dr. Christopher J. Matheny
President
Fox Valley Technical College

Fox Valley TECHNICAL COLLEGE
Knowledge That Works

Ashtabula Police Department

This is to certify that

[redacted]

Has successfully completed the advanced training course

Response to Active Threat

Rescue Task Force

In Ashtabula, Ohio

July 6th and 7th 2022

Robert D. Stell

Chief of Police

Lt. William M. Parkomaki

Instructor

Legal and Liability Risk Management Institute

CERTIFICATE OF ATTENDANCE

[redacted]

Has completed 20 hours in

Homicide Investigations, Tactics and Procedures

Columbus, OH
3/7/2023 through 3/9/2023

James R. Alsup
Director

"Dedicated to Setting Risk Management Standards"

NORTH COAST POLYTECHNIC INSTITUTE

North Coast Polytechnic Institute 1999

This is to certify that

[redacted]

Conneaut PD

has completed 24 hrs of CPT instruction in

CPT061: Legal Updates (4 hrs)
CPT062: Domestic Violence (4 hrs)
CPT063: Responding to Mental Health Crises (4 hrs)
CPT064: Use of Force (4 hrs)
CPT065: Responding to Sexual Assault (4 hrs)
CPT080: Building Trust and Mutual Respect (4 hrs)

Oct 3-5, 2022
Dates

William D. Healy
Training Director

Legal and Liability
Risk Management Institute

CERTIFICATE OF ATTENDANCE

[redacted]

Has completed 16 hours in

Internal Affairs Administrative Investigation and Officer Discipline

Columbus, OH
8/23/2022 through 8/24/2022

James R. Alsup
Director

"Dedicated to Setting Risk Management Standards"

- OHIO ATTORNEY GENERAL -
RECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

[redacted]

has completed the Ohio Attorney General's online training course

OHLEG Security Training 2022

Dave Yost

DAVE YOST, OHIO ATTORNEY GENERAL

April 25, 2022

DAVE YOST
OHIO ATTORNEY GENERAL

COMMAND PRESENCE

TRANSFORMING GOOD OFFICERS INTO GREAT ONES

Certificate of Training

Presented to

[redacted]

For successfully completing

De-Escalation: Strategies for Best Possible Outcomes
Train the Trainer - 24 Hrs

Completed on June 21-23, 2021

John Bostain
President

Michael Warren
Director of Training

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

COVID-19 FOR LOCAL GOVERNMENT PERSONNEL

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 07, 2020

Starlet Franz
Training Coordinator

PRAETORIAN DIGITAL

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

INFECTIOUS AND COMMUNICABLE DISEASES

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 07, 2020

Starlet Franz
Training Coordinator

PRAETORIAN DIGITAL

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

LICENSES/CERTIFICATES: EMT 72429

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

AIRBORNE AND BLOODBORNE PATHOGENS

COURSE # 18-PRAE-F3-1380

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 07, 2020

David K. Tan, M.D., EMT-T, FAAEM
Medical Director, Online Training

This continuing education activity is approved by the Commission on Accreditation for Pre-Hospital Continuing Education (CAPCE)
Course #: 18-PRAE-F3-1380, CEH Number and Type: 1 CEH of -.
You have participated in a continuing education program that has received CAPCE approval for continuing education credit.

CEH Type: First Responder, Basic or Advanced
This document must be retained for a period of four years.

CAPCE Provider: Lexipol Learning, Provider No.: Prae1999
200 Green Street, Suite 200, San Francisco, CA 94111
Internal ID Provider: Lexipol Learning, Provider No.:
200 Green Street, Suite 200, San Francisco, CA 94111

If you have any comments regarding the quality of this program and/or your satisfaction with it, please contact CAPCE at: 12300 Ford Road, Suite 350, Dallas, Texas 75234 - 972.247.4442- jscott@capce.org.

LEXIPOL

CERTIFICATE OF COMPLETION

AWARDED TO

[redacted]

OF CONNEAUT POLICE DEPARTMENT
IN RECOGNITION OF YOUR SUCCESSFUL COMPLETION OF

COVID-19 FOR LAW ENFORCEMENT

COURSE # 20238-2003

1 HOUR OF TRAINING

CERTIFICATE ISSUED APR 06, 2020

Starlet Franz
Training Coordinator

IADLEST Certified

PRAETORIAN DIGITAL

OHIO PEACE OFFICER TRAINING ACADEMY eOPOTA

This is to certify that

[redacted]

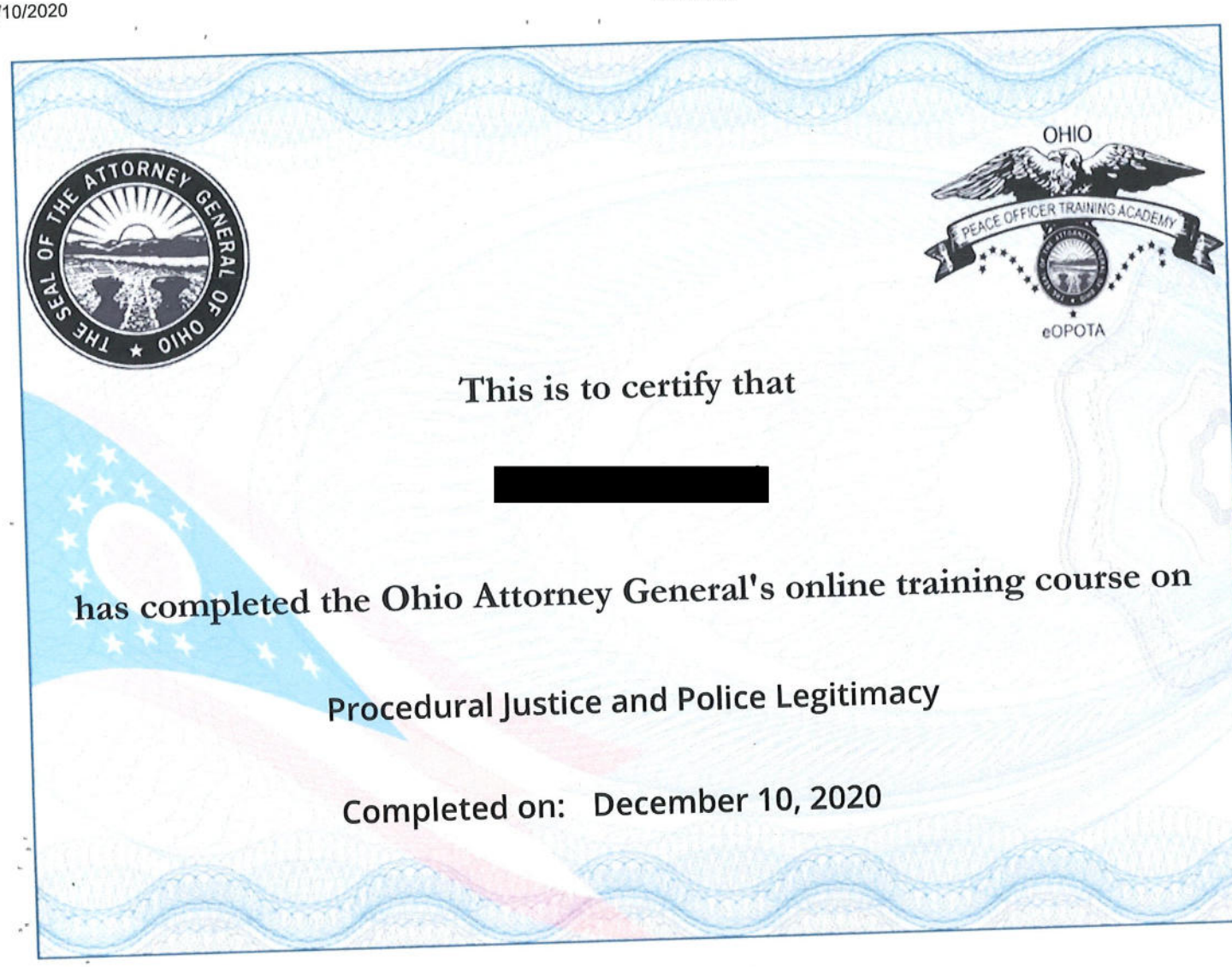
has completed the Ohio Attorney General's online training course on

