

# **PERFORMANCE EVALUATION REPORT**

|  |                               |                                 |                                      |                                   |
|--|-------------------------------|---------------------------------|--------------------------------------|-----------------------------------|
| NAME (FIRST, LAST, MI)<br><b>Michael Tartaglia</b>   |                               | ID #<br>[REDACTED]              | RANK<br><b>P.O.</b>                  | DIVISION/UNIT<br><b>Patrol B2</b> |
| DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING)<br><b>Street Patrol / Booking</b>  |                               | PERIOD COVERED<br><b>1 year</b> | FROM<br><b>1/1/2019</b>              | TO<br><b>12/31/2019</b>           |
| <b>PERFORMANCE LEVEL DEFINITIONS</b><br>OUTSTANDING = 5    VERY GOOD = 4    ACCEPTABLE = 3    NEEDS IMPROVEMENT = 2    UNSATISFACTORY = 1<br>In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past Twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations. |                               |                                 |                                      |                                   |
| 1. DUTY PERFORMANCE (ALL EMPLOYEES)  |                               |                                 |                                      |                                   |
| 4  | PERSONAL APPEARANCE           | 2                               | COMMAND PRESENCE                     | 4                                 |
| 3  | RESPONSIVENESS TO SUPERVISION | 3                               | ATTENDANCE                           | 3                                 |
| 3  | PERFORMANCE                   | 4                               | PUNCTUALITY                          | 3                                 |
| 2  | JUDGMENT                      | 2                               | CARE AND USE OF EQUIPMENT            | 2                                 |
|  |                               |                                 | REPORT WRITING ABILITY               | 3                                 |
|  |                               |                                 | RELIABILITY                          | 2                                 |
|  |                               |                                 | INTERPERSONAL SKILLS (VERBAL)        |                                   |
|  |                               |                                 | INVESTIGATIVE/PROBLEM SOLVING SKILLS |                                   |
|  |                               |                                 | KNOWLEDGE OF LAWS, POLICIES, ETC     |                                   |
| 2. DAYS LOST DURING PERIOD COVERED BY THIS REPORT  |                               |                                 |                                      |                                   |
| SICK: 4    INJURED ON-DUTY:    INJURED OFF-DUTY:    OTHER:    TOTAL OCCURENCES: 4  |                               |                                 |                                      |                                   |

## 3. SUPERVISORY PERSONNEL ONLY

LEADERSHIP QUALITIES

EFFECTIVENESS OF DELEGATION

TRAINING/COACHING OF SUBORDINATES

EVALUATION OF SUBORDINATES

4. NARRATIVE SECTION (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.)

**PERSONAL APPEARANCE** - PO Tartaglia always reports to work with a clean, pressed uniform presenting himself in a professional manner.

**PERFORMANCE** - PO Tartaglia has been noted as a top monthly performer regarding traffic tickets, arrests, and/or parking tickets for April, May, and September, and makes sure his work is completed on time.

**JUDGEMENT / KNOWLEDGE OF LAWS, POLICIES, ETC.** - In May PO Tartaglia responded to the 1600 block of Taylor Ave for a check the welfare of a male party, who appeared to be intoxicated, inside a vehicle. As a result of PO Tartaglia's investigation into the incident the male party was taken into custody under MHL 22.09 and his vehicle was towed. Due to the male party seeking restitution for his vehicle being towed an internal investigation was commenced and as a result of the investigation it was determined that PO Tartaglia was in violation of several sections of our procedural manual that deal with enforcement/discretion, officer safety/tactics, conducting DWI investigations, demeanor/professionalism, towing procedures and knowledge of the NYS mental health law.

**CARE AND USE OF EQUIPMENT** - PO Tartaglia was involved in an On-Duty motor vehicle collision in August where when he was responding to a call for a disorderly party he struck (sideswiped) a parked and unoccupied motor vehicle.

**COMMAND PRESENCE / PERFORMANCE UNDER STRESS** - When PO Tartaglia is presented with a stressful situation and or a situation where he is unsure with himself he tends to talk to fast. This non-calmness and stress manifests into uncomprehensive radio transmissions, poor decisions he makes on calls, and a perceived argumentative demeanor.

How can this employee best improve his/her performance? (Include setting Career /Performance Goals).

PO Tartaglia currently has just over 4 years on the job and portrays a positive attitude towards assignments and tasks given by his supervisors. At this point in his career he is no longer looked at as a "rookie" police officer, but his decisions and behavior don't reflect the same at all times. PO Tartaglia needs to work on his command presence and performance under stress, so that it does not negatively translate into his behavior and decision making.

(Continue on Back)

(Goal settings Continue From Front)

PO Tartaglia needs to work on gaining more knowledge regarding the department rules & regulations and enforcement of NYS laws. PO Tartaglia works hard, especially on investigating his assigned cases, and has potential when processing crime scenes. He should continue to hone those skills in order to transition his career into a specialized unit.

5. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:

- A. The employee's performance in his/her present assignment during the evaluation period; AND  
B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

☐ OUTSTANDING ☐ VERY GOOD ☒ ACCEPTABLE ☐ NEEDS IMPROVEMENT ☐ UNSATISFACTORY

6. REVIEWING COMMANDING OFFICER: (Immediate Supervisor) Name:

Signature \_\_\_\_\_ Rank \_\_\_\_\_ Date \_\_\_\_\_  
Print / Signature

7. SUPERVISOR REVIEWING WITH EMPLOYEE: Name:

Signature Sgt. Starr Rae Wooden #8978 / [Signature] Rank Sergeant Healy Date 11/31/20  
Print / Signature

8. EMPLOYEE'S COMMENTS: (Optional)

9. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "waive appeal" on this report.

Signature PO MICHAEL J. TARTAGLIA [Signature] Rank PATROLMAN Date 11/31/20  
Print / Signature

# PERFORMANCE EVALUATION REPORT

|   |                                 |                        |                                    |
|---|---------------------------------|------------------------|------------------------------------|
| NAME (FIRST, LAST, MI)<br><b>Michael Tartaglia</b>                          | ID #<br>[REDACTED]              | RANK<br><b>P.O.</b>    | DIVISION/UNIT<br><b>Patrol C-2</b> |
| DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING)<br><b>Street Patrol</b> | PERIOD COVERED<br><b>Annual</b> | FROM<br><b>01/2018</b> | TO<br><b>12/2018</b>               |

## PERFORMANCE LEVEL DEFINITIONS

EXCELLENT = 5      GOOD = 4      ACCEPTABLE = 3      NEEDS IMPROVEMENT = 2      UNSATISFACTORY = 1  
In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past Twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations.

### 1. DUTY PERFORMANCE (ALL EMPLOYEES)

|          |                                      |          |                                  |          |   |          |  |
|----------|--------------------------------------|----------|----------------------------------|----------|---|----------|--|
| <b>4</b> | <b>GENERAL APPEARANCE</b>            | <b>3</b> | <b>ASSIGNMENT TASKS</b>          | <b>3</b> | <b>WORK QUALITY</b>                                     | <b>3</b> | <b>KNOWLEDGE OF LAWS, POLICIES, ETC.</b> |
| <b>3</b> | <b>RESPONSIVENESS TO SUPERVISION</b> | <b>4</b> | <b>ATTENDANCE</b>                | <b>2</b> | <b>RELIABILITY</b>                                      | <b>3</b> | <b>REPORT WRITING ABILITY</b>            |
| <b>2</b> | <b>INITIATIVE</b>                    | <b>4</b> | <b>PUNCTUALITY</b>               | <b>3</b> | <b>INVESTIGATIVE/PROBLEM SOLVING SKILLS</b>             | <b>3</b> | <b>INTERACTION WITH PUBLIC</b>           |
| <b>3</b> | <b>JUDGMENT</b>                      | <b>3</b> | <b>CARE AND USE OF EQUIPMENT</b> | <b>4</b> | <b>INTERACTION WITH OTHER MEMBERS OF THE DEPARTMENT</b> |          |  |
| <b>2</b> | <b>COMMAND PRESENCE</b>              | <b>2</b> | <b>PERFORMANCE UNDER STRESS</b>  | <b>3</b> | <b>COMMUNICATION SKILLS (VERBAL)</b>                    |          |  |

### 2. SUPERVISORY PERSONNEL ONLY

|                             |                                    |  |                                   |
|-----------------------------|------------------------------------|--|-----------------------------------|
| <b>LEADERSHIP QUALITIES</b> | <b>EFFECTIVENESS OF DELEGATION</b> | <b>TRAINING/COACHING OF SUBORDINATES</b> | <b>EVALUATION OF SUBORDINATES</b> |
|-----------------------------|------------------------------------|--|-----------------------------------|

### 3. NARRATIVE SECTION (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.)

Initiative & Reliability (2) - Ptlm. Tartaglia shows a very lackluster initiative towards any proactive police work. At times he shows a very lackluster initiative towards police work in general. Ptlm. Tartaglia is not very reliable to cover a zone and even when in a city wide car tends to "disappear" and cannot be relied upon to assist with calls that are pending waiting to be dispatched.

Attendance (4) - Ptlm. Tartaglia utilized 1 sick days throughout the year.

Performance Under Stress (2) - Ptlm. Tartaglia becomes flustered when dealing with high stress calls. This may be caused by a lack of self confidence in himself to make a sound decision.

Responsiveness to Supervision (3) - Ptlm. Tartaglia is a non-issue when it comes to dealing with supervision. Ptlm. Tartaglia takes criticism of his work within stride and is not a disciplinary issue.

Report Writing Ability (3) - Ptlm. Tartaglia's report writing has improved upon his last years review. Ptlm. Tartaglia's narratives have become more thorough and well written.

Command Presence (2) - At times it is noticeable that Ptlm. Tartaglia is not always confident in making a decision or taking an action. This should improve over time with more experience. He should also be more cognizant with the manner in the way he speaks with people on the street and realize that yelling or raising your voice with someone does not necessarily show you are in control but rather that you appear flustered and the civilians he is dealing with are aware of this.

Punctuality (4) - Ptlm. Tartaglia is always on time and ready to deploy for his shift.

How can this employee best improve his/her performance? (Include setting Career /Performance Goals).

Ptlm. Tartaglia is a young officer who is still coming into his own. Ptlm. Tartaglia is a good person and never a problematic employee. Ptlm. Tartaglia needs to start coming to work showing more initiative towards pro-active police work as well as become more reliable to his fellow officers on the street, meaning he needs to start being more available to help with taking calls so that other officers are not making up for his lack of assistance.

(Continue on Back)

(Goal settings Continue From Front)

Ptjm. Tartaglia should continue to come to work every day with the willingness to learn and accept that mistakes will be made.

4. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:

- A. The employee's performance in his/her present assignment during the evaluation period; AND  
B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

☐ EXCELLENT    ☐ GOOD    ☒ ACCEPTABLE    ☐ NEEDS IMPROVEMENT    ☐ UNSATISFACTORY

5. REVIEWING COMMANDING OFFICER: (Immediate Supervisor) Name:

Signature James R. Holt Jr. / James R. Holt Jr. Rank Lt. Date 1/17/19  
Print / Signature

6. SUPERVISOR REVIEWING WITH EMPLOYEE: Name: Sgt. Joseph W. Cimpi #1415

Signature Joseph W. Cimpi Rank Sgt. Date 1/17/19  
Print / Signature

7. EMPLOYEE'S COMMENTS: (Optional)

8. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "waive appeal" on this report.

Signature PO MICHAEL TARTAGLIA 12578 Rank PATRICK #12 Date 1/17/19  
Print / Signature

## PERFORMANCE EVALUATION REPORT

|   |                                 |                        |                                    |
|---|---------------------------------|------------------------|------------------------------------|
| NAME (FIRST, LAST, MI)<br><b>Michael Tartaglia</b>                          | ID #<br>[REDACTED]              | RANK<br><b>P.O.</b>    | DIVISION/UNIT<br><b>Patrol C-2</b> |
| DUTY ASSIGNMENT (I.E. DESK, STREET PATROL, BOOKING)<br><b>Street Patrol</b> | PERIOD COVERED<br><b>Annual</b> | FROM<br><b>01/2017</b> | TO<br><b>12/2017</b>               |

## PERFORMANCE LEVEL DEFINITIONS

EXCELLENT = 5

GOOD = 4

ACCEPTABLE = 3

NEEDS IMPROVEMENT = 2

UNSATISFACTORY = 1

In making the evaluation of each category below, supervisors are to evaluate the employee's performance only for the past Twelve month period and compare that performance to guidelines established in section 6.15 C (1 through 18) of General Order # 02-47 Personnel Performance Evaluations.

## 1. DUTY PERFORMANCE (ALL EMPLOYEES)

|          |                                      |          |                                  |          |   |          |  |
|----------|--------------------------------------|----------|----------------------------------|----------|---|----------|--|
| <b>4</b> | <b>GENERAL APPEARANCE</b>            | <b>3</b> | <b>ASSIGNMENT TASKS</b>          | <b>3</b> | <b>WORK QUALITY</b>                                     | <b>3</b> | <b>KNOWLEDGE OF LAWS, POLICIES, ETC.</b> |
| <b>3</b> | <b>RESPONSIVENESS TO SUPERVISION</b> | <b>4</b> | <b>ATTENDANCE</b>                | <b>3</b> | <b>RELIABILITY</b>                                      | <b>3</b> | <b>REPORT WRITING ABILITY</b>            |
| <b>3</b> | <b>INITIATIVE</b>                    | <b>4</b> | <b>PUNCTUALITY</b>               | <b>3</b> | <b>INVESTIGATIVE/PROBLEM SOLVING SKILLS</b>             | <b>3</b> | <b>INTERACTION WITH PUBLIC</b>           |
| <b>3</b> | <b>JUDGMENT</b>                      | <b>3</b> | <b>CARE AND USE OF EQUIPMENT</b> | <b>4</b> | <b>INTERACTION WITH OTHER MEMBERS OF THE DEPARTMENT</b> |          |  |
| <b>3</b> | <b>COMMAND PRESENCE</b>              | <b>3</b> | <b>PERFORMANCE UNDER STRESS</b>  | <b>3</b> | <b>COMMUNICATION SKILLS (VERBAL)</b>                    |          |  |

## 2. SUPERVISORY PERSONNEL ONLY

LEADERSHIP QUALITIES

EFFECTIVENESS OF DELEGATION

TRAINING/COACHING OF SUBORDINATES

EVALUATION OF SUBORDINATES

**3. NARRATIVE SECTION** (This section is to be used to record specific and personal characteristics of this employee which are not adequately covered in the rating sections above. Any factors rated as a 1 or a 5 in the above sections must be articulated in this section.)

Initiative (3) - Ptlm. Tartaglia needs to increase his proactiveness and productivity from month to month as this will help him become a better-rounded officer. The more he gets involved with the more he will become more comfortable and fluid with handling incidents and the paperwork that comes along with them.

Attendance (4) - Ptlm. Tartaglia utilized 2 sick days throughout the year.

Responsiveness to Supervision (3)- It has been noticed on several different occasions that when given an assignment in roll call such as foot patrol or doorman, one that is less desirable for many officers, Ptlm. Tartaglia tends to immediately ask for the night off to avoid those unwanted positions.

Report Writing Ability (3) - Ptlm. Tartaglia needs to be more thorough with pertinent information as well as proofread his paperwork as he generally does not write as complete narratives as needed and also he completes narratives with many mistakes that require instruction to correct. It should be noted that some of Ptlm. Tartaglia's narratives are very well written and do not need any corrections, proving he is capable of such work and he just needs to be more consistent with doing so.

Command Presence (3)- At times it is noticeable that Ptlm. Tartaglia is not always confident in making a decision or taking an action. This should improve over time with more experience. He should also be more cognizant with the manner in the way he speaks with people on the street and realize that yelling or raising your voice with someone does not necessarily show you are in control but rather that you appear flustered and the civilians he is dealing with are aware of this.

Punctuality (4)- Ptlm. Tartaglia is always on time and ready to deploy for his shift.

How can this employee best improve his/her performance? (Include setting Career /Performance Goals).

Ptlm. Tartaglia is a young officer who is still coming into his own. Ptlm. Tartaglia is a good person and never a problematic employee. He does make mistakes and this should be expected with his minimal experience. Ptlm. Tartaglia should continue to come to work every day with the willingness to learn and accept that mistakes are going to be made but he needs to learn from such and develop a little more self-confidence.

(Continue on Back)

(Goal settings Continue From Front)

4. OVERALL PERFORMANCE RATING: This overall rating is to be based on the following factors:

A. The employee's performance in his/her present assignment during the evaluation period; AND

B. Consideration of the general needs of the Department, comparing the capabilities and characteristics of this employee to all other employees of equal rank and pay grade known to the evaluator.

☐ EXCELLENT ☐ GOOD ☒ ACCEPTABLE ☐ NEEDS IMPROVEMENT ☐ UNSATISFACTORY

5. REVIEWING COMMANDING OFFICER: (Immediate Supervisor) Name:

Signature LT. J. Holt Jr. / James R. Holt Jr. Rank LT. Date 1/25/18  
Print/Signature

6. SUPERVISOR REVIEWING WITH EMPLOYEE: Name: Sgt. Joseph W. Cimpi #1415

Signature Joseph Cimpi Rank Sgt. Date 1/15/18  
Print/Signature

7. EMPLOYEE'S COMMENTS: (Optional)

8. EMPLOYEE'S SIGNATURE: This signature does not necessarily indicate agreement with this report. It verifies that this report has been personally reviewed with me and that I have received a copy of this report. If I do not agree with this report, I have indicated this by writing "under protest" next to my signature. I have also indicated whether I "request appeal" or "waive appeal" on this report.

Signature James R. Holt Jr. Rank PO Date 1/15/18  
Print/Signature



# CITY OF UTICA

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF POLICE

413 ORISKANY STREET WEST

UTICA, NEW YORK 13502

ROBERT PALMIERI  
Mayor

MARK WILLIAMS  
Chief of Police

11/8/2019

PO Michael Tartaglia

B-2

Patrol Division

PO Tartaglia:

On August 21<sup>st</sup> 2019 at around 1215hrs, you were dispatched to [REDACTED] for an argument. Upon arrival, you made a U-turn and attempted to park your patrol vehicle on the west side of the street. While you were pulling into the parking spot, you collided with a blue 1998 Chevy Express van, which was parked (unoccupied) on the same side of the street, in front of Westminster Presbyterian Church. As a result, UPD Car 52 sustained \$1478.11 worth of damage.

As a result of the investigation it was determined that you have violated Department Procedural Manual section(s): Chapter Eight, Article One, Professional Standards of Conduct and Ethics

#### 1.14 PERFORMANCE AND ATTENTION TO DUTY:

EE. Departmental Vehicles/Operation/Care/ Personal Use/MV Accident/Reporting;

2. Employees shall operate departmental vehicles in a careful and prudent manner, and shall obey all laws and departmental directives pertaining to such operation.

On 11/8/19, a Command Discipline hearing was commenced. You were offered PBA representation and you ~~accepted~~<sup>denied</sup>/denied. Also present during this hearing was N/A. We came to the following resolution.

- A) You accept the findings of the investigation.
- B) You accept responsibility for violating the Departmental Procedural Manual.
- C) You accept this Letter of Reprimand.
- D) You also understand that in the future, this behavior or any other violation of Departmental Rules or Regulations of a similar nature will be subject to further disciplinary action.

You are being furnished a copy of this letter. The original with acknowledgment, signed by you, will be placed in your personnel file.

Last Revision Date 6/7/2016

Don Gue, 1420  
(Command Officer)  
(Unit)

[Signature]  
(Employee)

I acknowledge the content of this letter  
and a copy of it has been provided to me.