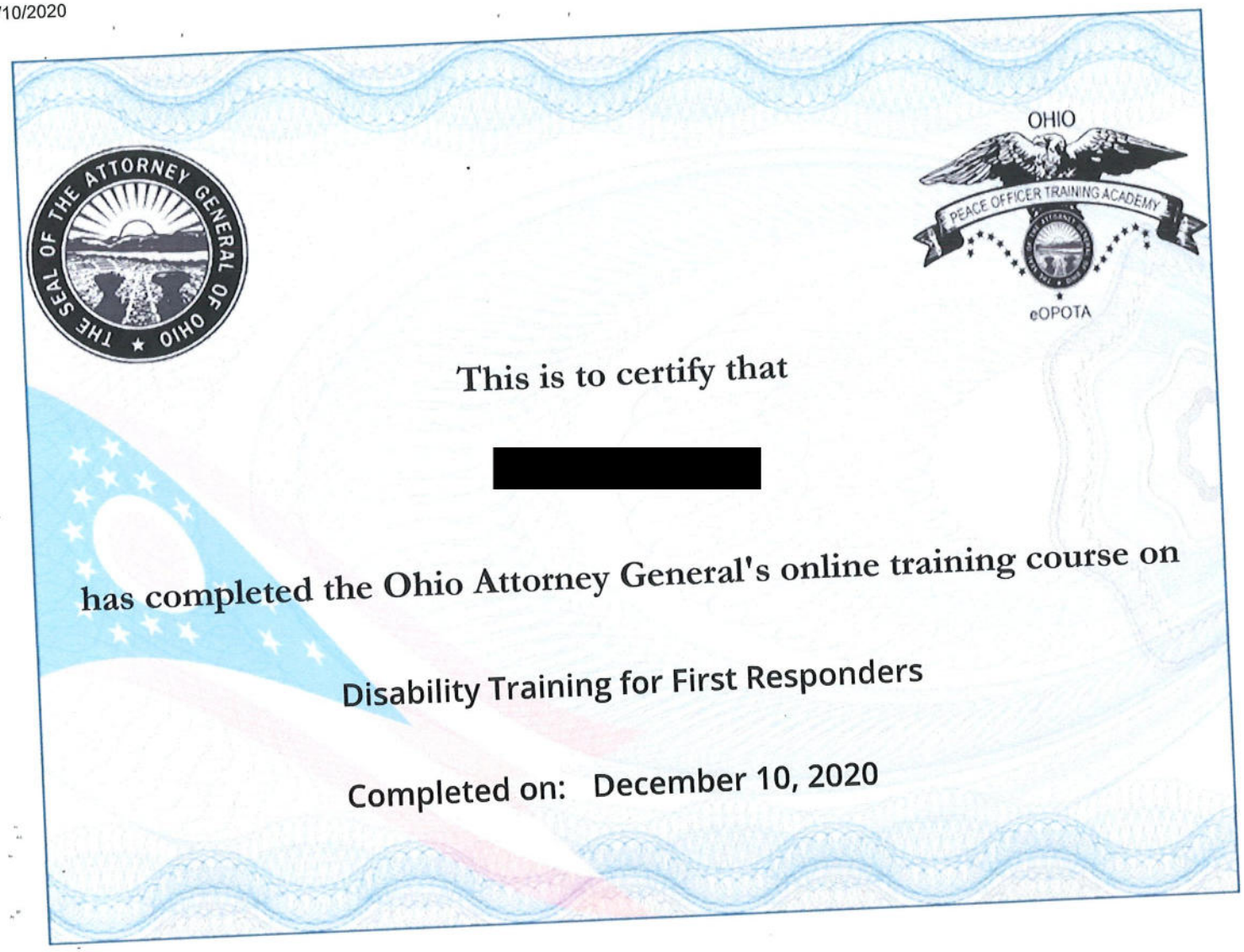
Trooper Coates Killer Interview

Completed on: April 20, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Child Abuse and Neglect
Completed on: March 20, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
CODIS Arrestee and Convicted Offender DNA Collections
Completed on: July 17, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Procedural Justice and Police Legitimacy
Completed on: December 10, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Disability Training for First Responders
Completed on: December 10, 2020

OHIO PEACE OFFICER TRAINING ACADEMY eOPOTA

This is to certify that

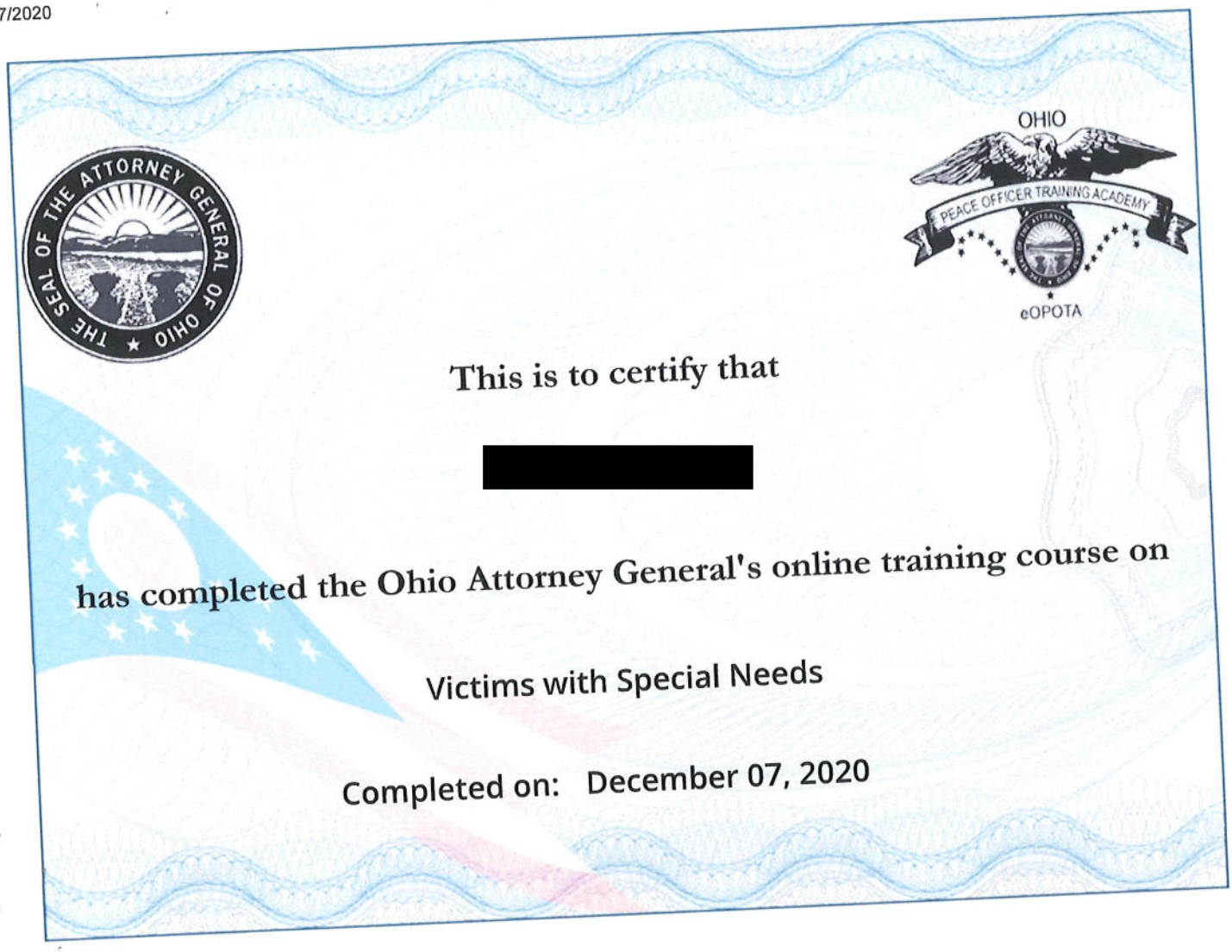
[redacted]