[Signature] 42003  
(Supervisor)  
(Unit)  
N/A  
(PBA Representative)



# CITY OF UTICA

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF POLICE

413 ORISKANY STREET WEST

UTICA, NEW YORK 13502

ROBERT PALMIERI  
Mayor

MARK WILLIAMS  
Chief of Police

8/27/2019

PO Michael Tartaglia

B Platoon

Patrol Division

Officer Tartaglia:

On May 4<sup>th</sup> 2019 at approximately 1410hrs, you were dispatched to [REDACTED] e. for a black male playing loud music from a motor vehicle, who appeared to be "nodding off". Upon arrival, you found [REDACTED] passed out, in the driver's seat of his vehicle. [REDACTED] vehicle was running and he was wearing his seatbelt. You reported that you observed multiple containers of alcoholic beverages inside the vehicle and could smell an odor of an alcoholic beverage emanating from [REDACTED]. When you were able to rouse [REDACTED] he became uncooperative and refused to give you his name.

Instead of ordering and/or taking [REDACTED] out of the vehicle to arrest him or to conduct sobriety tests; you allowed [REDACTED] to take control of the situation and dictate what was occurring. You also told [REDACTED] that he wasn't in trouble and that you weren't going to arrest him for DWI.

After committing a serious officer safety violation (leaving [REDACTED] behind the wheel, while you moved your own patrol vehicle), you proceed to take [REDACTED] into custody for section 22.09 of the NYS MHL, which was inappropriate for the circumstances.

Finally, you impounded [REDACTED] vehicle, without giving him the opportunity to turn it over to a third party (several of whom were on scene).

As a result of the investigation it was determined that you have violated Department Procedural Manual sections:  
Chapter Four, Article Nine: Traffic Enforcement

## 9.15 TRAFFIC ENFORCEMENT DISCRETION:

H. Officers shall not have any discretion when:

4. Sufficient probable cause exists to support a charge of:

b. Driving While Intoxicated

Chapter Eight, Article One: Professional Standards of Conduct and Ethics

## 1.13 ORDERS AND DISCIPLINE:

Last Revision Date 6/7/2016

B. Familiarity with the Laws, Ordinances, Rules:

1. Employees shall be held personally responsible for knowing and adhering to the Rules and Regulations, orders, current directives, procedures and policies of the Department, City Ordinances, and State and Federal Laws affecting their duties.

b. Unfamiliarity No Defense; Unfamiliarity with or ignorance of laws, ordinances, rules and regulations, current directives, procedures, policies or orders shall not constitute a defense.

1.14 PERFORMANCE AND ATTENTION TO DUTY:

A. General Duties:

1. Members shall protect life and property, preserve the peace, prevent violations of the law, detect and arrest violators of the law and enforce those laws of the United States, The State of New York, and local laws and ordinances of the City of Utica over which the department has jurisdiction.

2. Employees shall perform their duties in a competent manner.

W. Unsatisfactory Performance:

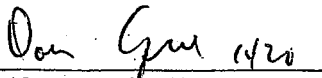
1. Unsatisfactory performance may be demonstrated by a lack of knowledge, unwillingness, inability, or failure to perform assigned tasks, or failure to take appropriate action. Employees shall maintain sufficient competency, both physically and mentally, to properly perform their duties and assume the responsibilities of their positions.

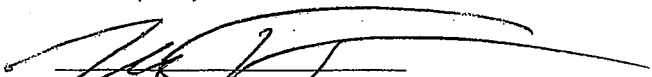
(Chapter/Article/Section)

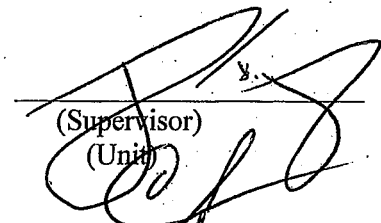
On 8/27/19, a Command Discipline hearing was commenced. You were offered PBA representation and you accepted/denied. Also present during this hearing was PO Christopher Jennings. We came to the following resolution.

- A) You accept the findings of the investigation.
- B) You accept responsibility for violating the Departmental Procedural Manual.
- C) You accept this Letter of Reprimand. To include the forfeiture of one (1) vacation day from your 2020 Time Bank.
- D) You also understand that in the future, this behavior or any other violation of Departmental Rules or Regulations of a similar nature will be subject to further disciplinary action.

You are being furnished a copy of this letter. The original with acknowledgment, signed by you, will be placed in your personnel file.

  
(Command Officer)  
(Unit)

  
(Employee)

  
(Supervisor)  
(Unit)  
(PBA Representative)

I acknowledge the content of this letter  
and a copy of it has been provided to me.

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 07 YEAR 2020

TO:  
Utica Civil Service Commission

NAME OF EMPLOYEE:  
Tartaglia III, Michael J

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:

Police Department

TITLE OF POSITION:

Police Officer

SALARY:

\$ 77,179.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran

☐ Non-Veteran

☐ Disabled Veteran

☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

*Check Nature of Personnel Change*

*Date Effective*

*Action Necessary by Appointing Officer:*

A  
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S

☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

Give facts under Remarks

From: To:

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Submit form MSD-222

Indicate new salary

Give facts under Remarks

Give facts under Remarks

O  
T  
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H  
A  
N  
G  
E  
S

☐ Military Leave of Absence

☐ Other Leave of Absence

☐ Transfer

☐ Demotion

☐ Suspension

☐ Reinstatement

☐ Change in Classification

☐ New Position

☒ Change in Salary

☐ Change in Name

☐ Other

9/7/20

Remarks: (Continue on back if necessary)

Longevity inc. eff. 9/7/20.

3.75% contract inc. eff. 4/1/20

Longevity inc. eff. 9/7/19.

Appointing Officer

Title

Address

Chief of Police

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 04 DAY 01 YEAR 2020

TO:  
Utica Civil Service Commission

NAME OF EMPLOYEE:  
Tartaglia III, Michael J

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
Police Department

TITLE OF POSITION:  
Police Officer

SALARY:  
\$ 69,941.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

*Check Nature of Personnel Change*

*Date Effective*

*Action Necessary by Appointing Officer:*

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- ☐ Permanent  
☐ Provisional  
☐ Temporary  
☐ Substitute  
☐ For Term of Office  
☐ Permanent Promotion  
☐ Provisional Promotion  
☐ Non-Competitive Class  
☐ Exempt Class  
☐ Labor Class

From: To:  
From: To:  
From: To:

Return report of Certification  
Attach application (MSD-330)  
State length of employment  
Give facts under Remarks  
Give facts under Remarks  
Return report of Certification  
Attach nomination  
Attach application (MSD-330)  
Submit this form only  
Attach application (MSD-330)

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- ☐ Resignation  
☐ Retirement  
☐ Deceased  
☐ Removal  
☐ Layoff (Lack of Work or Funds)

Submit signed resignation  
Give effective date  
Indicate date  
Attach copy of proceedings

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- ☐ Military Leave of Absence  
☐ Other Leave of Absence  
☐ Transfer  
☐ Demotion  
☐ Suspension  
☐ Reinstatement  
☐ Change in Classification  
☐ New Position  
☒ Change in Salary  
☐ Change in Name  
☐ Other

From: To:

Give facts under Remarks  
Give facts under Remarks  
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Give facts under Remarks  
Submit form MSD-222  
Indicate new salary  
Give facts under Remarks  
Give facts under Remarks

Remarks: (Continue on back if necessary)

3.75% contract inc. eff. 4/1/20

Longevity inc. eff. 9/7/19.

3.75% contract inc. eff. 4/1/19

Appointing Officer

Title

Address

*Mark H. Williams*

Chief of Police

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 07 YEAR 2019

TO:  
Utica Civil Service Commission

NAME OF EMPLOYEE:  
Tartaglia III, Michael J

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
Police Department

TITLE OF POSITION:  
Police Officer

SALARY:  
\$ 64,615.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

*Check Nature of Personnel Change*

*Date Effective*

*Action Necessary by Appointing Officer:*

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☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

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☐ Resignation

☐ Retirement

☐ Deceased

☐ Removal

☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

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☐ Military Leave of Absence

☐ Other Leave of Absence

☐ Transfer

☐ Demotion

☐ Suspension

☐ Reinstatement

☐ Change in Classification

☐ New Position

☒ Change in Salary

☐ Change in Name

☐ Other

From: To:

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Submt form MSD-222

Indicate new saalry

Give facts under Remarks

Give facts under Remarks

Remarks: (Continue on back if necessary)

Longevity inc. eff. 9/7/19.

3.75% contract inc. eff. 4/1/19

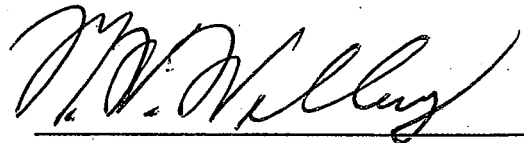
Longevity inc. eff. 9/7/18.

New Contract salary changes eff. 4/1/18

Appointing Officer

Title

Address



Chief of Police

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 04 DAY 01 YEAR 2019

TO: Utica Civil Service Commission

NAME OF EMPLOYEE:  
Tartaglia III, Michael J

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
Police Department

TITLE OF POSITION:  
Police Officer

SALARY:  
\$ 64,615.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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☐ Permanent

Return report of Certification

☐ Provisional

Attach application (MSD-330)

☐ Temporary

From: To:

State length of employment

☐ Substitute

From: To:

Give facts under Remarks

☐ For Term of Office

From: To:

Give facts under Remarks

☐ Permanent Promotion

Return report of Certification

☐ Provisional Promotion

Attach nomination

☐ Non-Competitive Class

Attach application (MSD-330)

☐ Exempt Class

Submit this form only

☐ Labor Class

Attach application (MSD-330)

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☐ Resignation

Submit signed resignation

☐ Retirement

Give effective date

☐ Deceased

Indicate date

☐ Removal

Attach copy of proceedings

☐ Layoff (Lack of Work or Funds)

Give facts under Remarks

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☐ Military Leave of Absence

Give facts under Remarks

☐ Other Leave of Absence

From: To:

Give facts under Remarks

☐ Transfer

Give facts under Remarks

☐ Demotion

Give facts under Remarks

☐ Suspension

Give facts under Remarks

☐ Reinstatement

Give facts under Remarks

☐ Change in Classification

Give facts under Remarks

☐ New Position

Submit form MSD-222

☒ Change in Salary

4/1/19

Indicate new salary

☐ Change in Name

Give facts under Remarks

☐ Other

Give facts under Remarks

Remarks: (Continue on back if necessary)

3.75% contract inc. eff. 4/1/19

Longevity inc. eff. 9/7/18.

New Contract salary changes eff. 4/1/18  
pp. 6/8/18

Appointing Officer

Title

Address

*Mark H. Miller*

Chief of Police

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 07 YEAR 2018

TO:  
**Utica Civil Service Commission**

NAME OF EMPLOYEE:  
**Tartaglia III, Michael J**

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
**Police Department**

TITLE OF POSITION:  
**Police Officer**

SALARY:  
**\$ 62,279.**

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

*Check Nature of Personnel Change*

*Date Effective*

*Action Necessary by Appointing Officer:*

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☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

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☐ Resignation

☐ Retirement

☐ Deceased

☐ Removal

☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

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☐ Military Leave of Absence

☐ Other Leave of Absence

☐ Transfer

☐ Demotion

☐ Suspension

☐ Reinstatement

☐ Change in Classification

☐ New Position

☒ Change in Salary

☐ Change in Name

☐ Other

From: To:

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9/7/18

Indicate new salary

Give facts under Remarks

Give facts under Remarks

Remarks: (Continue on back if necessary)

Longevity inc. eff. 9/7/18.

New Contract salary changes eff. 4/1/18  
pp. 6/8/18

Appointing Officer

Title

Address

**Chief of Police**

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 06 DAY 08 YEAR 2018

TO:  
**Utica Civil Service Commission**

NAME OF EMPLOYEE:  
**Tartaglia III, Michael J**

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
**Police Department**

TITLE OF POSITION:  
**Police Officer**

SALARY:  
**\$ 59,426.**

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

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- ☐ Permanent  
☐ Provisional  
☐ Temporary  
☐ Substitute  
☐ For Term of Office  
☐ Permanent Promotion  
☐ Provisional Promotion  
☐ Non-Competitive Class  
☐ Exempt Class  
☐ Labor Class

From: To:  
From: To:  
From: To:

Return report of Certification  
Attach application (MSD-330)  
State length of employment  
Give facts under Remarks  
Give facts under Remarks  
Return report of Certification  
Attach nomination  
Attach application (MSD-330)  
Submit this form only  
Attach application (MSD-330)

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- ☐ Resignation  
☐ Retirement  
☐ Deceased  
☐ Removal  
☐ Layoff (Lack of Work or Funds)

Submit signed resignation  
Give effective date  
Indicate date  
Attach copy of proceedings  
Give facts under Remarks

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- ☐ Military Leave of Absence  
☐ Other Leave of Absence  
☐ Transfer  
☐ Demotion  
☐ Suspension  
☐ Reinstatement  
☐ Change in Classification  
☐ New Position  
☒ Change in Salary  
☐ Change in Name  
☐ Other

From: To:

4/1/18

Give facts under Remarks  
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Submt form MSD-222  
Indicate new saalry  
Give facts under Remarks  
Give facts under Remarks

Remarks: (Continue on back if necessary)

**New Contract salary changes eff. 4/1/18  
pp. 6/8/18**

Appointing Officer

Title

Address

*Mark H. Williams*

**Chief of Police**

**Longevity increase eff. 9/7/17**

+

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 07 YEAR 2017

TO:  
Utica Civil Service Commission

NAME OF EMPLOYEE:  
Tartaglia III, Michael J

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
Police Department

TITLE OF POSITION:  
Police Officer

SALARY:  
\$ 54,920.

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

|  | Check Nature of Personnel Change                        | Date Effective           | Action Necessary by Appointing Officer: |
|--|---|--------------------------|---|
| A<br>P<br>P<br>O<br>I<br>N<br>T<br>M<br>E<br>N<br>T<br>S     | <input type="checkbox"/> Permanent                      |                          | Return report of Certification          |
|  | <input type="checkbox"/> Provisional                    |                          | Attach application (MSD-330)            |
|  | <input type="checkbox"/> Temporary                      | From: To:                | State length of employment              |
|  | <input type="checkbox"/> Substitute                     | From: To:                | Give facts under Remarks                |
|  | <input type="checkbox"/> For Term of Office             | From: To:                | Give facts under Remarks                |
|  | <input type="checkbox"/> Permanent Promotion            |                          | Return report of Certification          |
|  | <input type="checkbox"/> Provisional Promotion          |                          | Attach nomination                       |
|  | <input type="checkbox"/> Non-Competitive Class          |                          | Attach application (MSD-330)            |
|  | <input type="checkbox"/> Exempt Class                   |                          | Submit this form only                   |
| T<br>E<br>R<br>M<br>I<br>O<br>N<br>N<br>A<br>S               | <input type="checkbox"/> Labor Class                    |                          | Attach application (MSD-330)            |
|  | <input type="checkbox"/> Resignation                    |                          | Submit signed resignation               |
|  | <input type="checkbox"/> Retirement                     |                          | Give effective date                     |
|  | <input type="checkbox"/> Deceased                       |                          | Indicate date                           |
|  | <input type="checkbox"/> Removal                        |                          | Attach copy of proceedings              |
| O<br>T<br>H<br>E<br>R<br><br>C<br>H<br>A<br>N<br>G<br>E<br>S | <input type="checkbox"/> Layoff (Lack of Work or Funds) |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> Military Leave of Absence      |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> Other Leave of Absence         | From: To:                | Give facts under Remarks                |
|  | <input type="checkbox"/> Transfer                       |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> Demotion                       |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> Suspension                     |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> Reinstatement                  |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> Change in Classification       |                          | Give facts under Remarks                |
|  | <input type="checkbox"/> New Position                   |                          | Submit form MSD-222                     |
|  | <input checked="" type="checkbox"/> Change in Salary    | 09/07/17                 | Indicate new salary                     |
|  | <input type="checkbox"/> Change in Name                 |                          | Give facts under Remarks                |
| <input type="checkbox"/> Other                               |   | Give facts under Remarks |   |


Remarks: (Continue on back if necessary)

Longevity increase eff. 9/7/17

Longevity increase eff. 9/7/16

Address change: [REDACTED]

Appointing Officer  
Title  
Address

  
Chief of Police

CERTIFICATE  
valid until

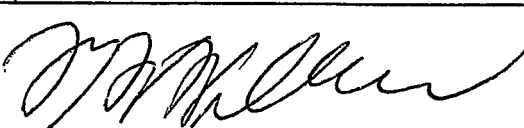
This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

(Date)

COPY

|   |   |  |  |
|---|---|--|--|
| Report all personnel changes to this form<br>Send ONE COPY prior to payroll affected by this change<br>SUPPLEMENTARY PAYROLL CERTIFICATION AND<br>REPORT OF PERSONNEL CHANGE  |   | DATE<br>MONTH 09 DAY 07 YEAR 2016  |  |
| TO:<br><b>Utica Civil Service Commission</b>  |   | NAME OF EMPLOYEE:<br><b>Tartaglia III, Michael J</b>   |  |
| FROM: (Check only one)<br><input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District |   | ADDRESS:<br>[REDACTED]   |  |
| DEPARTMENT:<br><b>Police Department</b>   |   | TITLE OF POSITION:<br><b>Police Officer</b>  | SALARY:<br><b>\$ 51,258.</b>                   |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION:  |   | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran<br><input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman       |  |
| DATE OF BIRTH:  |   | SOCIAL SECURITY NUMBER:<br>[REDACTED]  |  |
|   | <i>Check Nature of Personnel Change</i>                 | <i>Date Effective</i>  | <i>Action Necessary by Appointing Officer:</i> |
| A<br>P<br>P<br>O<br>I<br>N<br>T<br>M<br>E<br>N<br>T<br>S  | <input type="checkbox"/> Permanent                      |  | Return report of Certification                 |
|   | <input type="checkbox"/> Provisional                    |  | Attach application (MSD-330)                   |
|   | <input type="checkbox"/> Temporary                      | From:      To:   | State length of employment                     |
|   | <input type="checkbox"/> Substitute                     | From:      To:   | Give facts under Remarks                       |
|   | <input type="checkbox"/> For Term of Office             | From:      To:   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Permanent Promotion            |  | Return report of Certification                 |
|   | <input type="checkbox"/> Provisional Promotion          |  | Attach nomination                              |
|   | <input type="checkbox"/> Non-Competitive Class          |  | Attach application (MSD-330)                   |
|   | <input type="checkbox"/> Exempt Class                   |  | Submit this form only                          |
| T<br>E<br>R<br>M<br>I<br>N<br>A<br>S  | <input type="checkbox"/> Labor Class                    |  | Attach application (MSD-330)                   |
|   | <input type="checkbox"/> Resignation                    |  | Submit signed resignation                      |
|   | <input type="checkbox"/> Retirement                     |  | Give effective date                            |
|   | <input type="checkbox"/> Deceased                       |  | Indicate date                                  |
|   | <input type="checkbox"/> Removal                        |  | Attach copy of proceedings                     |
| O<br>T<br>H<br>E<br>R<br><br>C<br>H<br>A<br>N<br>G<br>E<br>S  | <input type="checkbox"/> Layoff (Lack of Work or Funds) |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Military Leave of Absence      |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Other Leave of Absence         | From:      To:   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Transfer                       |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Demotion                       |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Suspension                     |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Reinstatement                  |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Change in Classification       |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> New Position                   |  | Submit form MSD-222                            |
|   | <input checked="" type="checkbox"/> Change in Salary    | 09/07/16   | Indicate new salary                            |
|   | <input type="checkbox"/> Change in Name                 |  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Other                          |  | Give facts under Remarks                       |
| Remarks: (Continue on back if necessary)  |   |  |  |
| Longevity increase eff. 9/7/16  |   |  |  |
| Address change: [REDACTED] eff. 9/25/15   |   |  |  |
| 1% Contract increase effective 10/1/15  |   |  |  |
| CERTIFICATE<br>valid until _____<br>(Date)  |   | This certifies that the above<br>employment is in accordance with<br>Law and Rules made in pursuance<br>to law. Subject to any limitation or<br>condition specified above. |  |
| By _____<br>Date _____  |   | Appointing Officer<br>Title<br>Address<br><br><br>Chief of Police                      |  |