has completed the Ohio Attorney General's online training course on

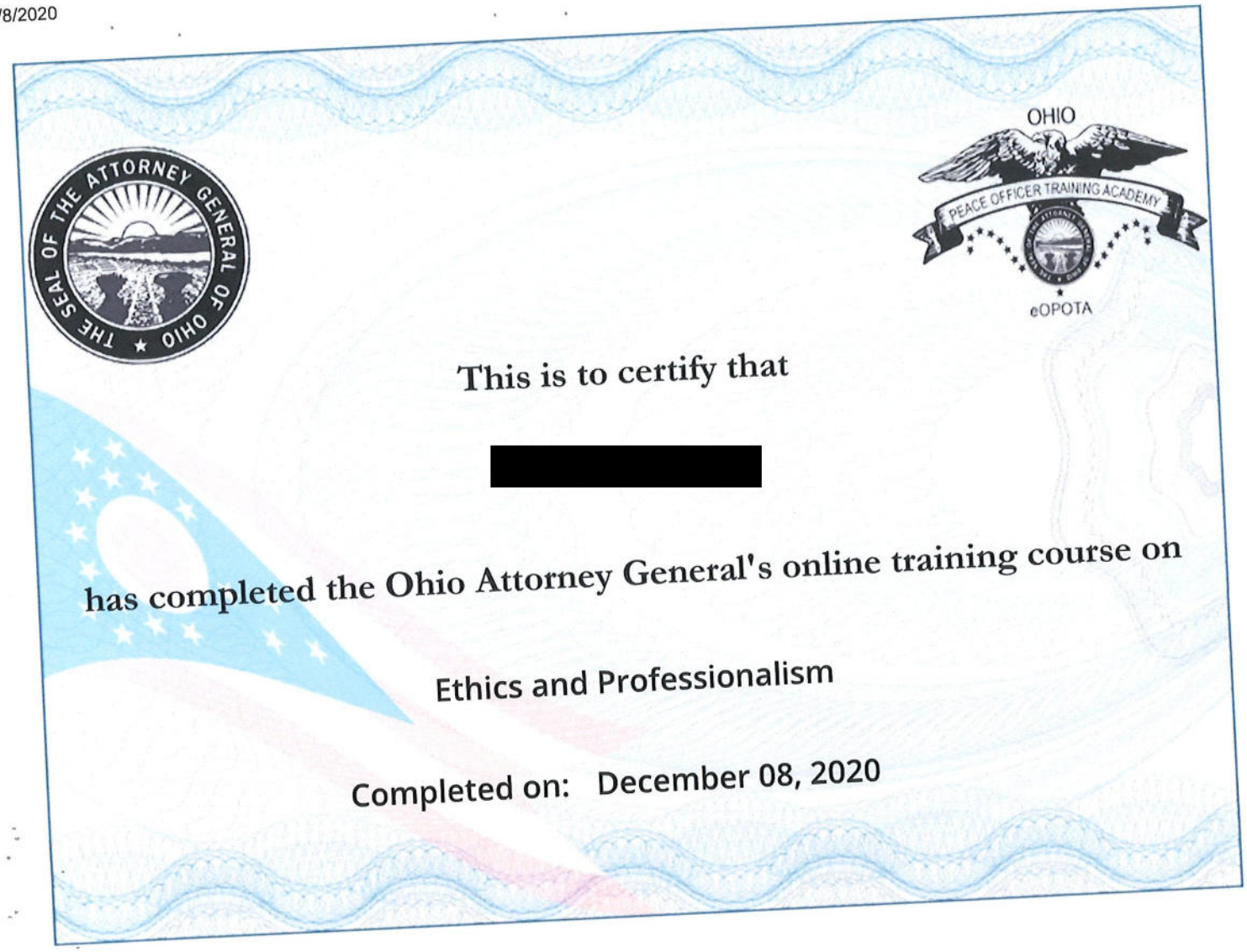
Crimes Against Children

Completed on: December 08, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Interviewing the Crime Victim
Completed on: December 07, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Victims with Special Needs
Completed on: December 07, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Use of Force, Liability and Standards
Completed on: December 08, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Ethics and Professionalism
Completed on: December 08, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Terrorism Awareness
Completed on: December 08, 2020





This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Street Smart Series: Concealment

Completed on: December 08, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Missing Children Clearinghouse
Completed on: December 08, 2020

OHIO PEACE OFFICER TRAINING ACADEMY eOPOTA

This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

OARRS for Law Enforcement

Completed on: July 24, 2020

Certificate of Completion

This is to certify that

[redacted]

has successfully completed the 12-hour Virtual Course in

Background Investigations for Police Applicants

hosted by Law Enforcement Seminars LLC

August 27 & 28, 2020

Thomas Ward
Law Enforcement Seminars, LLC

© GOES 34625

LITHO IN U.S.A.



INTERNATIONAL ASSOCIATION FOR PROPERTY AND EVIDENCE, INC.

Certificate of Attendance

This is to certify that

[redacted]

Student Number [redacted]

has completed 16 hours of Video Training
in

Managing Property and Evidence in Law Enforcement

Joseph T. Latta
Executive Director

Burbank, California
Headquarters

11/29/2020





This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Clandestine Drug Lab Recertification/Refresher

Completed on: January 03, 2021

- OHIO ATTORNEY GENERAL -

RECOGNITION OF COMPLETION AWARD

This certificate of completion is awarded to

[redacted]

Has successfully completed the 8 hour

"Meth Safety and Awareness Recertification Training"

December 5, 2019

SUPERINTENDENT

INSTRUCTOR





This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Responding to Sexual Assault

Completed on: November 23, 2019





This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Street Smart Series: Cough Suppressants Alcohol GHB

Completed on: February 16, 2020

[redacted] // TRANSCRIPT

Print

Code	Course	Credits	Course Status	Date Completed	Lesson	Status	Score
-	2017 Legal Update: Issues in Interrogations and Confessions (#832369)	1	Completed	Dec 27, 2019 10:50 AM	Legal Issues in Interrogations and Confessions	Completed, Passed	100%
-	Awareness of Human Trafficking (#229832)	-	Completed	Sep 21, 2016 10:14 AM	Awareness of Human Trafficking	Completed, Passed	100%
-	Companion Animal Encounters (#229833)	-	Completed	Mar 20, 2017 3:45 PM	Companion Animal Encounters	Completed, Passed	70%
-	Domestic Violence Legal Updates: Ohio Domestic Violence Laws (#229834)	-	Completed	Oct 16, 2015 8:09 AM	Domestic Violence Legal Updates: Ohio Domestic Violence Laws	Completed, Passed	79%
-	Finding Words (#229835)	-	Completed	Oct 7, 2014 12:23 PM	Finding Words	Completed, Passed	100%
-	Missing Persons (#229836)	-	Completed	Mar 22, 2017 3:40 PM	Missing Persons	Completed, Passed	80%
-	Ohio Human Trafficking (#229837)	-	Completed	Mar 29, 2017 12:15 PM	Ohio Human Trafficking	Completed, Passed	100%
-	Responding to Human Trafficking (#229838)	-	Completed	Mar 29, 2017 10:51 AM	Responding to Human Trafficking	Completed, Passed	100%
CI001	Biological Evidence Collection and Retention (#835302)	1	Completed	Jan 26, 2020 5:50 PM	Biological Evidence Collection and Retention	Completed, Passed	90%
CI006	Cybercrime (#834055)	1	Completed	Jan 12, 2020 6:25 PM	Cybercrime	Completed	60%
CI010	Investment Fraud (#834566)	1	Completed	Jan 17, 2020 8:21 AM	Investment Fraud	Completed	90%

CI011	Medical Fraud (#837948)	1	Completed	Feb 14, 2020 9:15 AM	Medical Fraud	Completed	70%
LET002	Location and Recovery (#833144)	1	Completed	Jan 3, 2020 9:17 AM	Location and Recovery	Completed	-

OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA

This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Medical Fraud

Completed on: February 14, 2020





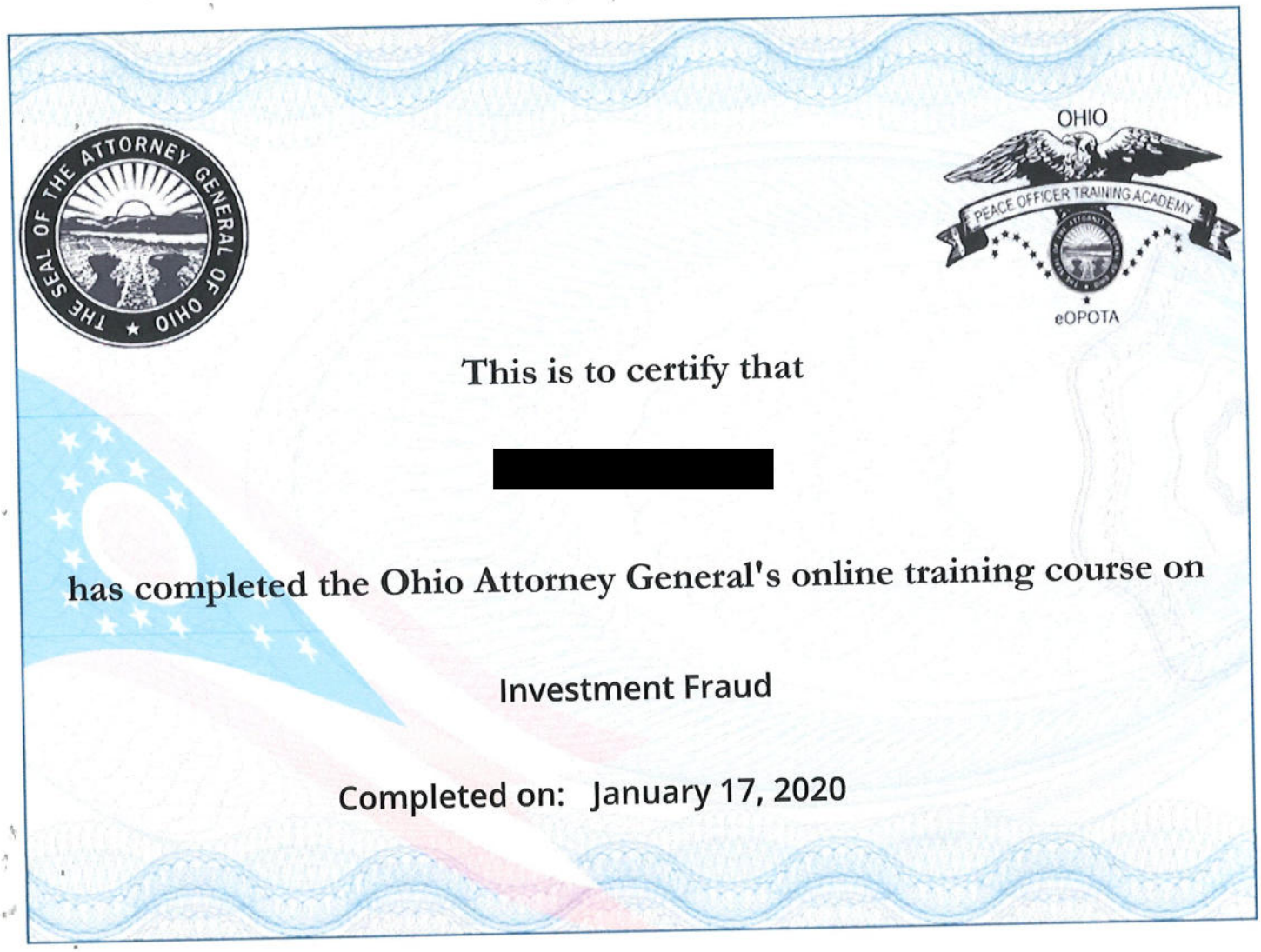
This is to certify that

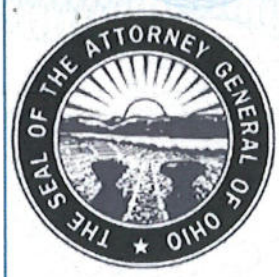
[redacted]

has completed the Ohio Attorney General's online training course on

Location and Recovery

Completed on: January 03, 2020


THE SEAL OF THE ATTORNEY GENERAL OF OHIO
OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA
This is to certify that
[redacted]
has completed the Ohio Attorney General's online training course on
Investment Fraud
Completed on: January 17, 2020





This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Cybercrime

Completed on: January 12, 2020

OHIO
PEACE OFFICER TRAINING ACADEMY
eOPOTA

This is to certify that

[redacted]

has completed the Ohio Attorney General's online training course on

Biological Evidence Collection and Retention

Completed on: January 26, 2020

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 19 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF: 1
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: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	25 - 1			MISS: 0	OT: 0	ERF: 1

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 6-23-26 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-25-28

[redacted]

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: CPD	20	0	1	19	19	0	19	19

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1	1.5 sec	On signal, engage the target preferred area one round.
6	75 Ft	5	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER:			COURSE OF FIRE:	
COLT			RE-QUAL	
MODEL:	CALIBER:	SERIAL NUMBER:	SCORE:	INSTRUCTOR:
1944	.223	[redacted]	19	DIETZ

INSTRUCTOR:		OPOTC INSTRUCTOR NUMBER:	DATE:
INSTRUCTOR SIGNATURE:		02814	6-22-23
		AGENCY: CONVENT P.D.	

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 17 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: ~~0~~ 1	NPA: 1	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 6-19-25 PASSED: ✓ FAILED:

TESTED BY: [signature] REQ#: 02874 EXP: 6-25-28

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: CPD	20	0	1	19	19	0	19	19

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1	1.5 sec	On signal, engage the target preferred area one round.
6	75 Ft	5	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3 1 NP	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER: Colt			COURSE OF FIRE: RIFLE, RE-QUM	
MODEL: M4	CALIBER: .223	SERIAL NUMBER: [redacted]	SCORE: 19	INSTRUCTOR: DISTEL

INSTRUCTOR: DISTEL	OPOTC INSTRUCTOR NUMBER: 02874	DATE: 6-19-25
INSTRUCTOR SIGNATURE: [signature]	AGENCY: CONNEAUT P.D.	