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 10 DAY 02 YEAR 2015

TO:  
**Utica Civil Service Commission**

NAME OF EMPLOYEE:  
**Tartaglia III, Michael J**

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
**Police Department**

TITLE OF POSITION:  
**Police Officer**

SALARY:  
**\$ 42,317**

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:


|  | <u>Check Nature of Personnel Change</u>                 | <u>Date Effective</u> | <u>Action Necessary by Appointing Officer:</u> |
|--|---|-----------------------|--|
| A<br>P<br>P<br>O<br>I<br>N<br>T<br>M<br>E<br>N<br>T<br>S           | <input type="checkbox"/> Permanent                      |                       | Return report of Certification                 |
|  | <input type="checkbox"/> Provisional                    |                       | Attach application (MSD-330)                   |
|  | <input type="checkbox"/> Temporary                      | From: To:             | State length of employment                     |
|  | <input type="checkbox"/> Substitute                     | From: To:             | Give facts under Remarks                       |
|  | <input type="checkbox"/> For Term of Office             | From: To:             | Give facts under Remarks                       |
|  | <input type="checkbox"/> Permanent Promotion            |                       | Return report of Certification                 |
|  | <input type="checkbox"/> Provisional Promotion          |                       | Attach nomination                              |
|  | <input type="checkbox"/> Non-Competitive Class          |                       | Attach application (MSD-330)                   |
|  | <input type="checkbox"/> Exempt Class                   |                       | Submit this form only                          |
|  | <input type="checkbox"/> Labor Class                    |                       | Attach application (MSD-330)                   |
| T<br>E<br>R<br>M<br>I<br>N<br>A<br>T<br>I<br>O<br>N<br>N<br>A<br>S | <input type="checkbox"/> Resignation                    |                       | Submit signed resignation                      |
|  | <input type="checkbox"/> Retirement                     |                       | Give effective date                            |
|  | <input type="checkbox"/> Deceased                       |                       | Indicate date                                  |
|  | <input type="checkbox"/> Removal                        |                       | Attach copy of proceedings                     |
|  | <input type="checkbox"/> Layoff (Lack of Work or Funds) |                       | Give facts under Remarks                       |
| O<br>T<br>H<br>E<br>R<br><br>C<br>H<br>A<br>N<br>G<br>E<br>S       | <input type="checkbox"/> Military Leave of Absence      | From: To:             | Give facts under Remarks                       |
|  | <input type="checkbox"/> Other Leave of Absence         | From: To:             | Give facts under Remarks                       |
|  | <input type="checkbox"/> Transfer                       |                       | Give facts under Remarks                       |
|  | <input type="checkbox"/> Demotion                       |                       | Give facts under Remarks                       |
|  | <input type="checkbox"/> Suspension                     |                       | Give facts under Remarks                       |
|  | <input type="checkbox"/> Reinstatement                  |                       | Give facts under Remarks                       |
|  | <input type="checkbox"/> Change in Classification       |                       | Give facts under Remarks                       |
|  | <input type="checkbox"/> New Position                   |                       | Submit form MSD-222                            |
|  | <input type="checkbox"/> Change in Salary               |                       | Indicate new salary                            |
|  | <input type="checkbox"/> Change in Name                 |                       | Give facts under Remarks                       |
|  | <input checked="" type="checkbox"/> Other               | 9/25/15               | Give facts under Remarks                       |

Remarks: (Continue on back if necessary)

Address change: [REDACTED]  
[REDACTED] eff. 9/25/15

1% Contract increase effective 10/1/15  
New Employee, lateral, Sworn in eff. 9/7/15

Appointing Officer  
Title  
Address

  
Chief of Police

CERTIFICATE  
valid until

(Date)

This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

Report all personnel changes to this form  
Send ONE COPY prior to payroll affected by this change  
SUPPLEMENTARY PAYROLL CERTIFICATION AND  
REPORT OF PERSONNEL CHANGE

DATE

MONTH 09 DAY 23 YEAR 2015

TO:  
**Utica Civil Service Commission**

NAME OF EMPLOYEE:  
**Tartaglia III, Michael J**

FROM: (Check only one)

☒ City ☐ County ☐ Town ☐ Village or District

ADDRESS:

DEPARTMENT:  
**Police Department**

TITLE OF POSITION:  
**Police Officer**

SALARY:  
**\$ 42,317**

NAME AND TITLE OF LAST EMPLOYEE IN POSITION:

☐ Veteran ☐ Non-Veteran  
☐ Disabled Veteran ☐ Exempt Volunteer Fireman

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

Check Nature of Personnel Change

Date Effective

Action Necessary by Appointing Officer:

A  
P  
P  
O  
I  
N  
T  
M  
E  
N  
T  
S

☐ Permanent

☐ Provisional

☐ Temporary

☐ Substitute

☐ For Term of Office

☐ Permanent Promotion

☐ Provisional Promotion

☐ Non-Competitive Class

☐ Exempt Class

☐ Labor Class

From: To:

From: To:

From: To:

Return report of Certification

Attach application (MSD-330)

State length of employment

Give facts under Remarks

Give facts under Remarks

Return report of Certification

Attach nomination

Attach application (MSD-330)

Submit this form only

Attach application (MSD-330)

T  
E  
R  
M  
I  
N  
A  
S

☐ Resignation

☐ Retirement

☐ Deceased

☐ Removal

☐ Layoff (Lack of Work or Funds)

Submit signed resignation

Give effective date

Indicate date

Attach copy of proceedings

Give facts under Remarks

O  
T  
H  
E  
R  
  
C  
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A  
N  
G  
E  
S

☐ Military Leave of Absence

☐ Other Leave of Absence

☐ Transfer

☐ Demotion

☐ Suspension

☐ Reinstatement

☐ Change in Classification

☐ New Position

☐ Change in Salary

☐ Change in Name

☐ Other

From: To:

From: To:

From: To:

From: To:

From: To:

From: To:

From: To:

From: To:

From: To:

From: To:

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Give facts under Remarks

Submit form MSD-222

Indicate new salary

Give facts under Remarks

Give facts under Remarks

Remarks: (Continue on back if necessary)


1% Contract increase effective 10/1/15

New Employee, lateral, Sworn in eff. 9/7/15.

Appointing Officer

Title

Address

  
Chief of Police

CERTIFICATE  
valid until

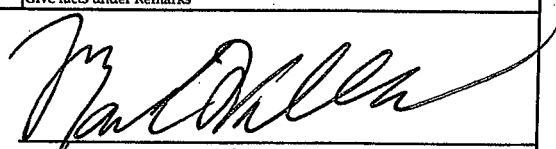
This certifies that the above  
employment is in accordance with  
Law and Rules made in pursuance  
to law. Subject to any limitation or  
condition specified above.

By

Date

(Date)

# COPY

|   |   |   |  |
|---|---|---|--|
| Report all personnel changes to this form<br>Send ONE COPY prior to payroll affected by this change<br>SUPPLEMENTARY PAYROLL CERTIFICATION AND<br>REPORT OF PERSONNEL CHANGE  |   | DATE<br>MONTH <b>08</b> DAY <b>20</b> YEAR <b>2015</b>  |  |
| TO:<br><b>Utica Civil Service Commission</b>  |   | NAME OF EMPLOYEE:<br><b>Tartaglia III, Michael J</b>  |  |
| FROM: (Check only one)<br><input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Town <input type="checkbox"/> Village or District |   | ADDRESS:<br><div style="background-color: black; width: 100%; height: 1.2em;"></div>  |  |
| DEPARTMENT:<br><b>Police Department</b>   |   | TITLE OF POSITION:<br><b>Police Officer</b>   | SALARY:<br><b>\$ 41,898</b>                    |
| NAME AND TITLE OF LAST EMPLOYEE IN POSITION:  |   | <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran<br><input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Exempt Volunteer Fireman            |  |
| DATE OF BIRTH:  |   | SOCIAL SECURITY NUMBER:   |  |
|   |   | <div style="background-color: black; width: 100%; height: 1.2em;"></div>  |  |
|   | <u>Check Nature of Personnel Change</u>                 | <u>Date Effective</u>   | <u>Action Necessary by Appointing Officer:</u> |
| A<br>P<br>P<br>O<br>I<br>N<br>T<br>M<br>E<br>N<br>T<br>S  | <input checked="" type="checkbox"/> Permanent           | 9/7/2015  | Return report of Certification                 |
|   | <input type="checkbox"/> Provisional                    |   | Attach application (MSD-330)                   |
|   | <input type="checkbox"/> Temporary                      | From:      To:  | State length of employment                     |
|   | <input type="checkbox"/> Substitute                     | From:      To:  | Give facts under Remarks                       |
|   | <input type="checkbox"/> For Term of Office             | From:      To:  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Permanent Promotion            |   | Return report of Certification                 |
|   | <input type="checkbox"/> Provisional Promotion          |   | Attach nomination                              |
|   | <input type="checkbox"/> Non-Competitive Class          |   | Attach application (MSD-330)                   |
|   | <input type="checkbox"/> Exempt Class                   |   | Submit this form only                          |
|   | <input type="checkbox"/> Labor Class                    |   | Attach application (MSD-330)                   |
| T<br>E<br>R<br>M<br>I<br>N<br>A<br>S  | <input type="checkbox"/> Resignation                    |   | Submit signed resignation                      |
|   | <input type="checkbox"/> Retirement                     |   | Give effective date                            |
|   | <input type="checkbox"/> Deceased                       |   | Indicate date                                  |
|   | <input type="checkbox"/> Removal                        |   | Attach copy of proceedings                     |
|   | <input type="checkbox"/> Layoff (Lack of Work or Funds) |   | Give facts under Remarks                       |
| O<br>T<br>H<br>E<br>R<br><br>C<br>H<br>A<br>N<br>G<br>E<br>S  | <input type="checkbox"/> Military Leave of Absence      |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Other Leave of Absence         | From:      To:  | Give facts under Remarks                       |
|   | <input type="checkbox"/> Transfer                       |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Demotion                       |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Suspension                     |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Reinstatement                  |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Change in Classification       |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> New Position                   |   | Submit form MSD-222                            |
|   | <input type="checkbox"/> Change in Salary               |   | Indicate new salary                            |
|   | <input type="checkbox"/> Change in Name                 |   | Give facts under Remarks                       |
|   | <input type="checkbox"/> Other                          |   | Give facts under Remarks                       |
|   | Remarks: (Continue on back if necessary)                |   |  |
| New Employee, lateral, Sworn in eff. 9/7/15.  |   |   |  |
|   |   | Appointing Officer<br><div style="text-align: center;"> <br/> <b>Chief of Police</b> </div> |  |
|   |   | Title<br>Address  |  |
| CERTIFICATE<br>valid until<br><br>(Date)  |   | This certifies that the above<br>employment is in accordance with<br>Law and Rules made in pursuance<br>to law. Subject to any limitation or<br>condition specified above.      |  |
|   |   | By<br><br>Date  |  |



Undersheriff Joseph Lisi  
Chief Deputy Jonathan Owens

Chief Deputy Lisa Zurek  
Chief Deputy Derrick O'Meara

*Sheriff Robert M. Maciol*

**Law Enforcement Member Deputation  
For The  
Mobile Field Force - UPD**

*Pursuant to the authority vested in me by Section 654 of the County Law, I hereby  
Deputize: Michael Tartaglia: Police Officer; Utica Police Department, to make arrests outside  
the territorial limits of the City of Utica, in performance of his legal obligations as a police officer  
or peace officer serving as a member and, or agent of, the Utica Police Department. This  
deputation shall take effect on January 14, 2020 and shall expire January 13, 2021.*

*I set my hand and seal this 14<sup>th</sup> day of January, 2020.*

Robert M. Maciol  
Oneida County Sheriff

**Administrative Office**  
6065 Judd Road Oriskany, NY 13424  
Voice (315) 736-8364  
Fax (315) 765-2205

**Law Enforcement Division**  
6065 Judd Road Oriskany, NY 13424  
Voice (315) 736-0141  
Fax (315) 736-7946

**Correction Division**  
6075 Judd Road Oriskany, NY 13424  
Voice (315) 768-7804  
Fax (315) 765-2327

**Civil Division**  
200 Elizabeth Street Utica, NY 13501  
Voice (315) 798-5862  
Fax (315) 798-6495

UTICA POLICE DEPARTMENT

**Personnel Order**



|  |  |            |
|--|--|------------|
| <b>Issue date:</b><br>09/16/15               | <b>Subject: Assignment / Transfer Orders</b> | P.O. 15-21 |
| <b>Issuing Authority</b><br>Captain CS Kelly | <b>Approved by:</b><br>Chief M. Williams     |            |

Officer [REDACTED]

Will leave C Platoon Squad 2 on Monday September 21, 2015. He will report to Lieutenant Brian Bansner on Tuesday September 22, 2015 at 1845 hrs. for a temporary assignment in the Tactical Unit.

Officer [REDACTED]

Will leave A Platoon Squad 3 on Sunday September 20, 2015. He will report to Lieutenant Donald Cinque on Monday September 21, 2015 at 1545 hrs. for assignment in C Platoon Squad 2.

Officer [REDACTED]

Will leave the Training Unit on Monday September 21, 2015 at 1630 hrs.. He will report to Lieutenant Bryan Coromato on Tuesday September 22, 2015 at 2345 hrs. for assignment in A Platoon Squad 1.

Officer [REDACTED]

Will leave the Training Unit on Monday September 21, 2015 at 1630 hrs.. He will report to Lieutenant Bryan Coromato on Tuesday September 22, 2015 at 2345 hrs. for assignment in A Platoon Squad 3.

Officer [REDACTED]

Will leave the Training Unit on Monday September 21, 2015 at 1630 hrs.. He will report to Lieutenant Sean Dougherty on Tuesday September 22, 2015 at 0745 hrs. for assignment in B Platoon Squad 2.

Officer [REDACTED]

Will leave the Training Unit on Wednesday September 16, 2015 at 1630 hrs.. He will report to Lieutenant Sean Dougherty on Friday September 18, 2015 at 0745 hrs. for assignment in B Platoon Squad 2.

Officer [REDACTED]

Will leave the Training Unit on Monday September 21, 2015 at 1630 hrs.. He will report to Lieutenant Sean Dougherty on Tuesday September 22, 2015 at 0745hrs. for assignment in B Platoon Squad 2.

Officer A [REDACTED]

Will leave the Training Unit on Monday September 21, 2015 at 1630 hrs.. He will report to Lieutenant Sean Dougherty on Tuesday September 22, 2015 at 0745 hrs. for assignment in B Platoon Squad 3.

Officer [REDACTED]

Will leave the Training Unit on Monday September 21, 2015 at 1630hrs. He will report to Lieutenant Sean Dougherty on Tuesday September 22, 2015 at 0745 hrs. for assignment in B Platoon Squad 3.

  
Captain CS Kelly

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

10/13/16

**INTRA-AGENCY MEMORANDUM****SUBJECT:** PO M. Tartaglia - Reqeust for Secondary Employment as an SRO**TO:** Chief of Police: Mark W. Williams

Sir,

PO M. Tartaglia who is assigned to C Platoon has submitted a request for secondary employment with the Utica City School District for an SRO position. PO M. Tartaglia is a relatively new officer who seems to be progressing nicely towards the overall career goal of becoming a well-rounded Police Officer. He shows an eagerness to learn, and has a positive approach to his job. He is not a sick time abuser and shows no signs of nonfeasance, malfeasance, and/or misfeasance. I do not believe the SRO position will conflict with PO M. Tartaglia's primary employment responsibilities associated with the Utica Police Department. Lastly, I do not believe the SRO position will hinder PO M. Tartaglia's primary employment responsibilities associated with the Utica Police Department.

Approved  
12 hrs. / week  
DC S. No

NAME: James R. Holt Jr.RANK: LT. / 4016

# DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 Oriskany Street West

Utica, New York 13502

September 20, 2016

### INTRA-AGENCY MEMORANDUM

**SUBJECT:** Second Employment for Utica School District

**TO:** Chief of Police: Mark W. Williams

This memo is to express my interest in second employment as a SRO for the Utica School District. I look forward to hearing from you regarding this.

Respectfully,

PO Michael J Tartaglia III  
Badge 8366  
C-2

NAME:  MICHAEL J TARTAGLIA III

RANK: PATROLMAN

## CITY OF UTICA, CIVIL SERVICE COMMISSION

**PROBATIONARY REPORT**

To Appointing Officer:

Please complete this form in triplicate:

- Forward original to the Civil Service Commission.
- Give one copy to the employee.
- Retain one copy for your files.

|   |  |  |  |
|---|--|--|--|
| DATE THIS REPORT DUE:   | The Civil Service Commission requires that this report be filed <u>two weeks</u> prior to the end of the probationary term. See date probationary term ends below. |  |  |
| EMPLOYEE'S NAME: <u>Michael Tartaglia III</u>   | DATE OF APPOINTMENT: <u>9/7/15</u>   |  |  |
| SOCIAL SECURITY NUMBER: <u>[REDACTED]</u>   | DEPARTMENT OR AGENCY: <u>Utica Police Dept.</u>  |  |  |
| STATUS/TITLE OF POSITION: <u>Officer</u>  | JURISDICTIONAL CLASSIFICATION:   |  |  |
| ORIGINAL LENGTH OF THE PROBATIONARY TERM AS SHOWN ON THE GCCS-12(AorB): <u>1 year</u> |  |  |  |
| NUMBER OF DAYS ABSENT DURING THE PROBATIONARY TERM:                                   |  |  |  |
| NUMBER OF DAYS PROBATIONARY TERM IS TO BE EXTENDED:                                   |  |  |  |
| DATE PROBATIONARY TERM ENDS: <u>9/7/16</u>  |  |  |  |
| IF SATISFACTORY, DATE PERMANENT STATUS BEGINS: <u>9/8/16</u>                          |  |  |  |

## CERTIFICATE OF APPOINTING OFFICER:

I hereby certify that the probationer has been observed and it has been found that the conduct, capacity, and fitness of the probationer is:

☒ **SATISFACTORY.** Employee will be retained as a permanent employee.  
Employee has served (Maximum) (Shortened) probationary period.  
Minimum probationary period is usually eight weeks,  
except in the case of trainee positions (12 weeks) and Police Officer (26 weeks).

☐ **UNSATISFACTORY.** Employee will be discharged or returned to prior permanent position.

☐ Copy of letter to employee attached.

☐ Copy of letter to employee to be submitted.

Mark Williams  
Authorized Signature  
Mark Williams  
Print Name  
Chief  
Title

I have received a copy of this form.

Signature of Employee

Date

10/31/16

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE****413 Oriskany Street West****Utica, New York 13502**11/9/15**SUBJECT:** 6 Week FTO Report: ~~Victor Ramos~~ Michael Tartaglia**TO:** Chief of Police: Mark W. Williams

Recruit Officer Michael Tartaglia has completed week 6 of the FTO program. He completed his 6 week Sergeant ride along on November 4, 2015. After reviewing all FTO sheets Recruit Officer Tartaglia is progressing at an acceptable rate.

Recruit Officer Tartaglia has shown very good verbal skills when dealing with the public. He has shown he has good technique to deescalate a situation rather. He has a good attitude and is willing to learn. He has displayed good officer safety skills during his time on the FTO program. He is able to gather information and complete basic reports with little assistance from his FTO.

Recruit Officer Tartaglia needs to show improvement in how he structures his narratives. He has all proper information but struggles at times to get it to flow properly. It appears he needs to be more confident in his abilities complete these task in proper manner. He can continue to learn the city streets and patrol zones throughout the city.

I believe based on the FTO sheets and his Sgt. rid along paperwork he is progressing in a positive manner and is where to be expected at this time in the FTO program.

NAME:


  
Lt. B. A. [illegible]  
Coroner

RANK:

Lt.


New York State Division of Criminal Justice Services.  
**POLICE OFFICER REGISTRY ENTRY FORM - CERTIFICATION OF INITIAL EMPLOYMENT**  
(Executive Law § 845)

**SECTION I - REGISTRANT INFORMATION (To be completed by the registrant)**


|  |  |                              |                                |                             |  |                                       |
|--|--|------------------------------|--------------------------------|-----------------------------|--|---------------------------------------|
| Were you previously a police officer in NYS?<br><br><input checked="" type="radio"/> Yes <input type="radio"/> No<br><br>Police Officer as defined by NYS Criminal Procedure Law §1.20.  | Last Name<br><b>TARTAGLIA</b>                              | First Name<br><b>MICHAEL</b> | MI<br><b>J</b>                 | Date of Birth<br>[REDACTED] | Gender<br><input checked="" type="radio"/> M <input type="radio"/> F | Social Security Number*<br>[REDACTED] |
|  | Home Residence Mailing Address<br>[REDACTED]               |                              | City, State, Zip<br>[REDACTED] |                             | County of Home Residence<br>[REDACTED]                               |                                       |
|  | Home Residence Street Address (if Different)<br>[REDACTED] |                              | City, State, Zip<br>[REDACTED] |                             | City, State, Country of birth (if other than U.S.)<br>[REDACTED]     |                                       |
| I am the person named above. I understand that the information in Section I is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief. |  |                              |                                |                             |  |                                       |
| Signature<br>   |  |                              |                                |                             |  | Date<br><b>9/10/15</b>                |

\*Pursuant to the New York State Personal Privacy Protection Law, DCJS is authorized to collect personal identifying information as part of a public safety agency record. Personal identifying information on this form shall not be revealed, released, transferred, disseminated or otherwise communicated orally, in writing, or by electronic means other than to the registrant. Disclosure of personal identifying information is voluntary. Refusal to provide personal identifying information shall not result in the denial of any right, benefit, or privilege.

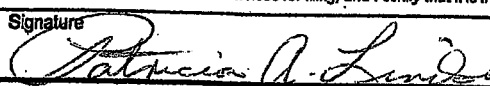
**SECTION II - AGENCY INFORMATION (To be completed by the chief law enforcement officer)**

|   |   |   |   |
|---|---|---|---|
| Last Name<br><b>Williams</b>  | First Name<br><b>Mark</b>   | MI<br><b>W</b>  | Title of Person Signing Section II<br><b>Chief of Police</b>  |
| Name of Law Enforcement Agency<br><b>Utica Police Department</b>  |   |   | Telephone<br><b>315-223-3400</b>  |
| Address<br><b>413 Oriskany Street W.</b>  |   | City, State, ZIP<br><b>Utica, NY, 13502</b>   |   |
| Type of Appointment<br>Full-time <input checked="" type="checkbox"/> Part-time <input type="checkbox"/>   | Background Check Conducted<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Residency Verified<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Fingerprints submitted to DCJS<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| I am the chief law enforcement officer responsible for appointing the person named in Section I as a police officer of the above named law enforcement agency. I understand that the information in Section II is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief. I understand I am responsible for providing the registrant with the requisite training pursuant to §209-g of the General Municipal Law. |   |   |   |
| Signature<br>   |   |   | Date<br><b>9/10/15</b>  |

**SECTION III - CIVIL SERVICE INFORMATION (To be completed by the civil service officer for all registrants Full or Part-time)**

|  |                           |  |   |
|--|---------------------------|--|---|
| Last Name<br><b>Wrobel</b>   | First Name<br><b>Lori</b> | MI<br><b>A</b>                                   | Title of Person Signing Section III<br><b>Executive Secretary</b> |
| Name of Civil Service or Personnel Agency<br><b>City of Utica Civil Service</b>  |                           |  | Telephone<br><b>315-792-0227</b>                                  |
| Address<br><b>1 Kennedy Plaza</b>  |                           | City, State, ZIP<br><b>Utica, New York 13502</b> |   |
| Title and Civil Service Classification of the Registrant<br><b>Police Officer - Competitive</b>  |                           |  |   |
| I am the civil service officer responsible for certifying the appointment of individuals appearing on the payroll of the law enforcement agency named in Section II. I understand that the information in Section III is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief. |                           |  |   |
| Signature<br>  |                           |  | Date<br><b>09-18-15</b>   |

**SECTION IV - OATH OF OFFICE (To be completed by the registrar responsible for recording oaths of office)**

|  |   |  |   |
|--|---|--|---|
| Last Name<br><b>Lindsey</b>  | First Name<br><b>Patricia</b>                                   | MI   | Title of Person Signing Section IV<br><b>City Clerk</b> |
| Name of Recording Office<br><b>City of Utica City Clerks Office</b>  |   |  | Telephone<br><b>315-792-0117</b>                        |
| Address<br><b>1 Kennedy Plaza</b>  |   | City, State, ZIP<br><b>Utica, New York 13502</b> |   |
| Oath of Office Date<br><b>X 9/7/15</b>   | Oath of Office Title of the Registrant<br><b>Police Officer</b> |  |   |
| I am the officer responsible for recording the oaths of office of individuals appointed as police officers of the law enforcement agency named in Section II. The person named in Section I has filed an oath of office as a police officer, pursuant to an appointment received from the person named in Section II. I understand that the information in Section IV is part of a written statement that will be presented to the Division of Criminal Justice Services for filing, and I certify that it is true to the best of my knowledge and belief. |   |  |   |
| Signature<br>  |   |  | Date<br><b>09-18-15</b>                                 |

# City of Utica



Utica, New York

To The City Clerk of Utica

*As provided by Section 12 of the Second Class Cities Laws, I hereby*  
*certify that*

**Name:** Michael J. Tartaglia III

**Address:** [REDACTED]

**Telephone:**

*has this day been appointed to the position of* Police Officer

*in the department of* Public Safety- Bureau Of Police

*the term to commence* September 7, 2015

*the term to end* N/A

*filling unexpired term of (if applicable)*

Signed

Mayor

Title of Official

jmoran

---

**From:** mwilliams  
**Sent:** Monday, September 23, 2019 9:07 AM  
**To:** swooden; mtartaglia  
**Cc:** MAYOR; enoonan; dcinque; sdougherty; jmoran  
**Subject:** FW: RMS 19-36198 Larceny at [REDACTED]

Sergeant Wooden & Officer Tartaglia,

Lt. Dougherty was kind enough to forward me the email below regarding your actions in handling a stolen car incident. The owner of the car- [REDACTED] complimented you both for your professionalism and prompt response.

I'd like to personally thank you for representing the Utica Police Department proudly. Great job!

Megan, Please place a copy of this email in Sgt. Wooden and Officer Tartaglia's personnel files.

*Chief of Police Mark W. Williams*



City of Utica Police Department

413 Oriskany Street West

Utica, New York 13502

Office Telephone: (315) 223-3400

E-mail address: [mwilliams@uticapd.com](mailto:mwilliams@uticapd.com)

\*\*\*\*\*  
**CONFIDENTIALITY NOTICE:** This electronic mail transmission may contain privileged and confidential information intended only for the individual or entity named above. Any dissemination, use, distribution, copying or disclosure of this communication by any other person or entity is strictly prohibited. Should you receive this transmission in error, please notify the sender by telephone or by return e-mail.

\*\*\*\*\*

From: sdougherty <[REDACTED]>

Sent: Thursday, September 19, 2019 11:03 AM

To: mwilliams <mwilliams@uticapd.com>

Cc: swooden <[REDACTED]>; mtartaglia <[REDACTED]>; dcinque <[REDACTED]>

Subject: RMS 19-36198 Larceny at [REDACTED] e

Chief,

[REDACTED] wanted to pass along her appreciation for PO Michael Tartaglia and Sgt. Starr Rae Wooden, amongst other officers, who assisted in locating her vehicle, which was stolen this morning. [REDACTED] said she was impressed with the officers professionalism and prompt service.

Sean

# WILLIAM M. BORRILL

**Attorney-at-Law**

23 Oxford Road  
New Hartford, New York 13413  
Telephone (315) 223-3084  
Facsimile (315) 735-7924  
wmborrill@attorneyborrill.com

Of Counsel

Matthew E. Hamlin, Esq.\*

\*also admitted in Pennsylvania

December 7, 2017

City of Utica Police Department  
Attn: Chief Mark Williams  
413 Oriskany Street West  
Utica, New York 13502

Dear Chief Williams:

On the evening of November 29, 2017, there was an incident on property I own located at [REDACTED] Utica, New York, which is a three (3) unit apartment building along with an office.

The incident occurred when one (1) of my tenants called the police in regard to a concern there were people in the building who were not allowed there. I went to the building and met with UPD Officers Tartaglia, Evans and Lange who were speaking with the tenant who had made the call. It was apparent my tenant was in some distress and was not completely clear on what had occurred.

I write this letter to you to let you know of the professional manner in which Officers Tartaglia, Evans and Lange handled the situation, not only for the safety and concern of the tenant, but the other tenants and the property itself. Their genuine concern, demeanor and professionalism was outstanding. Although Officers Lange and Evans were called out on another matter, Officer Tartaglia stayed and made absolutely sure that the tenant, as well as the property, was secured and truly did a great job ensuring the safety of the tenant. Additionally, Officer Tartaglia called the paramedics to ensure the tenant was not in any medical distress and remained with him until they completed their assessment.

The reason I am writing this is to commend these three (3) Police Officers, who are a credit to the Utica Police Department and are a fine example of what community policing is all about. As you know from my position at the City of Utica, all we hear are the negatives about the Police Department, the City of Utica, etc. These three (3) Police Officers are an example of why this is simply not true. You should be extremely proud of these three (3) young officers.

Very truly yours,

*William M. Borrill*

William M. Borrill

WMB/ac

# UTICA POLICE DEPARTMENT

Mayor Robert Palmieri

Chief Mark W. Williams

## LETTER FOR FILE


**Sergeant Benjamin Perra, Sergeant Joseph Cimpi, Officer Jordan Dodge, Officer Alexander Castilla, Officer Dennis Basler, Officer Michael Tartaglia and Officer Benjamin Winkler**

On March 27, 2017, at approximately 10:15 p.m., several units were dispatched to the [REDACTED] for a robbery which had just occurred. It was further related by the dispatcher that the two suspects were black males wearing dark clothing and were in possession of a handgun. While en route, Officer Jordan Dodge located two males that matched the description of the suspects on the [REDACTED]. As he attempted to speak with these individuals, they began to flee the area on foot. The subjects ran in opposite directions.

Several officers who were responding to the scene were able to take one of the suspects into custody. A BB gun, that looked identical to a handgun, was located in the area where Woodson had fled. A perimeter was then set up to try and contain the second suspect. While checking the yards on the [REDACTED], the second suspect was located hiding near a fence. This suspect was also in possession of a BB gun.

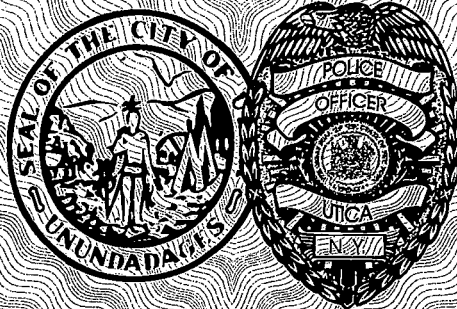
Both males were later charged by members of CID with Robbery 2<sup>nd</sup>. Due to these officers' quick actions and teamwork, they were able to remove two dangerous and violent subjects from the streets and possibly prevent them from committing similar robberies.

Dated: May 25, 2017

  
Mark W. Williams, Chief of Police

# Utica Police Department

UTICA, NEW YORK



## Certificate of Commendation HONORABLE SERVICE

Awarded to

**SERGEANT BRIAN FRENCH, OFFICER ADAM HOWE, OFFICER  
MICHAEL TARTAGLIA and OFFICER JAMES FITZGERALD**

On September 25, 2015, officers were dispatched to the [REDACTED] of Blandina Street regarding a robbery that had just occurred. Officer James Fitzgerald arrived on scene and immediately determined that it was an armed robbery. Officer Fitzgerald gave out the suspect description and officers began to check the area. A short time later, Officer Adam Howe and his partner Officer Michael Tartaglia attempted to stop a person matching the description of the suspect coming from the immediate area of the robbery. The subject ran from the officers and was taken into custody after a short chase. Proceeds from the robbery were located on his person.

While assisting the officers with the first subject, Sergeant French observed a second subject that matched the description in a rear yard. A chase ensued and ultimately this second subject was taken into custody. He, too, had proceeds from the robbery. Also located in connection with the incident was a loaded 9mm handgun. These officers displayed great communication skills and team work. They are a credit to themselves and the City of Utica.

Dated: May 26, 2016

A handwritten signature in black ink, appearing to read 'Mark W. Williams'.

Mark W. Williams, Chief of Police

# State of New York

Division of Criminal Justice Services

## Municipal Police Training Council

Hereby Acknowledges and Declares that

***Michael J. Tartaglia, III***

has successfully completed the

### ***Breath Analysis Operator Course***

which satisfies the minimum  
criteria established by the  
Municipal Police Training Council

**Mohawk Valley Police Academy  
Utica, New York  
September 7-9, 2015**



Ronald G. Spike  
Chairman  
Municipal Police Training Council



Michael R. Wood  
Deputy Commissioner  
Division of Criminal Justice Services C-20114

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                                      | Type       | Credits | Hours | Prerequisites | Course 1 | Course 2 | Comments |
|---------------|--|------------|---------|-------|---------------|----------|----------|----------|
| 2016000000007 | 2015 December<br>In-Service-Active Shooter | In Service | 0.00    | 8.00  |               |          |          |          |

## Course Schedule

### Schedule

| Class ID | Start Date/Time | End Date/Time | Company | Course Location |
|----------|-----------------|---------------|---------|-----------------|
|----------|-----------------|---------------|---------|-----------------|

|  |                  |                  |  |  |
|--|------------------|------------------|--|--|
|  | 12/01/2015 08:00 | 12/01/2015 16:00 |  |  |
|  | 12/03/2015 08:00 | 12/03/2015 16:00 |  |  |
|  | 12/07/2015 08:00 | 12/07/2015 16:00 |  |  |
|  | 12/07/2015 08:00 | 12/07/2015 16:00 |  |  |
|  | 12/09/2015 08:00 | 12/09/2015 16:00 |  |  |
|  | 12/11/2015 08:00 | 12/11/2015 16:00 |  |  |
|  | 12/11/2015 08:00 | 12/11/2015 16:00 |  |  |
|  | 12/17/2015 08:00 | 12/17/2015 16:00 |  |  |
|  | 12/17/2015 08:00 | 12/17/2015 16:00 |  |  |
|  | 12/17/2015 08:00 | 12/17/2015 16:00 |  |  |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>                      | <u>Type</u> | <u>Prerequisites</u> |              |   |
|------------------|-----------------------------------|-------------|----------------------|--------------|---|
|                  |                                   |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> <u>Course 2</u> <u>Comments</u> |
| 20160000000031   | 2016 Active Shooter<br>in Service | In Service  | 0.00                 | 8.00         |   |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 04/05/2016 08:00       | 04/05/2016 16:00     |                |                        |
|                 | 04/07/2016 08:00       | 04/07/2016 16:00     |                |                        |
|                 | 04/11/2016 08:00       | 04/11/2016 16:00     |                |                        |
|                 | 04/13/2016 08:00       | 04/13/2016 16:00     |                |                        |
|                 | 04/15/2016 08:00       | 04/15/2016 16:00     |                |                        |
|                 | 04/21/2016 08:00       | 04/21/2016 16:00     |                |                        |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                   | Type       | Prerequisites |       |          | Comments                |
|---------------|-------------------------|------------|---------------|-------|----------|-------------------------|
|               |                         |            | Credits       | Hours | Course 1 |                         |
| 2017000000004 | 2016 December Inservice | In Service | 0.00          | 8.00  | Course 2 | Active Shooter Training |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 12/05/2016 08:00 | 12/05/2016 16:00 |         |                 |
|          | 12/05/2016 08:00 | 12/05/2016 16:00 |         |                 |
|          | 12/07/2016 08:00 | 12/07/2016 16:00 |         |                 |
|          | 12/07/2016 08:00 | 12/07/2016 16:00 |         |                 |
|          | 12/09/2016 08:00 | 12/09/2016 16:00 |         |                 |
|          | 12/15/2016 08:00 | 12/15/2016 16:00 |         |                 |
|          | 12/19/2016 08:00 | 12/19/2016 16:00 |         |                 |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO      | Title   | Type       | Credits | Hours | Course 1 | Course 2 | Comments   |
|----------------|---|------------|---------|-------|----------|----------|--|
| 20160000000015 | 2016 January In Service Workplace Violence/Sexual | In Service | 0.00    | 8.00  |          |          | Domestic Violence-Legal Updates-JAU updates-Debour Doctrine-Work place violence /Sexual harassment |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 01/06/2016 08:00 | 01/06/2016 16:00 |         |                 |
|          | 01/06/2016 08:00 | 01/06/2016 16:00 |         |                 |
|          | 01/06/2016 08:00 | 01/06/2016 16:00 |         |                 |
|          | 01/08/2016 08:00 | 01/08/2016 16:00 |         |                 |
|          | 01/08/2016 08:00 | 01/08/2016 16:00 |         |                 |
|          | 01/08/2016 08:00 | 01/08/2016 16:00 |         |                 |
|          | 01/14/2016 08:00 | 01/14/2016 16:00 |         |                 |
|          | 01/14/2016 08:00 | 01/14/2016 16:00 |         |                 |
|          | 01/14/2016 08:00 | 01/14/2016 16:00 |         |                 |
|          | 01/18/2016 08:00 | 01/18/2016 16:00 |         |                 |
|          | 01/18/2016 08:00 | 01/18/2016 16:00 |         |                 |
|          | 01/18/2016 08:00 | 01/18/2016 16:00 |         |                 |
|          | 01/22/2016 08:00 | 01/22/2016 16:00 |         |                 |
|          | 01/22/2016 08:00 | 01/22/2016 16:00 |         |                 |
|          | 01/22/2016 08:00 | 01/22/2016 16:00 |         |                 |
|          | 01/28/2016 08:00 | 01/28/2016 16:00 |         |                 |
|          | 01/28/2016 08:00 | 01/28/2016 16:00 |         |                 |
|          | 01/28/2016 08:00 | 01/28/2016 16:00 |         |                 |

# Training Course Summary

Print Date: October 01, 2020

Instructor      Reserve Date      Course Category      Serial ID      Notes

## Course Information

|                  |                        |             |                      |              |   |
|------------------|------------------------|-------------|----------------------|--------------|---|
| <u>Course NO</u> | <u>Title</u>           | <u>Type</u> | <u>Prerequisites</u> |              | <u>Comments</u>   |
| 2017000000005    | 2016 October Inservice | In Service  | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> <u>Course 2</u>   |
|                  |                        |             | 0.00                 | 0.00         | Use of Force / Legal Updates /<br>Infectious Disease / Performance<br>Evaluation Training for Supervisors |