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: GLOCK MODEL: 19 SERIAL #: [redacted]
W/RDS

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 1	NPA: 1	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 6-12-25 PASSED: ✓ FAILED:

TESTED BY: ROSE REQ#: 0C322 EXP: 8-22-28

X [redacted]

LOW LIGHT

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 26 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 1	NPA: 1	NF:	MISS:	OT:	ERF:
SUB TOTALS: 24				MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 11-4-24 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-25-25

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: C.P.D.	13	2	5	13	13	2	11	11

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3 3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3 2 2NP	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3 1 2NP	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2 2 1	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1 1M	1.5 sec.	On signal, engage the target preferred area one round.
6	75 Ft	4K 5 1NP	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3 2 1 MG	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER:			COURSE OF FIRE: NIGHT FIRE	
MODEL:	CALIBER:	SERIAL NUMBER:	SCORE: 11	INSTRUCTOR: DISTEL

INSTRUCTOR: DISTEL	OPOTC INSTRUCTOR NUMBER: 02874	DATE: 11-4-24
INSTRUCTOR SIGNATURE: [signature]	AGENCY: C.P.D.	

[redacted]

Low Light Pistol Drills Score Sheet

1. **Low Ready**

Rounds Required: 10, Rounds Fired: _____, Hits: 8, Misses: 2, Score %: _____

2. **From The Holster**

Rounds Required: 15, Rounds Fired: _____, Hits: 13, Misses: 2, Score %: _____

3. **Scan and Identify**

Rounds Required: 12, Rounds Fired: _____, Hits: 4/4 4/4 4/4, Misses: 3, Score %: _____

4. **Controlled Pairs**

Rounds Required: 10, Rounds Fired: _____, Hits: 9, Misses: 1, Score %: _____

5. **Transitions**

Rounds Required: 10, Rounds Fired: _____, Hits: 7, Misses: 3, Score %: _____

6. **1.,2.,3.-3.,2.,1.**

Rounds Required: 12, Rounds Fired: _____, Hits: 12, Misses: 0, Score %: _____

7. **Near to Far**

Rounds Required: 12, Rounds Fired: _____, Hits: 11, Misses: 1, Score %: _____

8. **Moving from Cover to Cover**

Rounds Required: 18, Rounds Fired: _____, Hits: 16, Misses: 2, Score %: _____

Overall Totals

Rounds Required: 102, Rounds Fired: 99, Hits: 85, Misses: _____, Score %: 85

Shooter's Name & Badge Number, Print: _____

[redacted]

[redacted]

Low Light Rifle Drills Score Sheet

1. **Low Ready 1 Round**

Rounds Required: 5, Rounds Fired: 7, Hits: 7, Misses: _____, Score %: 100

2. **Low Ready 2 Rounds**

Rounds Required: 10, Rounds Fired: 10, Hits: 10, Misses: _____, Score %: 100

3. **Low Ready 3 Rounds**

Rounds Required: 15, Rounds Fired: 15, Hits: 15, Misses: _____, Score %: 100

4. **Scan and Identify**

Rounds Required: 12, Rounds Fired: 12, Hits: 11, Misses: 1, Score %: _____

5. **1.,2.,3.-3.,2.,1.**

Rounds Required: 12, Rounds Fired: 12, Hits: 12, Misses: _____, Score %: 100

6. **Near to Far**

Rounds Required: 12, Rounds Fired: _____, Hits: _____, Misses: _____, Score %: _____

7. **Transitions**

Rounds Required: 18, Rounds Fired: _____, Hits: _____, Misses: _____, Score %: _____

8. **Moving from Cover to Cover**

Rounds Required: 18, Rounds Fired: _____, Hits: _____, Misses: _____, Score %: _____

Overall Totals

Rounds Required: 102, Rounds Fired: _____, Hits: _____, Misses: _____, Score %: 99

Shooter's Name & Badge Number, Print: _____ [redacted]

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 26 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (PA) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (NPA), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (NF) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (MISS), OFF OF THE TARGET (MISS), OR FIRED OVER THE TIME LIMIT (OT) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (ERF) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 3A	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 3B	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 4	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 5	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 6	PA: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 8-22-23 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 09292 EXP: 5-31-26

[redacted]

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 17 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 8-22-23 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-25-25

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 19 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	25			MISS:	OT:	ERF:

TOTAL: 25 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 5-7-24 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-25-25

[redacted]

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 22 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 4-7-24 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-25-25

[redacted]

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: CPD	20	0	0	20	20	0	20	20

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1	1.5 sec.	On signal, engage the target preferred area one round.
6	75 Ft	5	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER: Colt			COURSE OF FIRE: RE-QUAL	
MODEL: M4	CALIBER: 556	SERIAL NUMBER: [redacted]	SCORE: 20	INSTRUCTOR: S1

INSTRUCTOR: Dister	OPOTC INSTRUCTOR NUMBER: 02874	DATE: 5-7-24
INSTRUCTOR SIGNATURE: [signature]	AGENCY: C.P.D.	

[redacted]

Conneaut Police Department
Firearms Division
Shotgun
Date Training: 5 / 7 / 24

Officer: [redacted]

Department: CPD

Weapon (make/model/serial number/caliber):

Remington / 870 / [redacted] / 12GA
Make / Model / serial number / caliber

	1st Attempt. H /M	2nd Attempt. H /M	P / F
Stage 1:	7		P
Stage 2:	7		P
Stage 3:	7		P
Stage 4: Slug	7		P

WEATHER CONDITIONS: CLR

OFFICER SIGNATURE: [redacted]

RANGE INSTRUCTOR: [signature]

REQ NUMBER / EXPIRATION: 02874 / 6-25-25

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: Cornelius PD

WEAPON MAKE: Glock MODEL: 19 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 2	NPA: 1	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 2	NPA: 1	NF:	MISS:	OT:	ERF:
STAGE 6	PA: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS: 23				MISS:	OT:	ERF:

TOTAL: 23 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 4-5-21 PASSED: ✓ FAILED:

TESTED BY: [redacted] 764 REQ#: 05332 EXP: 8.22.22

[redacted]

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: CPD	20	0	1	19	19	0	19	19

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3 3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3 3	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3 2	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2 2	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1 1	1.5 sec	On signal, engage the target preferred area one round.
6	75 Ft	5 5	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3 1 NRA	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER: Colt			COURSE OF FIRE: RIFLE	
MODEL: M4	CALIBER: .223	SERIAL NUMBER: [redacted]	SCORE:	INSTRUCTOR: ROSE

INSTRUCTOR: ROSE	OPOTC INSTRUCTOR NUMBER: 06322	DATE: 9-22-23
INSTRUCTOR SIGNATURE: [signature]	AGENCY: CONNEAUT PD	

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: Clo

WEAPON MAKE: Glock 1 MODEL: 19 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 1	NPA: 1	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 6-17-22 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-24-25

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 26 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 2	NPA: 1	NF:	MISS:	OT:	ERF: 1
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: 2	NPA: 1	NF:	MISS:	OT:	ERF:

SUB TOTALS: 23 MISS: 2 OT: ERF: 1

TOTAL: 23 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 6-17-22 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-24-24

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: C.P.D	20	0	0	20	20	0	20	20

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3 3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3 3	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3 3	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2 2	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1 1	1.5 sec	On signal, engage the target preferred area one round.
6	75 Ft	5 5	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3 3	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER:			COURSE OF FIRE:	
Colt			RE-QUAL	
MODEL:	CALIBER:	SERIAL NUMBER:	SCORE:	INSTRUCTOR:
174	.223	[redacted]	20	DISTEL

INSTRUCTOR: DISTEL	OPOTC INSTRUCTOR NUMBER: REQ 02874	DATE: 6-17-22
INSTRUCTOR SIGNATURE: [signature]	AGENCY: C.P.D.	