## Course Schedule

### Schedule

|                 |                        |                      |                |                        |
|-----------------|------------------------|----------------------|----------------|------------------------|
| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|                 | 10/04/2016 08:00       | 10/04/2016 16:00     |                | ---                    |
|                 | 10/14/2016 08:00       | 10/14/2016 16:00     |                | ---                    |
|                 | 10/18/2016 08:00       | 10/18/2016 16:00     |                | ---                    |
|                 | 10/20/2016 08:00       | 10/20/2016 16:00     |                | ---                    |
|                 | 10/24/2016 08:00       | 10/24/2016 16:00     |                | ---                    |
|                 | 10/28/2016 08:00       | 10/28/2016 16:00     |                | ---                    |

Instructor      Reserve Date      Course Category      Serial ID      Notes

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>                       | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u>  |
|------------------|------------------------------------|-------------|----------------|--------------|-----------------|-----------------|--|
| 2017000000003    | 2016 September<br>Inservice-DefTac | In Service  | 0.00           | 8.00         |                 |                 | Verbal Judo, DT, Leads On-Line,<br>Proper Collection City Marhall<br>Supervisor training |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|-----------------|------------------------|----------------------|----------------|------------------------|

|  |                  |                  |  |  |
|--|------------------|------------------|--|--|
|  | 09/06/2016 08:00 | 09/06/2016 16:00 |  |  |
|  | 09/08/2016 08:00 | 09/08/2016 16:00 |  |  |
|  | 09/12/2016 08:00 | 09/12/2016 16:00 |  |  |
|  | 09/14/2016 08:00 | 09/14/2016 16:00 |  |  |
|  | 09/16/2016 08:00 | 09/16/2016 16:00 |  |  |
|  | 09/22/2016 08:00 | 09/22/2016 16:00 |  |  |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>         | <u>Type</u> | <u>Prerequisites</u> |              |                 |
|------------------|----------------------|-------------|----------------------|--------------|-----------------|
|                  |                      |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 2</u> |
| 2016000000030    | 2016 TASER InService | In Service  | 0.00                 | 8.00         | <u>Comments</u> |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 02/05/2016 08:00       | 02/05/2016 16:00     |                |                        |
|                 | 02/09/2016 08:00       | 02/09/2016 16:00     |                |                        |
|                 | 02/15/2016 08:00       | 02/15/2016 16:00     |                |                        |
|                 | 02/17/2016 08:00       | 02/17/2016 16:00     |                |                        |
|                 | 02/19/2016 08:00       | 02/19/2016 16:00     |                |                        |
|                 | 02/25/2016 08:00       | 02/25/2016 16:00     |                |                        |

### Instructor

| <u>Instructor</u> | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|-------------------|---------------------|------------------------|------------------|--------------|
|-------------------|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                 | Type       | Prerequisites |       |          | Comments                                   |
|---------------|-----------------------|------------|---------------|-------|----------|--|
|               |                       |            | Credits       | Hours | Course 1 |  |
| 2017000000032 | 2017 April In-Service | In Service | 0.00          | 8.00  | Course 2 | Fair and Impartial Policing/DV Form review |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 04/10/2017 08:00 | 04/10/2017 16:00 |         |                 |
|          | 04/18/2017 08:00 | 04/18/2017 16:00 |         |                 |
|          | 04/20/2017 08:00 | 04/20/2017 16:00 |         |                 |
|          | 04/24/2017 08:00 | 04/24/2017 16:00 |         |                 |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>                              | <u>Type</u> | <u>Prerequisites</u> |              | <u>Comments</u>                              |
|------------------|---|-------------|----------------------|--------------|--|
|                  |   |             | <u>Credits</u>       | <u>Hours</u> |  |
| 2018000000002    | 2017 December<br>Inservice/Active Shooter | In Service  | 0.00                 | 8.00         | Training conducted at DHS by Inv Joe Amerosa |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 12/04/2017 08:00       | 12/04/2017 16:00     |                |                        |
|                 | 12/06/2017 08:00       | 12/06/2017 16:00     |                |                        |
|                 | 12/08/2017 08:00       | 12/08/2017 16:00     |                |                        |
|                 | 12/12/2017 08:00       | 12/12/2017 16:00     |                |                        |
|                 | 12/14/2017 08:00       | 12/14/2017 16:00     |                |                        |
|                 | 12/22/2017 08:00       | 12/22/2017 16:00     |                |                        |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>            | <u>Type</u> | <u>Prerequisites</u> |              |                 | <u>Comments</u>   |
|------------------|-------------------------|-------------|----------------------|--------------|-----------------|---|
|                  |                         |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> |   |
| 2017000000007    | 2017 January In-Service | In Service  | 0.00                 | 8.00         | <u>Course 2</u> | Arrest Diversion/ DV/ NARCO/<br>Workplace Violence/Sexual<br>Harassment/City Court Procedures |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
| ---             | 01/20/2017 08:00       | 01/20/2017 16:00     | ---            | ---                    |
| ---             | 01/24/2017 08:00       | 01/24/2017 16:00     | ---            | ---                    |
| ---             | 01/26/2017 08:00       | 01/26/2017 16:00     | ---            | ---                    |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title  | Type       | Prerequisites |       |          | Comments                                   |
|---------------|--|------------|---------------|-------|----------|--|
|               |  |            | Credits       | Hours | Course 1 |  |
| 2017000000087 | 2017 September in-service In Service Fall Firearms | In Service | 0.00          | 8.00  | Course 2 | in-service Night fire and tactical course. |

## Course Schedule

| Schedule | Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
|          |          | 09/07/2017 14:00 | 09/07/2017 22:00 |         |                 |
|          |          | 09/11/2017 14:00 | 09/11/2017 22:00 |         |                 |
|          |          | 09/13/2017 14:00 | 09/13/2017 22:00 |         |                 |
|          |          | 09/15/2017 14:00 | 09/15/2017 22:00 |         |                 |
|          |          | 09/21/2017 14:00 | 09/21/2017 16:00 |         |                 |
|          |          | 09/29/2017 14:00 | 09/29/2017 22:00 |         |                 |

## Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO      | Title                      | Type       | Prerequisites |       | Comments  |
|----------------|----------------------------|------------|---------------|-------|---|
|                |                            |            | Credits       | Hours |   |
| 20180000000036 | 2018 April In Service/EVOC | In Service | 0.00          | 8.00  | EVOC Instructors: Geddes, Berger, Howe, Grande, Acquaviva |

## Course Schedule

| Schedule | Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
|          |          | 04/09/2018 08:00 | 04/09/2018 16:00 |         |                 |
|          |          | 04/17/2018 08:00 | 04/17/2018 16:00 |         |                 |
|          |          | 04/19/2018 08:00 | 04/19/2018 16:00 |         |                 |
|          |          | 04/23/2018 08:00 | 04/23/2018 16:00 |         |                 |
|          |          | 04/25/2018 08:00 | 04/25/2018 16:00 |         |                 |
|          |          | 04/27/2018 08:00 | 04/27/2018 16:00 |         |                 |

## Instructor

| Reserve Date | Course Category | Serial ID | Notes |
|--------------|-----------------|-----------|-------|
|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                   | Type       | Prerequisites |       |          | Comments                    |
|---------------|-------------------------|------------|---------------|-------|----------|-----------------------------|
|               |                         |            | Credits       | Hours | Course 1 |                             |
| 2019000000005 | 2018 December Inservice | In Service | 0.00          | 8.00  | Course 2 | Active Shooter/ Inv Amerosa |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 12/03/2018 08:00 | 12/03/2018 16:00 |         |                 |
|          | 12/07/2018 08:00 | 12/07/2018 16:00 |         |                 |
|          | 12/11/2018 08:00 | 12/11/2018 16:00 |         |                 |
|          | 12/17/2018 08:00 | 12/17/2018 16:00 |         |                 |
|          | 12/19/2018 08:00 | 12/19/2018 16:00 |         |                 |
|          | 12/21/2018 08:00 | 12/21/2018 16:00 |         |                 |

### Instructor

| Reserve Date | Course Category | Serial ID | Notes |
|--------------|-----------------|-----------|-------|
|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                    | Type       | Prerequisites |       |          | Comments  |
|---------------|--------------------------|------------|---------------|-------|----------|---|
|               |                          |            | Credits       | Hours | Course 1 |   |
| 2018000000009 | 2018 February In-Service | In Service | 0.00          | 0.00  | Course 2 | CPR/Cultural Diversity/Workplace Violence-Sexual Harassment |

## Course Schedule

| Schedule | Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
|          |          | 02/02/2018 08:00 | 02/02/2018 16:00 |         |                 |
|          |          | 02/06/2018 08:00 | 02/06/2018 16:00 |         |                 |
|          |          | 02/08/2018 08:00 | 02/08/2018 16:00 |         |                 |
|          |          | 02/12/2018 08:00 | 02/12/2018 16:00 |         |                 |
|          |          | 02/16/2018 08:00 | 02/16/2018 16:00 |         |                 |
|          |          | 02/22/2018 08:00 | 02/22/2018 16:00 |         |                 |

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title   | Type       | Credits | Hours | Prerequisites | Comments                                   |
|---------------|---|------------|---------|-------|---------------|--|
| 2018000000001 | 2018 January Inservice<br>UOF/Person With Diss. | In Service | 0.00    | 8.00  | Course 1      | Use of Force and Person with disabilities. |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 01/03/2018 08:00 | 01/03/2018 16:00 |         |                 |
|          | 01/05/2018 08:00 | 01/05/2018 16:00 |         |                 |
|          | 01/09/2018 08:00 | 01/09/2018 16:00 |         |                 |
|          | 01/11/2018 08:00 | 01/11/2018 16:00 |         |                 |
|          | 01/19/2018 08:00 | 01/19/2018 16:00 |         |                 |
|          | 01/25/2018 08:00 | 01/25/2018 16:00 |         |                 |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                    | Type       | Credits | Hours | Course 1 | Course 2 | Comments              |
|---------------|--------------------------|------------|---------|-------|----------|----------|-----------------------|
| 2019000000004 | 2018 September Inservice | In Service | 0.00    | 0.00  |          |          | Firearms/ Inv Amerosa |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 09/10/2018 08:00 | 09/10/2018 16:00 |         |                 |
|          | 09/14/2018 08:00 | 09/14/2018 16:00 |         |                 |
|          | 09/18/2018 08:00 | 09/18/2018 16:00 |         |                 |
|          | 09/20/2018 08:00 | 09/20/2018 16:00 |         |                 |
|          | 09/24/2018 08:00 | 09/24/2018 16:00 |         |                 |
|          | 09/28/2018 08:00 | 09/28/2018 16:00 |         |                 |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title              | Type       | Credits | Hours | Prerequisites | Course 1 | Course 2 | Comments  |
|---------------|--------------------|------------|---------|-------|---------------|----------|----------|---|
| 2019000000007 | 2019 Feb Inservice | In Service | 0.00    | 8.00  |               |          |          | Legal Updates/ Alcohol awareness/<br>EAP services |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|-----------------|------------------------|----------------------|----------------|------------------------|

|  |                  |                  |  |  |
|--|------------------|------------------|--|--|
|  | 02/05/2019 08:00 | 02/05/2019 16:00 |  |  |
|  | 02/07/2019 08:00 | 02/07/2019 16:00 |  |  |
|  | 02/11/2019 08:00 | 02/11/2019 16:00 |  |  |
|  | 02/15/2019 08:00 | 02/15/2019 16:00 |  |  |
|  | 02/21/2019 08:00 | 02/21/2019 16:00 |  |  |
|  | 02/25/2019 08:00 | 02/25/2019 16:00 |  |  |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>           | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u>  |
|------------------|------------------------|-------------|----------------|--------------|-----------------|-----------------|--|
| 20190000000003   | 2019 January Inservice | In Service  | 0.00           | 8.00         |                 |                 | Infectious Disease (Phil Taurisano<br>UFD)/Use of Force(LT Holt)/ DV/Work<br>place violence/Sexual Harassment<br>(PO Jess Dodge) |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 01/08/2019 08:00       | 01/08/2019 16:00     |                |                        |
|                 | 01/10/2019 08:00       | 01/10/2019 16:00     |                |                        |
|                 | 01/14/2019 08:00       | 01/14/2019 16:00     |                |                        |
|                 | 01/16/2019 08:00       | 01/16/2019 16:00     |                |                        |
|                 | 01/18/2019 08:00       | 01/18/2019 16:00     |                |                        |
|                 | 01/24/2019 08:00       | 01/24/2019 16:00     |                |                        |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>                | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u>              |
|------------------|-----------------------------|-------------|----------------|--------------|-----------------|-----------------|------------------------------|
| 2019000000031    | 2019 May Inservice Firearms | In Service  | 0.00           | 8.00         |                 |                 | Lead Instructor Inv. Amerosa |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|-----------------|------------------------|----------------------|----------------|------------------------|

|  |                  |                  |  |  |
|--|------------------|------------------|--|--|
|  | 05/06/2019 05:00 | 05/06/2019 13:00 |  |  |
|  | 05/08/2019 05:00 | 05/08/2019 13:00 |  |  |
|  | 05/10/2019 05:00 | 05/10/2019 13:00 |  |  |
|  | 05/16/2019 05:00 | 05/16/2019 13:00 |  |  |
|  | 05/20/2019 05:00 | 05/20/2019 13:00 |  |  |
|  | 05/24/2019 05:00 | 05/24/2019 13:00 |  |  |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO      | Title                                 | Type       | Credits | Hours | Course 1 | Course 2 | Comments   |
|----------------|---------------------------------------|------------|---------|-------|----------|----------|--|
| 20190000000050 | 2019 November inservice defensive Tac | In Service | 0.00    | 8.00  |          |          | Defensive tactics/ CIT/Sexual Harassment / Critical Incident and continuity / Supervisor performance Eval training |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 11/04/2019 08:00 | 11/04/2019 16:00 |         |                 |
|          | 11/08/2019 08:00 | 11/08/2019 16:00 |         |                 |
|          | 11/12/2019 08:00 | 11/12/2019 16:00 |         |                 |
|          | 11/14/2019 08:00 | 11/14/2019 16:00 |         |                 |
|          | 11/18/2019 08:00 | 11/18/2019 16:00 |         |                 |
|          | 11/22/2019 08:00 | 11/22/2019 16:00 |         |                 |

### Instructor

| Reserve Date | Course Category | Serial ID | Notes |
|--------------|-----------------|-----------|-------|
|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                       | Type       | Credits | Hours | Course 1 | Course 2 | Comments                    |
|---------------|-----------------------------|------------|---------|-------|----------|----------|-----------------------------|
| 2019000000032 | 2019 Patrol Rifle Inservice | In Service | 0.00    | 8.00  |          |          | Inv Amerosa Lead Instructor |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 07/01/2019 08:00 | 07/01/2019 16:00 |         |                 |
|          | 07/09/2019 08:00 | 07/09/2019 16:00 |         |                 |
|          | 07/12/2019 08:00 | 07/12/2019 16:00 |         |                 |
|          | 07/16/2019 08:00 | 07/16/2019 16:00 |         |                 |
|          | 07/19/2019 08:00 | 07/19/2019 16:00 |         |                 |
|          | 07/23/2019 08:00 | 07/23/2019 16:00 |         |                 |
|          | 07/26/2019 08:00 | 07/26/2019 16:00 |         |                 |
|          | 07/30/2019 08:00 | 07/30/2019 16:00 |         |                 |

### Instructor

| Reserve Date | Course Category | Serial ID | Notes |
|--------------|-----------------|-----------|-------|
|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>             | <u>Type</u> | <u>Prerequisites</u> |              |                 | <u>Comments</u>                                      |
|------------------|--------------------------|-------------|----------------------|--------------|-----------------|--|
|                  |                          |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> |  |
| 2020000000002    | 2020 February in-service | In Service  | 0.00                 | 8.00         | <u>Course 2</u> | CPR recert/ DV/ Workplace Violence/Sexual Harassment |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 02/04/2020 08:00       | 02/04/2020 16:00     |                |                        |
|                 | 02/10/2020 08:00       | 02/10/2020 16:00     |                |                        |
|                 | 02/12/2020 08:00       | 02/12/2020 16:00     |                |                        |
|                 | 02/20/2020 08:00       | 02/20/2020 16:00     |                |                        |
|                 | 02/24/2020 08:00       | 02/24/2020 16:00     |                |                        |
|                 | 02/26/2020 08:00       | 02/26/2020 16:00     |                |                        |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                  | Type       | Prerequisites |       |          | Comments                  |
|---------------|------------------------|------------|---------------|-------|----------|---------------------------|
|               |                        |            | Credits       | Hours | Course 2 |                           |
| 2020000000001 | 2020 January inservice | In Service | 0.00          | 8.00  |          | Discovery/Bail reform/UOF |

## Course Schedule

| Schedule | Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
|          |          | 01/07/2020 08:00 | 01/07/2020 16:00 |         |                 |
|          |          | 01/13/2020 08:00 | 01/13/2020 16:00 |         |                 |
|          |          | 01/15/2020 08:00 | 01/15/2020 16:00 |         |                 |
|          |          | 01/21/2020 08:00 | 01/21/2020 16:00 |         |                 |
|          |          | 01/23/2020 08:00 | 01/23/2020 16:00 |         |                 |
|          |          | 01/29/2020 08:00 | 01/29/2020 16:00 |         |                 |

## Instructor

| Reserve Date | Course Category | Serial ID | Notes |
|--------------|-----------------|-----------|-------|
|--------------|-----------------|-----------|-------|

## Print Date: October 01, 2020

### Prerequisites

### Course Schedule

Instructor

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                 | Type       | Credits | Hours | Course 1 | Course 2 | Comments  |
|---------------|-----------------------|------------|---------|-------|----------|----------|---|
| 2017000000067 | August 2017 Inservice | In Service | 0.00    | 8.00  |          |          | Legal Updates/Infectious disease/Supervisor training/CPTED/Pursuit Policy |

## Course Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 08/08/2017 08:00 | 08/08/2017 16:00 |         |                 |
|          | 08/14/2017 08:00 | 08/14/2017 16:00 |         |                 |
|          | 08/16/2017 08:00 | 08/16/2017 16:00 |         |                 |
|          | 08/18/2017 08:00 | 08/18/2017 16:00 |         |                 |
|          | 08/22/2017 08:00 | 08/22/2017 16:00 |         |                 |
|          | 08/24/2017 08:00 | 08/24/2017 16:00 |         |                 |

## Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

## Course Information

| Course NO     | Title       | Type                           | Credits | Hours | Course 1 | Course 2 | Comments |
|---------------|-------------|--------------------------------|---------|-------|----------|----------|----------|
| 2018000000058 | CIT Program | Other Outside agency sponsored | 0.00    | 40.00 |          |          |          |

## Course Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 10/22/2018 08:00 | 10/26/2018 16:00 |         |                 |

## Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                            | Type                     | Credits | Hours | Course 1 | Course 2 | Comments |
|---------------|----------------------------------|--------------------------|---------|-------|----------|----------|----------|
| 2017000000076 | Effect. Responding to EMO crisis | State Sponsored Training | 0.00    | 8.00  |          |          |          |

## Course Schedule

| Schedule | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
| Class ID | 11/10/2017 08:00 | 11/10/2017 16:00 |         |                 |

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

## Course Information

| Course NO     | Title                           | Type       | Credits | Hours | Course 1 | Course 2 | Comments  |
|---------------|---------------------------------|------------|---------|-------|----------|----------|---|
| 2017000000021 | Feb 2017 Inservice Blue Courage | In Service | 0.00    | 8.00  |          |          | Blue Courage/Officer Wellness<br>Instructors: Capt Cinque and Sgt. Laurey |