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: Conneaut Police Dept.

WEAPON MAKE: Glock MODEL: G-23 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (PA) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (NPA), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (NF) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (MISS), OFF OF THE TARGET (MISS), OR FIRED OVER THE TIME LIMIT (OT) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (ERF) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 3A	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 3B	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 4	PA: 5	NPA: 1	NF:	MISS:	OT:	ERF:
STAGE 5	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 6	PA: 1	NPA: 1	NF:	MISS:	OT:	ERF:
SUB TOTALS:	23			MISS:	OT:	ERF:

TOTAL: 23 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 7-23-19 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-24-22

OFFICER'S SIGNATURE [redacted]

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: Conneaut	20	0	0	20	20	0	20	20

* WITH PLATE CARRIER

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1	1.5 sec	On signal, engage the target preferred area one round.
6	75 Ft	5	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER: Colt			COURSE OF FIRE: Requalification	
MODEL: M-4	CALIBER: .223/5.56	SERIAL NUMBER: [redacted]	SCORE: 20	INSTRUCTOR: DIXON

INSTRUCTOR: DIXON		OPOTC INSTRUCTOR NUMBER: 07824	DATE: 7-23-19
INSTRUCTOR SIGNATURE: [signature]		AGENCY: Conneaut Police Department	
Officer Signature: [redacted]			

O.P.O.T.A. Requalification

July 23rd, 25th 2019 0700-1500

Pistol, Rifle, (Shotgun Optional)

RANGE SAFETY RULES AND INFORMATION

1. **Treat ALL weapons as if they are LOADED**
2. **Do not let your muzzle cover anything you are not willing to destroy**
3. **Keep your trigger finger outside the trigger guard until the sights are on target and the target is ready to be engaged**
4. **Be sure of your target and the area beyond**
5. **Eye and ear protection is to be worn at all times when on the range unless otherwise directed by the range officer(s)**
6. **The range should always considered a HOT RANGE unless otherwise noted by the range officer**
7. **ALL OFFICERS are considered "range safety officers" and can call a "CEASE FIRE" if or when a unsafe situation arises**

EYE AND HEARING PROTECTION WILL BE WORN AT ALL TIMES!

IN CASE OF AN EMERGENCY

The first aid/trauma kit is kept on the range or with one or more of the instructors.

If needed the range instructors will assign the number of persons needed to, call EMS, meet with and or escort EMS personnel to the injured subject, or to transport the subject to ER.

* Starting Positions: **Holster** – Pistol secured in holster, **Low Ready** - muzzle low enough to see suspect's hands, **Compressed Ready** - pistol pointed in the direction of the threat and tight to the chest/body, **High Ready** - muzzle pointed slightly upward with front sight at eye level in front of face, **Temple Index** - pistol held near the side of head with thumb indexed on or near ear. **Interview Position** - the shooters hands may be in front of the shooter, relaxed to the sides or in any otherwise non-ready state. **Rifle positions** – **Slung** - rifle is suspended by sling with the safety engaged hands free, **Low Ready** - rifle's stock is indexed on shoulder with the muzzle slightly depressed to where the shooter has full view of suspect with the safety engaged, **High Ready** - rifle's stock is tucked between arm and torso with the muzzle pointed slightly upward with the safety engaged.

Officer's Signature: [redacted] Date: 7-23-19

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 26 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 9-14-20 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-24-22

[redacted]

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 27 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
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: 2	NPA:	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 9-14-20 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02874 EXP: 6-25-22

[redacted]

OPOTC STANDARD POLICE RIFLE/CARBINE QUALIFICATION COURSE

Individual Qualification Record

NAME: [redacted]	RNDS	MISS (-1)	MISS (0)	HITS	INITIAL	DEDUCT	RAW	SCORE
AGENCY: Conneaut PD	20	0	0	20	20	0	20	20

STAGE	RANGE	RNDS	TIME	PROCEDURE
1	15 Ft	3 ✓	4.0 sec	On signal, engage the target preferred area three rounds.
2	20 Ft	3 ✓	5.0 sec	On signal, engage the target head oval three rounds.
3	30 Ft	3 ✓	6.0 sec	On signal, engage the target preferred area two rounds, and one round to the target head oval.
4	50 Ft	2 ✓	5.0 sec	Non-dominant index: on signal engage the target preferred area two rounds.
5	75 Ft	1 ✓	1.5 sec	On signal, engage the target preferred area one round.
6	75 Ft	5 ✓	12 sec	Prep rifle/carbine, one round in the chamber and one round in the magazine, and one reserve magazine loaded to capacity. On signal, engage the target preferred area two rounds, assume a kneeling shooting position, reload, and engage the target preferred area three rounds.
7	150 Ft	3 ✓	10 sec	On signal, assume prone position engage the target preferred area three rounds.

RIFLE/CARBINE MANUFACTURER: Colt			COURSE OF FIRE: P. RIFLE RE-QUAL.	
MODEL: M4	CALIBER: .223	SERIAL NUMBER: [redacted]	SCORE: 20	INSTRUCTOR: SJ

INSTRUCTOR: DIXER	OPOTC INSTRUCTOR NUMBER: 02874	DATE: 9-14-20
INSTRUCTOR SIGNATURE: [redacted]	AGENCY: C-P-D	

Conneaut Police Department
Firearms Division
Shotgun
Date Training: 6 2 20

Officer: [redacted]

Department: CONNEAUT POLICE

Weapon (make/model/serial number/caliber):

Make	Model	serial number	caliber
MOSSBERG	590	[redacted]	12 ga

	1st Attempt. H /M	2nd Attempt. H /M	P / F
Stage 1:	P		P
Stage 2:	P		P
Stage 3:	P		P
Stage 4: Slug	P		P

WEATHER CONDITIONS: CLR

OFFICER SIGNATURE: [redacted]

RANGE INSTRUCTOR: [signature]

REQ NUMBER / EXPIRATION: 02874 / 6-25-22

CONNEAUT POLICE DEPARTMENT
FIREARM ISSUANCE

Weapon/Model GLOCK 23

Make GLOCK

Caliber .40

Serial number [redacted]

Number of magazines 2

Reason for issuance DUTY

Condition of weapon EXC.

Issued To: [redacted]

Received from: [signature]

Date: 6-4-19

RETURN

Received from: [redacted]

Returned to: [signature]

Date: 4-9-21

CONNEAUT POLICE DEPARTMENT
FIREARM ISSUANCE

Weapon/Model..... COLT M4 .....

Make ..... COLT .....

Caliber ..... 5.56 .....

Serial number ..... [redacted] .....

Number of magazines .....

Reason for issuance ..... DUTY .....

Condition of weapon ..... GOOD .....