## Course Schedule

| Schedule | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
| Class ID | 02/07/2017 08:00 | 03/07/2017 16:00 |         |                 |
|          | 02/13/2017 08:00 | 02/13/2017 16:00 |         |                 |
|          | 02/17/2017 08:00 | 02/17/2017 16:00 |         |                 |
|          | 02/17/2017 08:00 | 02/17/2017 16:00 |         |                 |
|          | 02/21/2017 08:00 | 02/21/2017 16:00 |         |                 |
|          | 02/23/2017 08:00 | 02/23/2017 16:00 |         |                 |

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO      | Title             | Type                     | Credits | Hours | Course 1 | Course 2 | Comments |
|----------------|-------------------|--------------------------|---------|-------|----------|----------|----------|
| 20180000000017 | Fentanyl Training | State Sponsored Training | 0.00    | 16.00 |          |          |          |

## Course Schedule

| Schedule | Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
|          |          | 03/15/2018 08:00 | 03/16/2018 16:00 |         |                 |

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

## Course Information

| Course NO      | Title                    | Type       | Credits | Hours | Course 1 | Course 2 | Comments |
|----------------|--------------------------|------------|---------|-------|----------|----------|----------|
| 20160000000053 | Firearms 2016 in-service | In Service | 0.00    | 8.00  |          |          |          |

## Course Schedule

| Schedule | Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|----------|------------------|------------------|---------|-----------------|
|          | Firearms | 06/06/2016 08:00 | 06/06/2016 16:00 |         |                 |
|          | Firearms | 06/08/2016 08:00 | 06/08/2016 16:00 |         |                 |
|          | Firearms | 06/10/2016 08:00 | 06/10/2016 16:00 |         |                 |
|          | Firearms | 06/14/2016 08:00 | 06/14/2016 16:00 |         |                 |
|          | Firearms | 06/16/2016 08:00 | 06/16/2016 16:00 |         |                 |
|          | Firearms | 06/24/2016 08:00 | 06/24/2016 16:00 |         |                 |

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>                                 | <u>Type</u> | <u>Prerequisites</u> |              |                 | <u>Comments</u>                                     |
|------------------|--|-------------|----------------------|--------------|-----------------|---|
|                  |  |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> |   |
| 2017000000060    | June 2017 Firearms w/<br>Use of Force Review | In Service  | 0.00                 | 8.00         | <u>Course 2</u> | Inv Amerosa Lead Instructor- Oneida<br>County Range |

## Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
|                 |                 | 06/05/2017 08:00       | 06/05/2017 16:00     |                |                        |
|                 |                 | 06/07/2017 08:00       | 06/07/2017 16:00     |                |                        |
|                 |                 | 06/09/2017 08:00       | 06/09/2017 16:00     |                |                        |
|                 |                 | 06/15/2017 08:00       | 06/15/2017 16:00     |                |                        |
|                 |                 | 06/19/2017 08:00       | 06/19/2017 16:00     |                |                        |
|                 |                 | 06/23/2017 08:00       | 06/23/2017 16:00     |                |                        |

| <u>Instructor</u> | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|-------------------|---------------------|------------------------|------------------|--------------|
|-------------------|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title               | Type       | Prerequisites |       |          | Comments   |
|---------------|---------------------|------------|---------------|-------|----------|--|
|               |                     |            | Credits       | Hours | Course 1 |  |
| 2018000000045 | June 2018 Inservice | In Service | 0.00          | 8.00  | Course 2 | Infectious Disease, Barricaded Subject, Legal Updates, Raise the age |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 06/04/2018 08:00 | 06/04/2018 16:00 |         |                 |
|          | 06/12/2018 08:00 | 06/12/2018 16:00 |         |                 |
|          | 06/14/2018 08:00 | 06/14/2018 16:00 |         |                 |
|          | 06/18/2018 08:00 | 06/18/2018 16:00 |         |                 |
|          | 06/22/2018 08:00 | 06/22/2018 16:00 |         |                 |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title          | Type       | Credits | Hours | Prerequisites | Course 1 | Course 2 | Comments |
|---------------|----------------|------------|---------|-------|---------------|----------|----------|----------|
| 2020000000026 | June 2020 EVOC | In Service | 0.00    | 8.00  |               |          |          |          |

## Course Schedule

### Schedule

| Class ID | Start Date/Time | End Date/Time | Company | Course Location |
|----------|-----------------|---------------|---------|-----------------|
|----------|-----------------|---------------|---------|-----------------|

|  |                  |                  |  |  |
|--|------------------|------------------|--|--|
|  | 06/03/2020 08:00 | 06/03/2020 16:00 |  |  |
|  | 06/09/2020 08:00 | 06/09/2020 16:00 |  |  |
|  | 06/11/2020 08:00 | 06/11/2020 16:00 |  |  |
|  | 06/17/2020 08:00 | 06/17/2020 16:00 |  |  |
|  | 06/19/2020 08:00 | 06/19/2020 16:00 |  |  |
|  | 06/23/2020 08:00 | 06/23/2020 16:00 |  |  |
|  | 06/25/2020 08:00 | 06/25/2020 16:00 |  |  |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title               | Type       | Credits | Hours | Prerequisites | Course 1 | Course 2 | Comments  |
|---------------|---------------------|------------|---------|-------|---------------|----------|----------|---|
| 2019000000029 | June Inservice 2019 | In Service | 0.00    | 8.00  |               |          |          | Narcan Refresher training/ Leads<br>On-Line training/ Taserrecert |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 06/07/2019 08:00 | 06/07/2019 16:00 |         |                 |
|          | 06/11/2019 08:00 | 06/11/2019 16:00 |         |                 |
|          | 06/13/2019 08:00 | 06/13/2019 16:00 |         |                 |
|          | 06/17/2019 08:00 | 06/17/2019 16:00 |         |                 |
|          | 06/21/2019 08:00 | 06/21/2019 16:00 |         |                 |
|          | 06/27/2019 08:00 | 06/27/2019 16:00 |         |                 |

### Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> |              |                 |                 | <u>Comments</u> |
|------------------|--------------|-------------|----------------------|--------------|-----------------|-----------------|-----------------|
|                  |              |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |                 |

# Training Course Summary

Print Date: October 01, 2020

## Course Information

**Course NO**  
2016000000080

**Title**  
Mobile Field Force

**Type**  
In Service

## Prerequisites

**Credits**  
0.00

**Hours**  
8.00

**Course 1**

**Course 2**

## Comments

UPD MOBILE FIELD FORCE  
TRAINING  
RMS #16-57732  
11/30/2016  
1100-1500 Hrs.

## TRAINING DAY OUTLINE

(Roll Call Room)  
Equipment Issue

Power Point Presentation Mobile Field  
Force Operations

(National Guard Center Burrstone Rd.)  
Mission Statement

Equipment Fit Check/Familiarization

Squad Leader and Squad  
Assignments

Team Movement/Military Drill

Baton Manual of Arms

Field Force Formations and Arrest  
Techniques

Emergency Line

Line Formation and Line Close  
Support

Line relief

Wedge Formation and Wedge Close  
Support

Encirclement Formation and  
Encirclement Close Support

Separation Formation

Cross Bow Line Techniques

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Prerequisites</u> |                 | <u>Comments</u>             |
|------------------|--------------|-------------|----------------------|-----------------|-----------------------------|
|                  |              |             | <u>Credits</u>       | <u>Hours</u>    |                             |
|                  |              |             | <u>Course 1</u>      | <u>Course 2</u> |                             |
|                  |              |             |                      |                 | Cross Bow Arrest Techniques |
|                  |              |             |                      |                 | Cross Bow Rescue Techniques |

Officer's Present for Training:

Giruzzi  
 Baye  
 Tartaglia  
 Llewellyn  
 Parkosewich  
 Fitzgerald  
 Hulser  
 Murphy  
 Piersall  
 S. Berger  
 Kellogg  
 Dongsavangh  
 Manion  
 Detraglia  
 Mahay  
 Mahaffy  
 Balio  
 Scorzafava  
 J. Dodge  
 Omeragic  
 Geddes  
 Amerosa

Respectfully Submitted,  
 Inv. Joseph Amerosa

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 11/30/2016 11:00       | 11/30/2016 15:00     |                | ---                    |

| <u>Instructor</u> | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|-------------------|---------------------|------------------------|------------------|--------------|
|-------------------|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO     | Title                   | Type       | Credits | Hours | Course 1 | Course 2 | Comments  |
|---------------|-------------------------|------------|---------|-------|----------|----------|---|
| 2016000000006 | October 2015 in-service | In Service | 0.00    | 8.00  |          |          | Infectious disease-Dealing with difficult people-K9 |

## Course Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 10/08/2015 08:00 | 10/08/2015 16:00 |         |                 |
|          | 10/28/2015 08:00 | 10/28/2015 16:00 |         |                 |
|          | 10/30/2015 08:00 | 10/30/2015 16:00 |         |                 |

## Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

## Course Information

| Course NO     | Title        | Type       | Credits | Hours | Course 1 | Course 2 | Comments |
|---------------|--------------|------------|---------|-------|----------|----------|----------|
| 2016000000071 | Patrol Rifle | In Service | 0.00    | 24.00 |          |          |          |

## Course Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 10/19/2016 08:00 | 10/21/2016 16:00 |         |                 |

## Instructor

| Instructor | Reserve Date | Course Category | Serial ID | Notes |
|------------|--------------|-----------------|-----------|-------|
|------------|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

|                                   |   |  |                        |                       |   |                 |  |
|-----------------------------------|---|--|------------------------|-----------------------|---|-----------------|--|
| <u>Course NO</u><br>2018000000041 | <u>Title</u><br>Patrol Rifle July 26-31 | <u>Type</u><br>State Sponsored<br>Certifications | <u>Credits</u><br>0.00 | <u>Hours</u><br>32.00 | <u>Prerequisites</u><br><u>Course 1</u> | <u>Course 2</u> | <u>Comments</u><br>Inv Amerosa Lead Instructor |
|-----------------------------------|---|--|------------------------|-----------------------|---|-----------------|--|

## Course Schedule

### Schedule

|                 |  |  |                |                        |
|-----------------|--|--|----------------|------------------------|
| <u>Class ID</u> | <u>Start Date/Time</u><br>07/26/2018 08:00 | <u>End Date/Time</u><br>07/31/2018 16:00 | <u>Company</u> | <u>Course Location</u> |
|-----------------|--|--|----------------|------------------------|

### Instructor

|                     |                        |                  |              |
|---------------------|------------------------|------------------|--------------|
| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|

## Course Information

|                                   |   |  |                        |                       |   |                 |                 |
|-----------------------------------|---|--|------------------------|-----------------------|---|-----------------|-----------------|
| <u>Course NO</u><br>2018000000026 | <u>Title</u><br>Public Order Basic S hool | <u>Type</u><br>Other Outside agency<br>sponsored | <u>Credits</u><br>0.00 | <u>Hours</u><br>40.00 | <u>Prerequisites</u><br><u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|-----------------------------------|---|--|------------------------|-----------------------|---|-----------------|-----------------|

## Course Schedule

### Schedule

|                 |  |  |                |                        |
|-----------------|--|--|----------------|------------------------|
| <u>Class ID</u> | <u>Start Date/Time</u><br>04/30/2018 08:00 | <u>End Date/Time</u><br>05/04/2018 16:00 | <u>Company</u> | <u>Course Location</u> |
|-----------------|--|--|----------------|------------------------|

### Instructor

|                     |                        |                  |              |
|---------------------|------------------------|------------------|--------------|
| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u> | <u>Type</u> | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|--------------|-------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2016000000050    | Riot Control | In Service  | 0.00           | 0.00         |                 |                 |                 |

## Course Schedule

| <u>Schedule</u> | <u>Class ID</u>     | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|---------------------|------------------------|----------------------|----------------|------------------------|
|                 | Riot Control/ Civil | 05/05/2016 08:00       | 05/05/2016 16:00     |                | ---                    |

| <u>Instructor</u> | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|-------------------|---------------------|------------------------|------------------|--------------|
|-------------------|---------------------|------------------------|------------------|--------------|

## Course Information

| <u>Course NO</u> | <u>Title</u>           | <u>Type</u>                    | <u>Credits</u> | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> | <u>Comments</u> |
|------------------|------------------------|--------------------------------|----------------|--------------|-----------------|-----------------|-----------------|
| 2018000000047    | ROHVA on-line training | Other Outside agency sponsored | 0.00           | 2.00         |                 |                 |                 |

## Course Schedule

| <u>Schedule</u> | <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|-----------------|------------------------|----------------------|----------------|------------------------|
|                 |                 | 08/20/2018 08:00       | 08/20/2018 10:00     |                | ---                    |

| <u>Instructor</u> | <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|-------------------|---------------------|------------------------|------------------|--------------|
|-------------------|---------------------|------------------------|------------------|--------------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| Course NO    | Title           | Type       | Prerequisites |       |          |          |
|--------------|-----------------|------------|---------------|-------|----------|----------|
|              |                 |            | Credits       | Hours | Course 1 | Course 2 |
| 202000000023 | TASER inservice | In Service | 0.00          | 4.00  |          |          |

## Course Schedule

### Schedule

| Class ID | Start Date/Time  | End Date/Time    | Company | Course Location |
|----------|------------------|------------------|---------|-----------------|
|          | 04/03/2020 08:00 | 04/03/2020 12:00 |         |                 |
|          | 04/06/2020 08:00 | 04/06/2020 12:00 |         |                 |
|          | 04/07/2020 08:00 | 04/07/2020 12:00 |         |                 |
|          | 04/14/2020 08:00 | 04/14/2020 12:00 |         |                 |
|          | 04/15/2020 08:00 | 04/15/2020 12:00 |         |                 |
|          | 04/16/2020 08:00 | 04/16/2020 12:00 |         |                 |
|          | 04/20/2020 08:00 | 04/20/2020 12:00 |         |                 |
|          | 04/23/2020 08:00 | 04/23/2020 12:00 |         |                 |
|          | 04/24/2020 08:00 | 04/24/2020 12:00 |         |                 |
|          | 04/28/2020 08:00 | 04/28/2020 12:00 |         |                 |
|          | 04/30/2020 08:00 | 04/30/2020 12:00 |         |                 |

### Instructor

| Reserve Date | Course Category | Serial ID | Notes |
|--------------|-----------------|-----------|-------|
|--------------|-----------------|-----------|-------|

# Training Course Summary

Print Date: October 01, 2020

## Course Information

| <u>Course NO</u> | <u>Title</u>       | <u>Type</u> | <u>Prerequisites</u> |              |                 |                 |
|------------------|--------------------|-------------|----------------------|--------------|-----------------|-----------------|
|                  |                    |             | <u>Credits</u>       | <u>Hours</u> | <u>Course 1</u> | <u>Course 2</u> |
| 2018000000068    | UTV Group training | In Service  | 0.00                 | 8.00         |                 |                 |

## Course Schedule

### Schedule

| <u>Class ID</u> | <u>Start Date/Time</u> | <u>End Date/Time</u> | <u>Company</u> | <u>Course Location</u> |
|-----------------|------------------------|----------------------|----------------|------------------------|
|                 | 11/12/2018 08:00       | 11/12/2018 16:00     |                |                        |
|                 | 11/20/2018 08:00       | 11/20/2018 16:00     |                |                        |

### Instructor

| <u>Reserve Date</u> | <u>Course Category</u> | <u>Serial ID</u> | <u>Notes</u> |
|---------------------|------------------------|------------------|--------------|
|---------------------|------------------------|------------------|--------------|

**Utica Police Department**

Professional Standards

Officer Disciplinary History

Police Officer Michael J Tartaglia III . [8366/2015000000028]

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Part I - Personal Information

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Name: Police Officer Michael J Tartaglia III .  
: 2015000000028 Badge No: 8366 Hire Dt: 09/07/2015

Department: Patrol Division  
Bureau: Uniformed Patrol  
Division: Uniformed Patrol

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Part II - Discipline History

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**EF2017-0084 Case #: RMS 17-38208 Internal/Department**

UPD Policy and Procedure Violation: Nov 10, 2017: Letter of Reprimand - [Action/discipline completed]

Issued by Capt. D. Cinque

Policy and Procedure Violation 08/25/2017 [UPD Policy] - Detention Operations Nov 10, 2017

**2018-0001 Case #: RMS 17-12206 External/Citizen**

General Rule Violation: Feb 6, 2018: Counseling Memorandum - [Action/discipline completed]

Issued Verbal by Sgt. Wooden

General Rule Violation 03/23/2017 [General Rule Violation] - Performance Feb 6, 2018

**EF2019-0018 Case #: RMS 19-15580 Internal/Department**

Aug 27, 2019: Command Discipline Days/hrs suspended: 1

**MVA2019-0009 Case #: RMS 19-32082 Vehicle accident**

UPD Policy and Procedure Violation: Nov 8, 2019: Letter of Reprimand - [Action/discipline completed]

Printed: Oct 01, 2020 08:41 By: [REDACTED]

Concise Officer History

Police Officer Michael J Tartaglia III . [8366/2015000000028]

: 2015000000028 Hire date: Sep 07, 2015  
Current assignment(s):  
Department: Patrol Division  
Bureau: Uniformed Patrol  
Division: Uniformed Patrol

Involved Officer: Use of force  
Received: Sep 21, 2017 00:22

IA No: UOF2017-0128

Case No: RMS 17-42356

Incident disposition/finding: Within Policy  
Role: Arresting  
Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Empty Hand Control    | Limited                 |
| Presence of Authority | NOT effective           |
| Verbal Commands       | NOT effective           |

Service being conducted: Arrest

Involved Officer: E-File  
Received: Nov 06, 2017 06:23

IA No: EF2017-0079

Incident disposition/finding: Administratively Closed  
Role: Received compliment  
Policy outcome: Not yet entered

Involved Officer: Internal/Department  
Received: Nov 14, 2017 11:00

IA No: EF2017-0084

Case No: RMS 17-38208

Incident disposition/finding: Sustained  
Policy outcome: Not yet entered

Allegations:

Detention Facility (Lockup) Oeraions 11.28 -  
Detention Facility (Lockup) Operations 11.28 - Chapter 4 Article 11 Arrest,  
Transport, Booking - Sustained - Nov 10, 2017

Actions taken:

UPD Policy and Procedure Violation: Nov 10, 2017 - Letter of Reprimand

Issued by Capt. D. Cinque

Charges:

Policy and Procedure Violation 08/25/2017 [UPD Policy] - Detention  
Operations Nov 10, 2017

Hearings:

Nov 10, 2017 Field Level Counseling

Status: Closed

Involved Officer: Firearm discharge  
FD2017-13

IA No:

Received: Dec 07, 2017 22:05

Case No:

17-53772

Incident disposition/finding: Within Policy  
Role: Animal Dispatch  
Policy outcome: Not yet entered

Involved Officer: External/Citizen  
2018-0001  
RMS 17-12206  
IA No:  
Received: Jan 30, 2018 05:34  
Case No:

Incident disposition/finding: Sustained  
Policy outcome: Not yet entered

Allegations:

Attention to duty - Chapter 8 Article 1 Performance and  
attention to duty - Sustained - Feb 06, 2018

Actions taken:

General Rule Violation: Feb 06, 2018 - Counseling Memorandum  
Issued Verbal by Sgt. Wooden

Charges:

General Rule Violation 03/23/2017 [General Rule Violation] -  
Performance Feb 06, 2018

Hearings:

Jan 30, 2018 Field Level Counseling  
Status: Closed

Involved Officer: Use of force  
UOF2018-0014  
RMS 18-5651  
IA No:  
Received: Feb 11, 2018 20:09  
Case No:

Incident disposition/finding: Within Policy  
Role: Arresting  
Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Empty Hand Control    | Limited                 |
| Take Down             | Effective               |
| Verbal Commands       | NOT effective           |
| Presence of Authority | NOT effective           |

Service being conducted: Dispatched Assignment

Involved Officer: Use of force  
UOF2018-0073  
RMS 18-24145  
IA No:  
Received: Jun 16, 2018 12:58  
Case No:

Incident disposition/finding: Within Policy  
Policy outcome: Not yet entered

|                    |                         |
|--------------------|-------------------------|
| Use(s) of force    | Effective/Not Effective |
| Empty Hand Control | Effective               |

Service being conducted: Arrest

Involved Officer: Use of force  
UOF2018-0082  
IA No:  
Received: Jun 27, 2018 19:54

RMS 18-26105

Case No:

Incident disposition/finding: Within Policy  
 Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Empty Hand Control    | Effective               |
| Presence of Authority | NOT effective           |
| Verbal Commands       | NOT effective           |

Service being conducted: Arrest

Involved Officer: Use of force  
 UOF2019-0029

IA No:

Received: Feb 17, 2019 15:53

Case No:

RMS 19-5700

Incident disposition/finding: Within Policy  
 Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Verbal Commands       | NOT effective           |
| Presence of Authority | NOT effective           |
| Empty Hand Control    | Effective               |

Service being conducted: Arrest

Involved Officer: Internal/Department  
 EF2019-0018

IA No:

Received: May 06, 2019 10:32

Case No:

RMS 19-15580

Incident disposition/finding: Sustained  
 Policy outcome: Not yet entered

Actions taken:

: Aug 27, 2019 - Command Discipline Days/hrs suspended: 1

Involved Officer: Vehicle accident  
 MVA2019-0009

IA No:

Received: Aug 21, 2019 13:33

Case No:

RMS 19-32082

Incident disposition/finding: Sustained  
 Policy outcome: Not yet entered

Actions taken:

UPD Policy and Procedure Violation: Nov 08, 2019 - Letter of  
 Reprimand

Involved Officer: Use of force  
 UOF2020-0001

IA No:

Received: Dec 31, 2019 16:37

Case No:

RMS 19-49049

Incident disposition/finding: Within Policy  
 Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Verbal Commands       | NOT effective           |
| Presence of Authority | NOT effective           |
| Empty Hand Control    | Effective               |

Service being conducted: Arrest

Involved Officer: Use of force  
UOF2020-0024

IA No:

Received: Feb 24, 2020 16:46

Case No:

RMS 20-6399

Incident disposition/finding: Within Policy  
Role: Arresting Officer  
Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Empty Hand Control    | Effective               |
| Verbal Commands       | NOT effective           |
| Presence of Authority | NOT effective           |

Service being conducted: Arrest

Involved Officer: Use of force  
UOF2020-0118

IA No:

Received: Aug 03, 2020 13:45

Case No:

RMS 20-28762

Incident disposition/finding: Within Policy  
Role: Assisting Officer  
Policy outcome: Not yet entered

|                       |                         |
|-----------------------|-------------------------|
| Use(s) of force       | Effective/Not Effective |
| Verbal Commands       | NOT effective           |
| Presence of Authority | NOT effective           |
| Taser Announcement    | Effective               |
| Come Along            | Limited                 |

Service being conducted: MHL 9:41 ARREST

Report summary: totals by incident type:

| Incident type              | Received |
|----------------------------|----------|
| Anonymous                  | 0        |
| Background Investigation   | 0        |
| Department Discipline      | 0        |
| Discretionary arrest       | 0        |
| Drug test                  | 0        |
| E-File                     | 1        |
| External/Citizen           | 1        |
| Firearm discharge          | 1        |
| Foil Request               | 0        |
| Forced entry               | 0        |
| Generic incident           | 0        |
| Integrity test             | 0        |
| Internal/Department        | 2        |
| K9 Utilization             | 0        |
| Notice of Claim            | 0        |
| Personnel Complaints       | 0        |
| Show of force              | 0        |
| Stop                       | 0        |
| UPD Damaged Prop Car/Equip | 0        |
| Use of force               | 8        |
| Vehicle accident           | 1        |
| Vehicle pursuit            | 0        |
| Total                      | 14       |

Printed: Oct 01, 2020 08:41 By: [REDACTED] re

# Department of Public Safety

## BUREAU OF POLICE

413 Oriskany Street West, Utica New York 13502

Date: October 16<sup>th</sup> 2019

**Subject:** Motor Vehicle Accident involving car 52 (PO Michael Tartaglia)

**To:** Chief of Police  
Mark W. Williams

**Summary:**

On October 16<sup>th</sup> 2019, I reviewed an investigation completed by Sgt. Starr Rae Wooden in relation to a motor vehicle accident involving car 52 on Washington St. near Westminster Presbyterian Church.

**Investigation:**

On August 21<sup>st</sup> 2019 at around 1215hrs, PO Michael Tartaglia (car 52) was dispatched to [REDACTED] for an argument. Upon arrival, Tartaglia attempted to make a U-turn and park his vehicle on the west side of the street. While he was pulling into the spot, Tartaglia collided with a blue 1998 Chevy Express van, which was parked (unoccupied) on the same side of the street, in front of Westminster Presbyterian Church. Car 52 suffered minor damage to the right rear door, quarter panel and tire. The van suffered minor damage to the left front bumper. An accident report was completed by PO Titus Ciccone and photographs were secured of the damage to both vehicles. Tartaglia's BWC footage was also reviewed and tagged.

**Findings:**

Based upon my review of Sgt. Wooden's report, the BWC footage and the photographic evidence, I concur with her findings that Tartaglia was in violation of the following section(s) of our procedural manual, as a result of being involved in the collision:

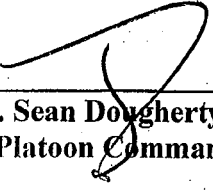
Chapter Eight, Article One, Professional Standards of Conduct and Ethics

**1.14 PERFORMANCE AND ATTENTION TO DUTY:**

**EE. Departmental Vehicles/Operation/Care/ Personal Use/MV Accident/Reporting;**

**2. Employees shall operate departmental vehicles in a careful and prudent manner, and shall obey all laws and departmental directives pertaining to such operation.**

**\*Based upon my review of Tartaglia's disciplinary history and the damage sustained to both vehicles, I recommend that he receives a letter of reprimand for his transgression.**



**Lt. Sean Dougherty #2553**  
**B Platoon Commander**

UTICA POLICE DEPARTMENT

# Officer Involved Motor Vehicle Collision

---

Officer M. Tartaglia

Sergeant Starr Rae Wooden

10/16/19

Supervisor's Officer Involved Motor Vehicle Collision Review.

Subject: Officer Tartaglia.



## *Sergeant's Office Memorandum*



To: Lieutenant Sean Dougherty

From: Sergeant Starr Rae Wooden

RE: Officer Involved Motor Vehicle Collision w/ another  
motor vehicle involving Car 52 - Officer M. Tartaglia - RMS  
#19-32082

- Email Notification
- Preliminary Repair Estimate
- Officer Narrative
- MV104a
- Fact Finding Investigation Narrative

# DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 ORISKANY STREET WEST

UTICA, NEW YORK 13502

Date: 10/16/19

**Subject:** Investigation Re: Officer Involved Motor Vehicle Collision w/ another motor vehicle involving Car 52 - Officer M. Tartaglia - RMS #19-32082

**To:** Chief of Police: Mark Williams

### Summary:

On Wednesday August 21<sup>st</sup>, 2019 I, Sgt. S. Wooden, reported to the Utica Police department in full uniform attire and was assigned as the Street Supervisor utilizing Car 40/BWC 40 for the 0745-1600 hours tour of duty.

While on routine patrol, at approximately 1235 hours I was notified by PO Ciccone that PO Tartaglia, operating Car 52, had been involved in a minor motor vehicle collision with a parked car. PO Ciccone advised me that PO Tartaglia sideswiped a parked vehicle as he attempted to enter into a parking spot while responding to a dispute in progress call. PO Ciccone further advised me that Car 52 sustained damage to the rear right door, rear right quarter panel and the rear right tire hub, and the parked vehicle sustained minor scrapes to the front left bumper.

Once all the information pertaining to the collision was collected, the scene was documented, and the accident information exchange form was provided to the owner of vehicle #2 the following fact finding information was initiated.

---

### Investigative Facts:

On Wednesday August 21, 2019 I responded to [REDACTED] regarding the officer involved motor vehicle collision involving PO Tartaglia and the following fact finding investigation was completed:

- 
- I spoke with PO Tartaglia who advised me that at approximately 1215 hours he was responding to a [REDACTED] for a dispute in progress call when he made a left hand turn onto Washington Street to proceed northbound. PO Tartaglia stated that

as he turned onto Washington St he observed two uninvolved vehicles behind him. PO Tartaglia stated he did not observe any legal spots to park on the east side of the street, but he did observe a spot on the west side of the roadway, just south of Westminster Presbyterian Church (714 Washington Street), so he proceeded to make a U-turn in order to proceed southbound and park in that vacant space. PO Tartaglia stated that after he conducted the U-turn he pulled to the right of the road to allow traffic that was going northbound, and then he began to enter into the empty parking spot. PO Tartaglia stated that as he proceeded to drive southbound into the empty parking spot that was when the right rear of his patrol vehicle (Car 52) struck a parked blue and green 1998 Chevy Express (bearing NY REG [REDACTED]), which was parked on the western side of the street and facing southbound. PO Tartaglia stated that the vehicle was directly in front of 714 Washington Street and parked in a clearly posted no parking zone. PO Tartaglia stated that when he examined both vehicles he saw that there was a scrape, dent, and paint exchange to the rear right door, quarter panel, and wheel hub. PO Tartaglia stated that he examined the damage to the parked vehicle and observed that the front left bumper sustained a small scrape, and the bumper was knocked slightly out of place. PO Tartaglia further stated that due to the nature of the call he was responding to, and the fact that he was the first officer on scene, he responded to the call and resolved it prior to notifying the supervisor.

- PO Tartaglia did not report any injuries as a result of the collision.
  - I observed the damage to Car 52, which was consistent to PO Tartaglia's account of what occurred. I also examined the parked vehicle, which was now parked on the east side of the road, and saw that the front left bumper had a small scrape and the bumper was tilted. The severity of the scrape, dent, and paint exchange on both vehicles indicated that there was not much force (slow speed) between the two vehicles to create that damage profile.
  - I spoke with the owner of the parked vehicle (V#2), [REDACTED] who advised me that at the time of the accident his vehicle was parked in front of 714 Washington St and unoccupied. [REDACTED] stated that the damage to his van was very minor and he did not want anything done. [REDACTED] was advised that since a police vehicle was involved a motor vehicle accident report would be completed. [REDACTED] further stated that he had no complaints regarding the incident.
  - PO Ciccone secured photographs of the two vehicles and the damage sustained by both. PO Ciccone also completed an MV104a.
  - PO Tartaglia was advised to complete an Officer Narrative regarding the incident.
  - I completed an area check to see if there were any exterior video camera systems that might have captured the collision. No cameras were located.
  - The Duty Commander was notified regarding the accident. The officer involved motor vehicle accident notification was emailed to the Division Commander, Logistics and Resource Unit, and Professional Standards Unit.
  - PO Tartaglia was advised to take Car 52 to the Fleet Maintenance Garage and have the mechanics assess the damage. Car 52 was taken to Don's Ford for an assessment by PO Tartaglia and once the assessment was completed Fleet Maintenance approved for the vehicle to stay in service.
-

- On 8/21/19 Sgt. Hagen provided me with a preliminary repair estimate for the damage to Car 52 in the amount of \$1,478.11.
  - I reviewed PO Tartaglia's Body Worn Camera, which was activated at the time of collision. The video footage shows PO Tartaglia maneuvering the vehicle, then there is a "thud" sound, and the patrol vehicle appears to collide with an unknown object (parked vehicle #2) causing the patrol vehicle to rock.
- 

### **Investigative Findings:**

After reviewing the collision incident and all of the pertinent information/facts pertaining to such, I find that the main contributing factor for the collision was that PO Tartaglia misjudged the space between his patrol vehicle and the parked vehicle, thus passing the vehicle unsafely, and striking the same. A second contributing factor was that vehicle #2 (the parked vehicle) was parked in a clearly marked "No Parking" zone. I also find that PO Tartaglia was in violation of the following UPD Policy and Procedures pertaining to the operation of police vehicles:

#### **Chapter 4, Article 1: Patrol Operations**

##### **1.14 CARE OF EQUIPMENT:**

- A. Officers assigned a departmental vehicle shall abide by all policies, procedures, and rules relating to the care, inspection, and maintenance of such vehicle.

#### **Chapter 8, Article 1: Professional Standards of Conduct and Ethics**

##### **1.14 PERFORMANCE AND ATTENTION TO DUTY:**

###### **A. General Duties;**

- 2. Employees shall perform their duties in a competent manner.

###### **EE. Departmental Vehicles/Operation/Care/ Personal Use/MV Accident/Reporting;**

- 2. Employees shall operate departmental vehicles in a careful and prudent manner, and shall obey all laws and departmental directives pertaining to such operation.

##### **1.17 GENERAL RULES OF CONDUCT:**

###### **P. Departmental Property and Equipment;**

- 1. Employees shall be held responsible for the proper care and use of departmental property and equipment assigned to or used by them. When obtaining any equipment, and again upon its return, it is the employee's responsibility to inspect it. Employees shall utilize departmental equipment only for its intended purpose.

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**Recommendations:**

N/A

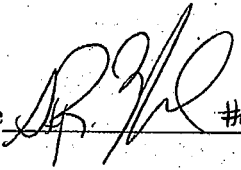
---

**Ancillary Issues:**

N/A

Respectively Submitted,

Sgt. Starr Rae Wooden #8978  
Assignment: B-2

Name  #8978

Rank Sergeant

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

09/25/2019

**INTRA-AGENCY MEMORANDUM****SUBJECT:** Officer Involved MVA PD**TO:** Chief of Police: Mark W. Williams

On Wednesday, August 21, 2019, I, PO Michael J Tartaglia III, reported for duty to the Uniform Patrol Division of the Utica Police Department for the 0800-1600 hour shift. I was assigned to Car/ Zone 52, BWC 8366, per the acting platoon commander, Sgt Berger.

At approximately 1215 hours I responded to [REDACTED] for a dispute. It was reported that two males were arguing and that it was in progress. See the related RMS for further.

While en route to the call I was going northbound on Genesee Street and approaching Washington Street on my left. I made my left hand turn onto Washington Street and proceeded northbound. During this time there were two uninvolved vehicles being operated by pedestrians behind me. There was no spot to legally park on the eastern side of Washington Street and I observed an open spot on the western side of Washington Street, just south of Westminster Presbyterian Church, 714 Washington Street. I pulled ahead of the spot and conducted a U-turn to go southbound on Washington Street. After conducting my U-turn I was facing southbound on Washington Street and began to pull to the right to allow more room for the traffic that was going northbound. I began to pull into the empty parking spot when I struck a parked vehicle. The vehicle, a blue and green 1998 Chevy Express bearing NY reg [REDACTED], was parked on the western side of the street and facing southbound. The vehicle was directly in front of 714 Washington Street and parked in a posted no parking zone which clearly stated for vehicles not to park there to not block the church entrance/ exit. I had struck the rear passenger side door of my vehicle on the driver side corner of the front bumper. This caused a scrape, dent and paint exchange along the rear passenger side door and dent to the rear passenger wheel hub cap. The damage to the parked vehicle was a small scrape and the bumper being knocked slightly out of place. Due to the nature of the call I was responding to and being the first officer on scene I responded to the call and resolved it.

After resolving the original call, Sgt Wooden was advised regarding this incident. The owner of the vehicle, [REDACTED], was located and informed on the accident. Car 51, PO Ciccone, responded and completed the necessary paperwork and secured photos. See his narrative for further. I then responded to the UPD garage and was instructed to go to Don's Ford to secure and estimate for cost of repairs. A cost of the repairs was then sent to the UPD garage by Don's Ford staff.

Respectfully,

PO Michael J Tartaglia III, #8366

1-2

NAME: PO Michael J Tartaglia III #8366RANK: PATROLMAN

## POLICE ACCIDENT REPORT

MV-104A (6/04)