Issued To: [redacted]

Received from: [redacted]

Date: 6-4-19

RETURN

Received from: _____

Returned to: _____

Date: _____

CONNEAUT POLICE DEPARTMENT
FIREARMS ISSUANCE

WEAPON/MODEL..... REMINGTON 700 POLICE

MAKE..... REMINGTON

CALIBER..... .308 WIN

SERIAL NUMBER..... [redacted]

NUMBER OF MAGAZINES..... 1

REASON FOR ISSUANCE..... DUTY

CONDITION OF WEAPON..... GOOD - LIGHT RUST NO PITTING

ISSUED TO [redacted]

RECIEVED FROM [redacted]

DATE 4-18-11

RETURNED TO S4
6-5-11
CPD

: SGT. POORE, PTL. DISTEL

RANGE PROFICIENCY RECORD: SEMI-AUTO PISTOL

NAME: [redacted] AGENCY: CPD

WEAPON MAKE: Glock MODEL: 26 SERIAL #: [redacted]

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

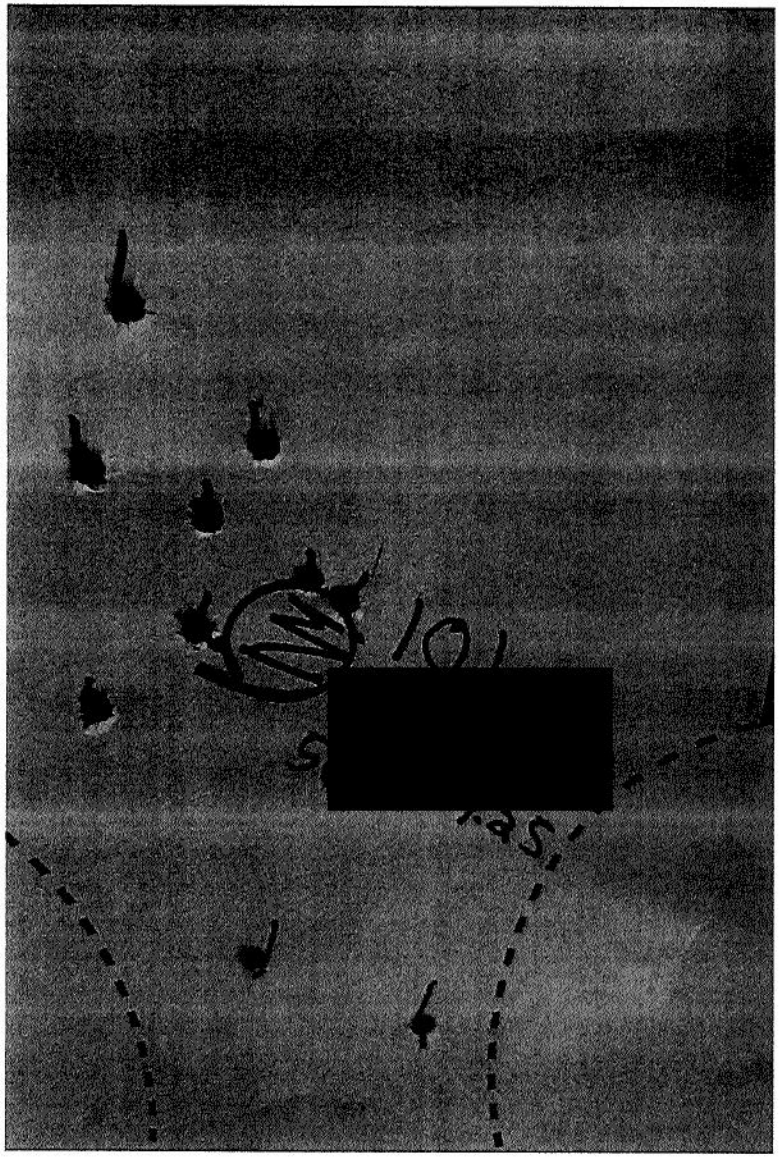
HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1). EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

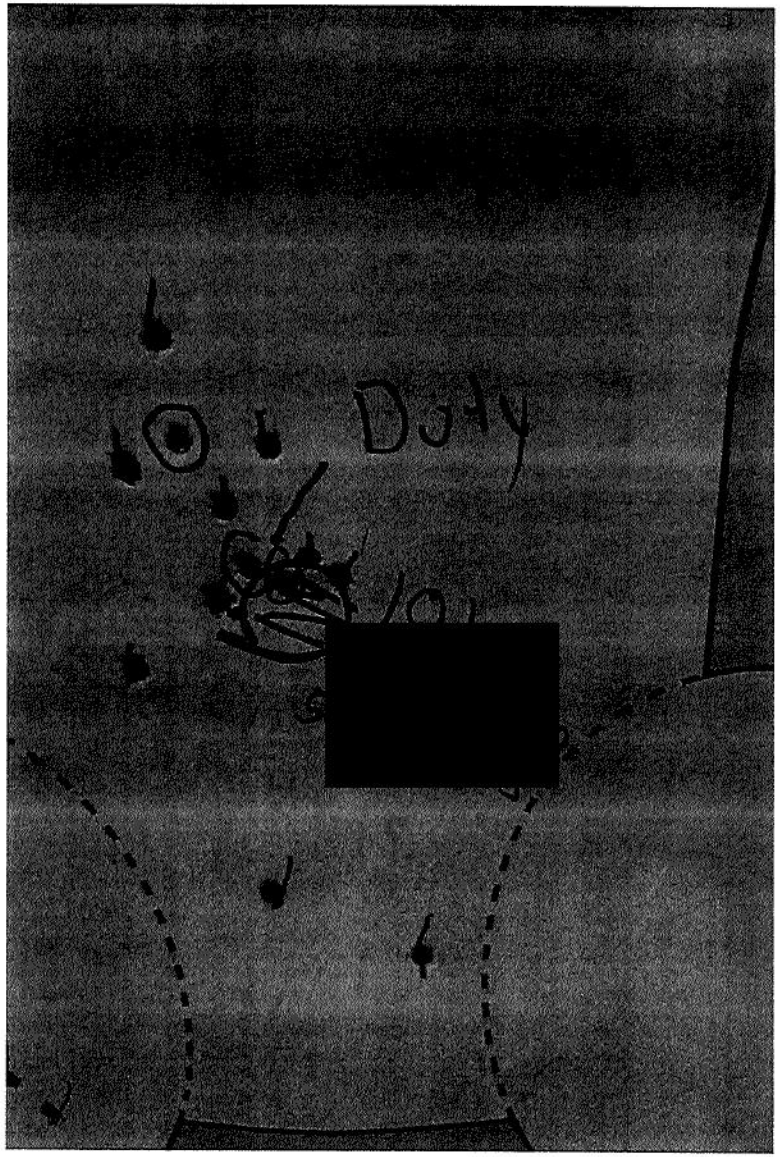
STAGE 1	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 2	2 HITS IN THE PREFERRED AREA, 1 HIT IN THE HEAD OR HIP					
	PA: 3	NPA:	NF:	MISS:	OT:	ERF:
STAGE 3A	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 3B	PA: 4	NPA:	NF:	MISS:	OT:	ERF:
STAGE 4	PA: 6 1	NPA:	NF:	MISS:	OT:	ERF:
STAGE 5	PA:	NPA:	NF:	MISS:	OT:	ERF:
STAGE 6	PA: 1	NPA: 1	NF:	MISS:	OT:	ERF:
SUB TOTALS:	24			MISS:	OT:	ERF:

TOTAL: 24 (PASSING IS A MINIMUM OF 20)

DATE TESTED: 5-11-21 PASSED: ✓ FAILED:

TESTED BY: [redacted] REQ#: 02824 EXP: 6-25-22




Daily

U. S. Department of Justice
Drug Enforcement Administration

FIREARMS QUALIFICATIONS AND INSPECTION RECORD

1. TYPE OF RECORD *(Check one)*
☒ QUALIFICATION
☒ INSPECTION

2. NAME OF AGENT	3. MAKE *(Manufacturer of firearm)*	4. SERIAL NUMBER
[redacted]	GLOCK	[redacted]
5. FIREARM *(Action and type)*	**6. MODEL**	**7. CALIBER**
HANDGUN	19	9MM
8. OFFICE	**9. OWNERSHIP OF FIREARM**	
CLEVELAND, OH DISTRICT OFFICE	POLICE DEPARTMENT	

10. DATE	11. REMARKS	12. SIGNATURE
2/3/2026	QUALIFICATION SCORE: 92/100	Scott, Andrew R

DEA Form
(Sept. 1973) **- 279**

SWAT Training

January 21, 2026

Topic: Applicant Interviews/NFDD Training/KBT Review

Location: APD

Instructor: Lt Erwin/Ptl T Rose

Attendance:			Absent:
Aaron McCracken	Tony Tulino	Don Martin	Mike Bernato
Terry Tulino	Tim Rose	Bobby Gifford	
Matt Burgett	Brandon Zukoski	Lenny Emch	
Dan Pinkett	Curt Distel	Jason Erwin	
Antonio Feralo	Jason Rivers		

Agenda

0700 – 0730

Housekeeping

0730-1100

Two applicants (Shane Posey APD and [redacted]) were interviewed as applicants to join the Team. Both applicants were questioned extensively regarding their decision making, professional history and aspirations, their expectations of the team and the teams expectations of them.

Both applicants answered all lines of questioning with appropriate answers and both have extensive past professional experience and training. Applicants participated in a skills assessment and proved physically capable and proficient in weapon handling.

Both applicants will be accepted onto the team.

1100-1200

Lunch

1200-1400

NFDD classroom lecture training. Practical exercise will be conducted at a later date with Chemical Agent deployment training.

1400-1500

Review of the Kinteic Breaching Tool operation and safety presentation.

SWAT Training

February 18, 2026

Topic: Room Clearing /Active Threat Response

Location: CPD

Instructor: Ptl T Rose

Attendance:			Absent:
Tony Tulino	Don Martin	Lenny Emch	Mike Bernato
Terry Tulino	Tim Rose		Aaron McCracken
Bobby Gifford	Brandon Zukoski		Matt Burgett
Dan Pinkett	Curt Distel		Jason Erwin
Antonio Feralo	Jason Rivers		

0700-1100

Worked on single room entries as solo officer and progressed to full team entries.

1100-1200

Lunch

1200-1500

Response to stimulus in small units, link-ups, multiple small units response

SWAT Training

March 12, 2026

Topic: Pepperball / Active Shooter Drill / Chemical Agents

Location: APD

Instructor: Lt Erwin

Attendance:			Absent:
Aaron McCracken	Tony Tulino	Mike Bernato	Don Martin
Terry Tulino	Bobby Gifford	Jason Rivers	Tim Rose
Matt Burgett	Brandon Zukoski	Lenny Emch	Curt Distel
Dan Pinkett	Jason Erwin	Antonio Feralo	

Agenda

0700 – 0900

Pepperball certification

0900-1100

Active shooter drill with Ashtabula Area City Schools. Using a GunshotBox, the Erie Elementary school's gunshot detector was activated and the school went into a lockdown. Several roleplayers were used as suspect/victims. Patrol units responded initially followed by SWAT units. Officers worked well in small teams, however major deficiencies were discovered in communications and no one taking charge as incident commander or setting up a command post. This caused a cascading effect in lack of a coordinated response from officers and a delay in assembling a Rescue Taskforce to treat casualties.

1100-1200 Lunch

1200-1500

Chemical Agent certification

SWAT Training

April 15, 2026

Topic: LL Munitions / Firearms

Location: APD

Instructor: Lt Erwin / Ptl Rose

Attendance:		Absent:
Matt Burgett	Dan Pinkett	Mike Bernato
Terry Tulino	Tim Rose	Don Martin
Tony Tulino	Bobby Gifford	Brandon Zukoski
Antonio Feralo	Jason Erwin	Lenny Emch

[redacted] (Firearms only)

Curt Distel (Firearms only)

Aaron McCracken (Firearms only)

Jason Rivers (Firearms only)

Agenda

0700-0800

Saybrook Fire Department conducted a gas mask fit test for all members present. Results showed failed seals in all masks. Recommendations to replace with updated masks.

0800-1100

Less Lethal Impact Munitions annual training.

1100-1200

Lunch

1200-1500

Pistol and Patrol Rifle fundamentals.

To: Lt Erwin

From: Lt Zukoski

Subject: May Swat Training

Location: 438 Chestnut St Conneaut OH

Swat training was conducted at a closed bar and upstairs apartment which both were being remodeled. The building was not sterile and contained remodeling supplies. During Swat training safety checks were complete, live ammunition was removed and weapons cleared. Officer then conducted several searches of the bar and the apartment. Topics covered and practiced during training were alternate breach points, sending a breaching team to breach while the rest of the team provides cover from the MRAP, medical procedures if an officer was injured inside the building, and the importance of a secondary check.

The Team also practiced using the Drone to clear the house. The Team learned how the Drone can lack depth perception when objects are leaned against the walls. Members of the team took turns trying to hide from the Drone while the other members used the Drone to locate them. Other Drone topics covered where alternate points of entry into a building (IE second floor windows), and if chems are applied prior to drone entry how the drone's propellers reactive and move the chems through the house. Limitations were observed in low/no light areas such as the basement and blacked out rooms.

Lt Zukoski
L8

Attendance

A. Tulino
Emch
[redacted]
Martin
Gefford
Pinkett
Zukoski
Feralo
McCracken

SWAT Training

June 17, 2026

Topic: Breaching/Tubular Assaults

Location: Geneva Fire Training Building

755 Austin Rd

Instructor: Lt Erwin

Attendance:		Absent:
Matt Burgett	Dan Pinkett	Mike Bernato
Terry Tulino	Brandon Zukoski	Tony Tulino
Jason Erwin	Don Martin	Bobby Gifford
Antonio Feralo		Lenny Emch
[redacted]		Tim Rose
Aaron McCracken		Curt Distel
		Jason Rivers

Agenda

0700-0800

Housekeeping, discussion of previous months training as well as various classes and takeaways from the Ohio Tactical Officers Association's Conference.

0800-0930

Manual breaching. FF Burgett instructed on techniques and proper form for using a breaching ram as well as breaching with a Halligan. Members manually breached a training door (both inswing and outswing) using various Halligans and rams.

0930-1100 & 1200-1330

Tubular Assaults -

The team moved to the Geneva City Bus garage and had access to a city school bus for training. Tactics trained were derived from NTOAs Hostage Rescue program as well as training received at the OTOA training conference.

The first phase of dealing with an incident on a bus/train would be to contain, isolate and negotiate when appropriate. However, when the need arises and an immediate response is required (such as active assailant or medical emergencies) an assault plan must be prepared.

Officers were trained in the following response, which is scalable and flexible based upon number of assailants, number of operators available, and available equipment:

Ladder teams, consisting of three operators, breach windows and an operator scales a ladder gaining a view into the passenger side of the bus while being ready with a long gun. Simultaneously, NFDDs are to be deployed either above or on the driver's side of the bus.

A three man element consisting of two breachers and a cover officer force the door open and an entry team enters the bus.

Various options for the entry team were trained which are all dependent upon what the operators encounter once inside the bus. One of the options include the first two entry operators posting in seats 1&2 (or near) with long guns gaining a stable platform to engage a suspect if necessary quickly. The remaining operators move to the rear of the bus seeking the assailant.

One other option would be the first officers drive to the rear of the bus immediately seeking the assailant.

Once the assailant is apprehended they will be held in place while the remaining occupants are escorted off the bus.

All members present trained both of these options and had reps performing each individual assignment involved.

1330-1500

Operators worked on building approaches from the cover of armor, low light building searches, and building searches while wearing gas masks in a smoky environment.