Local Codes  
19-32082  
J0PC519WJGQN☐ AMENDED REPORT

|   |  |                          |  |                        |  |  |   |  |  |          |                     |                       |                    |                    |
|---|--|--------------------------|--|------------------------|--|--|---|--|--|----------|---------------------|-----------------------|--------------------|--------------------|
| 1 | Accident Date<br>Month 8 Day 21 Year 2019  | Day of Week<br>Wednesday | Military Time<br>12:15                 | No. of Vehicles<br>2   | No. Injured<br>0   | No. Killed<br>0  | Not Investigated at Scene<br><input type="checkbox"/> | Left Scene<br><input type="checkbox"/> | Police Photos<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   | 20       |                     |                       |                    |                    |
|   | VEHICLE 1  |                          |  |                        | <input checked="" type="checkbox"/> VEHICLE 2 <input type="checkbox"/> BICYCLIST <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> OTHER PEDESTRIAN   |  |   |  |  |          | 60                  |                       |                    |                    |
| 2 | VEHICLE 1- Driver License ID Number [REDACTED] State of Lic. [REDACTED]  |                          |  |                        | VEHICLE 2- Driver License ID Number [REDACTED] State of Lic. [REDACTED]  |  |   |  |  |          | 21                  |                       |                    |                    |
|   | Driver Name - exactly as printed on license TARTAGLIA, M J   |                          |  |                        | Driver Name - exactly as printed on license [REDACTED]   |  |   |  |  |          |                     |                       |                    |                    |
|   | Address (Include Number and Street)<br>413 ORISKANY ST W   |                          |  |                        | Apt. No.   | Address (Include Number and Street)                              |   |  |  | Apt. No. | 22                  |                       |                    |                    |
| 3 | City or Town<br>UTICA  |                          |  |                        | State<br>NY  | Zip Code<br>135020000  |   |  |  |          | 17                  |                       |                    |                    |
| 1 | Date of Birth<br>Month [REDACTED] Day [REDACTED] Year [REDACTED]   | Sex<br>M                 | Unlicensed<br><input type="checkbox"/> | No. of Occupants<br>01 | Public Property Damaged<br><input type="checkbox"/>  |  |   |  |  |          | 23                  |                       |                    |                    |
|   | Name - exactly as printed on registration  |                          |  |                        | Sex<br>C   | Date of Birth<br>Month [REDACTED] Day [REDACTED] Year [REDACTED] |   |  |  |          | 5                   |                       |                    |                    |
| 4 | UTICA, CITY OF   |                          |  |                        | Apt. No.   | Address (Include Number and Street)                              |   |  |  | Apt. No. | 24                  |                       |                    |                    |
| 1 | Address (Include Number and Street)<br>413 ORISKANY ST W   |                          |  |                        | Haz. Mat. Code<br>-  | Released<br><input type="checkbox"/>                             |   |  |  |          | 5                   |                       |                    |                    |
| 6 | City or Town<br>UTICA  |                          |  |                        | State<br>NY  | Zip Code<br>13502  |   |  |  |          | 25                  |                       |                    |                    |
|   | Plate Number<br>UNIT52   | State of Reg.<br>NY      | Vehicle Year & Make<br>2017 FORD       | Vehicle Type<br>4DSD   | Ins. Code<br>238   |  |   |  |  |          | 9                   |                       |                    |                    |
|   | Ticket/Arrest Number(s)  |                          |  |                        | Ticket/Arrest Number(s)  |  |   |  |  |          |                     |                       |                    |                    |
| 6 | Violation Section(s)<br>2  |                          |  |                        | Violation Section(s)   |  |   |  |  |          |                     |                       |                    |                    |
| 7 | Check if involved vehicle is:<br><input type="checkbox"/> more than 95 inches wide;<br><input type="checkbox"/> more than 34 feet long;<br><input type="checkbox"/> operated with an overweight permit;<br><input type="checkbox"/> operated with an overdimension permit.   |                          |  |                        | Check if involved vehicle is:<br><input type="checkbox"/> more than 95 inches wide;<br><input type="checkbox"/> more than 34 feet long;<br><input type="checkbox"/> operated with an overweight permit;<br><input type="checkbox"/> operated with an overdimension permit. |  |   |  | Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.   |          | 26                  |                       |                    |                    |
| 3 | VEHICLE 1 DAMAGE CODES<br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more damage codes  |                          |  |                        | VEHICLE 2 DAMAGE CODES<br>Box 1 - Point of Impact<br>Box 2 - Most Damage<br>Enter up to three more damage codes  |  |   |  | ACCIDENT DIAGRAM<br>See the last page of the MV-104A for the accident diagram.   |          | 10                  |                       |                    |                    |
|   | Vehicle By:<br>Towed To:   |                          |  |                        | Vehicle By:<br>Towed To:   |  |   |  | 9.<br>Cost of repairs to any one vehicle will be more than \$1000.<br><input checked="" type="checkbox"/> Unknown/Unable to determine <input type="checkbox"/> Yes <input type="checkbox"/> No   |          | 27                  |                       |                    |                    |
|   | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER  |                          |  |                        |  |  |   |  |  |          | 1                   |                       |                    |                    |
|   | Reference Marker   |                          |  |                        | Coordinates (if available)<br>Latitude/Northing  |  |   |  | Place Where Accident Occurred:<br>County ONEIDA <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of UTICA   |          | 28                  |                       |                    |                    |
|   |  |                          |  |                        | Longitude/Easting  |  |   |  | Road on which accident occurred<br>at 1) Intersecting street<br>or 2) 200 feet miles <input checked="" type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of GENESEE ST (Milepost, Nearest Intersecting Route Number or Street Name) |          | 29                  |                       |                    |                    |
|   | Accident Description/Officer's notes<br>OPERATOR/POLICE OFFICER MICHAEL TARTAGLIA (DOB [REDACTED] OF VEHICLE 1, UPD CAR 52, 2017 FORD TAURUS STATES THAT HE WAS RESPONDING TO [REDACTED] REGARDING AN IN PROGRESS CALL FOR SERVICE. TARTAGLIA STATES THAT WHEN HE ARRIVED TO 726 WASHINGTON ST, HE PULLED INTO A PARKING SPOT ON THE WEST SIDE OF WASHINGTON ST. TARTAGLIA STATES THAT HE CUT THE TURN TO MUCH WHILE PARKING AND SIDE SWIPED THE FRONT LEFT OF A PARKED VEHICLE (VEHICLE 2) WITH |                          |  |                        |  |  |   |  |  |          | 30                  |                       |                    |                    |
|   | 8  | 9                        | 10                                     | 11                     | 12   | 13   | 14  | 15                                     | 16   | 17 BY    | TO 18               | Names of all involved | Date of Death Only |                    |
| A | 1  | 1                        | 1                                      | 1                      | 29   | M  | -   | -                                      | -  |          |                     | TARTAGLIA, M J        |                    |                    |
| B | 2  | 1                        | -                                      | 7                      | 87   | M  | -   | -                                      | -  |          |                     | CORDERO, SANTIAGO G   |                    |                    |
| C |  |                          |  |                        |  |  |   |  |  |          |                     |                       |                    |                    |
| D |  |                          |  |                        |  |  |   |  |  |          |                     |                       |                    |                    |
| E |  |                          |  |                        |  |  |   |  |  |          |                     |                       |                    |                    |
| F |  |                          |  |                        |  |  |   |  |  |          |                     |                       |                    |                    |
|   | Officer's Rank and Signature<br>POLICE PO [Signature]  |                          |  |                        | Badge/ID No.<br>[REDACTED]   |  | NCIC No.<br>03202                                     |  | Precinct/Post Troop/Zone   |          | Station/Beat Sector |                       | Reviewing Officer  | Date/Time Reviewed |
|   | Print Name In Full<br>TITUS CICCONI  |                          |  |                        |  |  |   |  |  |          |                     |                       |                    |                    |

|              |
|--------------|
| Local Codes  |
| 19-32082     |
| J0PC519WJGQN |

# POLICE ACCIDENT REPORT

MV-104A (6/04)

AMENDED REPORT

|    |  |   |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  |    |  |
|----|--|---|--|--------------------------|--|------------------------|--|----------------------|--|------------------|--|----------------------------------|--|---|--|--|--|--|--|----|--|
| 1  |  | Accident Date<br>Month 8 Day 21 Year 2019   |  | Day of Week<br>Wednesday |  | Military Time<br>12:15 |  | No. of Vehicles<br>2 |  | No. Injured<br>0 |  | No. Killed<br>0                  |  | Not Investigated at Scene<br><input type="checkbox"/> |  | Left Scene<br><input type="checkbox"/> |  | Police Photos<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | 20 |  |
| 2  |  | VEHICLE   |  |                          |  |                        |  |                      |  |                  |  | <input type="checkbox"/> VEHICLE |  | <input type="checkbox"/> BICYCLIST                    |  | <input type="checkbox"/> PEDESTRIAN    |  | <input type="checkbox"/> OTHER PEDESTRIAN  |  | 21 |  |
| 3  |  |   |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 22 |  |
| 4  |  |   |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 23 |  |
| 5  |  |   |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 24 |  |
| 6  |  |   |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 25 |  |
| 7  |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 26 |  |
| 8  |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 27 |  |
| 9  |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 28 |  |
| 10 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 29 |  |
| 11 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 30 |  |
| 12 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 31 |  |
| 13 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 32 |  |
| 14 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 33 |  |
| 15 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 34 |  |
| 16 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 35 |  |
| 17 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 36 |  |
| 18 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 37 |  |
| 19 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 38 |  |
| 20 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 39 |  |
| 21 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 40 |  |
| 22 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 41 |  |
| 23 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 42 |  |
| 24 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 43 |  |
| 25 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 44 |  |
| 26 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 45 |  |
| 27 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 46 |  |
| 28 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 47 |  |
| 29 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 48 |  |
| 30 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 49 |  |
| 31 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 50 |  |
| 32 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 51 |  |
| 33 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 52 |  |
| 34 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>16. OVERTURNED 19. OTHER |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  | 53 |  |
| 35 |  | VEHICLE DAMAGE CODING:<br>1-13 SEE DIAGRAM ON RIGHT.<br>14. UNDERCARRIAGE 17. DEMOLISHED<br>15. TRAILER 18. NO DAMAGE<br>                         |  |                          |  |                        |  |                      |  |                  |  |                                  |  |   |  |  |  |  |  |    |  |

### Local Codes

19-32082

J0PC519WJGON

☐ **AMENDED REPORT**

MV-104A (6/04)

# POLICE ACCIDENT REPORT

19-32082

POLICE ACCIDENT REPORT

J0PC519WJGQN

AMENDED REPORT

MV-104A (6/04)

|               |     |      |             |               |                 |             |            |                           |  |            |   |
|---------------|-----|------|-------------|---------------|-----------------|-------------|------------|---------------------------|--|------------|---|
| Accident Date |     |      | Day of Week | Military Time | No. of Vehicles | No. Injured | No. Killed | Not Investigated at Scene |  | Left Scene | Police Photos   |
| Month         | Day | Year |             |               |                 |             |            | Accident Reconstructed    |  |            | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 8             | 21  | 2019 | Wednesday   | 12:15         | 2               | 0           | 0          |                           |  |            |   |

VEHICLE

VEHICLE

BICYCLIST

PEDESTRIAN

OTHER PEDESTRIAN

VEHICLE DAMAGE CODING:

1-13 SEE DIAGRAM ON RIGHT.

14. UNDERCARRIAGE 17. DEMOLISHED  
15. TRAILER 18. NO DAMAGE  
16. OVERTURNED 19. OTHER

Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.

|                                      |                     |                     |                      |  |
|--------------------------------------|---------------------|---------------------|----------------------|--|
| Rear End<br>1. ← ←                   | Left Turn<br>3. ↙ ↘ | Right Angle<br>4. ↓ | Right Turn<br>5. → ↘ | Head On<br>7. → ←                        |
| Sideswipe (same direction)<br>2. ← ← | Left Turn<br>6. ↙ ↘ |                     | Right Turn<br>8. → ↘ | Sideswipe (opposite direction)<br>9. ← → |

ACCIDENT DIAGRAM

9.

Cost of repairs to any one vehicle will be more than \$1000.

☐ Unknown/Unable to determine ☐ Yes ☐ No

|                  |                            |                                 |
|------------------|----------------------------|---------------------------------|
| Reference Marker | Coordinates (if available) | Place Where Accident Occurred:  |
|                  | Latitude/Northing          | County ONEIDA                   |
|                  | Longitude/Easting          | Road on which accident occurred |
|                  |                            | at 1) intersecting street       |
|                  |                            | or 2) _____ of _____            |
|                  |                            | feet miles                      |

Accident Description/Officer's notes

VEHICLE 2 SUSTAINED MINOR COSMETIC/DENTING TO THE FRONT LEFT BUMPER. NO INJURIES WERE REPORTED. PHOTOGRAPHS WERE SECURED. THE OPERATOR OF VEHICLE 1 IS AT FAULT FOR TURNING IMPROPERLY HOWEVER VEHICLE 2 WAS PARKED ILLEGALLY WHICH IS A ANCILLARY CONTRIBUTING FACTOR TO THIS MOTOR VEHICLE ACCIDENT. THE AREA WHERE VEHICLE 2 WAS PARKED AT THE TIME OF THE COLLISION WAS CLEARLY SIGNED NO PARKING AND THE CURB IS ALSO PAINTED YELLOW. NO

8 9 10 11 12 13 14 15 16 17 BY TO 18 Names of all Involved Date of Death Only

|                              |               |              |          |                          |                     |                   |                    |
|------------------------------|---------------|--------------|----------|--------------------------|---------------------|-------------------|--------------------|
| Officer's Rank and Signature | POLICE PO     | Badge/ID No. | NCIC No. | Precinct/Post Troop/Zone | Station/Beat Sector | Reviewing Officer | Date/Time Reviewed |
| Print Name in Full           | TITUS CICCONI | 1372         | 03202    |                          |                     |                   |                    |

# POLICE ACCIDENT REPORT

MV-104A (6/04)

AMENDED REPORT

|               |     |      |             |               |                 |                                  |                                    |                                     |   |                          |   |
|---------------|-----|------|-------------|---------------|-----------------|----------------------------------|------------------------------------|-------------------------------------|---|--------------------------|---|
| Accident Date |     |      | Day of Week | Military Time | No. of Vehicles | No. Injured                      | No. Killed                         | Not Investigated at Scene           | <input type="checkbox"/>                  | Left Scene               | Police Photos   |
| Month         | Day | Year |             |               |                 |                                  |                                    | Accident Reconstructed              | <input type="checkbox"/>                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 8             | 21  | 2019 | Wednesday   | 12:15         | 2               | 0                                | 0                                  |                                     |   |                          |   |
| VEHICLE       |     |      |             |               |                 | <input type="checkbox"/> VEHICLE | <input type="checkbox"/> BICYCLIST | <input type="checkbox"/> PEDESTRIAN | <input type="checkbox"/> OTHER PEDESTRIAN |                          |   |

| 2                               |  | <input type="checkbox"/> DRIVER<br><input type="checkbox"/> PASSENGER<br><input type="checkbox"/> BICYCLIST<br><input type="checkbox"/> PEDESTRIAN<br><input type="checkbox"/> OTHER PEDESTRIAN   | 21                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
|---------------------------------|--|---|----------------------------|--|-------------------|--|--|---------------------------------|-----------------|--|------------------|-------------------------------------|----|
| 3                               |  |   | 22                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
| 4                               |  |   | 23                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
| 5                               |  |   | 24                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
| 6                               |  |   | 25                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
| 7                               | <div style="position: relative; height: 200px;"> <span style="position: absolute; left: -20px; top: 50%; transform: translateY(-50%); white-space: nowrap;">VEHICLE</span> <span style="position: absolute; right: -20px; top: 50%; transform: translateY(-50%); white-space: nowrap;">VEHICLE</span> </div>   | <p>Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td>Rear End<br/>1. </td> <td>Left Turn<br/>3. </td> <td>Right Angle<br/>4. </td> <td>Right Turn<br/>5. </td> <td>Head On<br/>7. </td> </tr> <tr> <td>Sidewipe (same direction)<br/>2. </td> <td>Left Turn<br/>6. </td> <td></td> <td>Right Turn<br/>8. </td> <td>Sidewipe (opposite direction)<br/>9. </td> </tr> </table> <p><b>ACCIDENT DIAGRAM</b></p> <p>9. _____</p> <p>Cost of repairs to any one vehicle will be more than \$1000.<br/> <input type="checkbox"/> Unknown/Unable to determine    <input type="checkbox"/> Yes    <input type="checkbox"/> No       </p> | Rear End<br>1.             | Left Turn<br>3.  | Right Angle<br>4. | Right Turn<br>5.                                       | Head On<br>7.  | Sidewipe (same direction)<br>2. | Left Turn<br>6. |  | Right Turn<br>8. | Sidewipe (opposite direction)<br>9. | 26 |
| Rear End<br>1.                  | Left Turn<br>3.  | Right Angle<br>4.   | Right Turn<br>5.           | Head On<br>7.  |                   |  |  |                                 |                 |  |                  |                                     |    |
| Sidewipe (same direction)<br>2. | Left Turn<br>6.  |   | Right Turn<br>8.           | Sidewipe (opposite direction)<br>9.  |                   |  |  |                                 |                 |  |                  |                                     |    |
|                                 | <b>VEHICLE DAMAGE CODING:</b><br>1-13 SEE DIAGRAM ON RIGHT.<br><br>14. UNDERCARRIAGE    17. DEMOLISHED<br>15. TRAILER             18. NO DAMAGE<br>16. OVERTURNED       19. OTHER  |   | 27                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
|                                 | <table border="1" style="width: 100%;"> <tr> <th>Reference Marker</th> <th>Coordinates (if available)</th> <th rowspan="2">Place Where Accident Occurred:<br/>County <u>ONEIDA</u><br/>Road on which accident occurred _____<br/>at 1) Intersecting street _____<br/>or 2) _____ feet _____ miles</th> </tr> <tr> <td></td> <td>Latitude/Northing _____<br/><br/>Longitude/Easting _____</td> </tr> </table> | Reference Marker  | Coordinates (if available) | Place Where Accident Occurred:<br>County <u>ONEIDA</u><br>Road on which accident occurred _____<br>at 1) Intersecting street _____<br>or 2) _____ feet _____ miles |                   | Latitude/Northing _____<br><br>Longitude/Easting _____ | <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town    of _____<br>_____ (Route Number or Street Name)<br>_____ (Route Number or Street Name)<br>_____ (Milepost, Nearest intersecting Route Number or Street Name) | 28                              |                 |  |                  |                                     |    |
| Reference Marker                | Coordinates (if available)   | Place Where Accident Occurred:<br>County <u>ONEIDA</u><br>Road on which accident occurred _____<br>at 1) Intersecting street _____<br>or 2) _____ feet _____ miles  |                            |  |                   |  |  |                                 |                 |  |                  |                                     |    |
|                                 | Latitude/Northing _____<br><br>Longitude/Easting _____   |   |                            |  |                   |  |  |                                 |                 |  |                  |                                     |    |
|                                 | Accident Description/Officer's notes<br>RELATIONS ISSUED.  |   | 29                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |
|                                 |  |   | 30                         |  |                   |  |  |                                 |                 |  |                  |                                     |    |

USE COVER SHEET  
**N**

**ALL INVOLVED**

| 8                            |  | 9                            |  | 10 |  | 11 |  | 12 |  | 13 |  | 14           |  | 15       |  | 16                      |  | 17 BY               |  | TO 18             |  | Names of all Involved |  | Date of Death Only |  |
|------------------------------|--|------------------------------|--|----|--|----|--|----|--|----|--|--------------|--|----------|--|-------------------------|--|---------------------|--|-------------------|--|-----------------------|--|--------------------|--|
| A                            |  |                              |  |    |  |    |  |    |  |    |  |              |  |          |  |                         |  |                     |  |                   |  |                       |  |                    |  |
| B                            |  |                              |  |    |  |    |  |    |  |    |  |              |  |          |  |                         |  |                     |  |                   |  |                       |  |                    |  |
| C                            |  |                              |  |    |  |    |  |    |  |    |  |              |  |          |  |                         |  |                     |  |                   |  |                       |  |                    |  |
| D                            |  |                              |  |    |  |    |  |    |  |    |  |              |  |          |  |                         |  |                     |  |                   |  |                       |  |                    |  |
| E                            |  |                              |  |    |  |    |  |    |  |    |  |              |  |          |  |                         |  |                     |  |                   |  |                       |  |                    |  |
| F                            |  |                              |  |    |  |    |  |    |  |    |  |              |  |          |  |                         |  |                     |  |                   |  |                       |  |                    |  |
| Officer's Rank and Signature |  | POLICE PO <i>[Signature]</i> |  |    |  |    |  |    |  |    |  | Badge/ID No. |  | NCIC No. |  | Precint/Post Troop/Zone |  | Station/Beat Sector |  | Reviewing Officer |  | Date/Time Reviewed    |  |                    |  |
| Print Name In Full           |  | TITUS CICCONI                |  |    |  |    |  |    |  |    |  | 1372         |  | 03202    |  |                         |  |                     |  |                   |  |                       |  |                    |  |

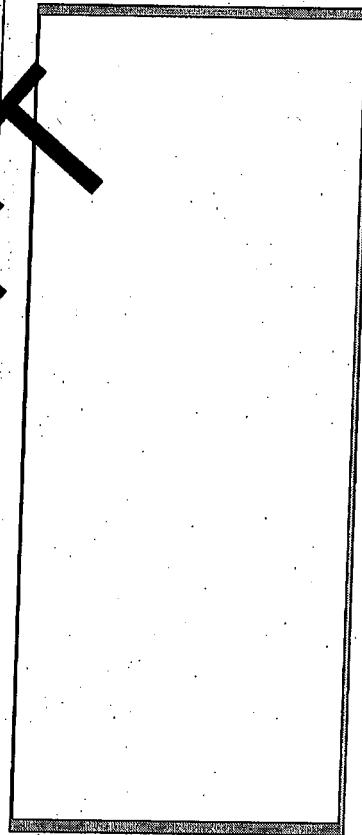
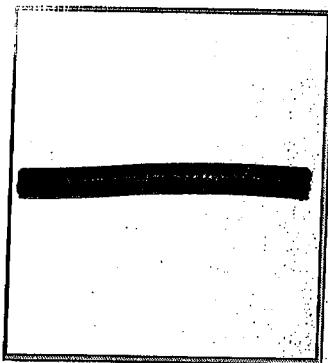
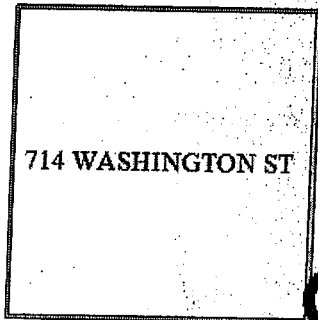
Local Codes  
19-32082  
J0PC519WJGQN

# POLICE ACCIDENT REPORT

MV-104A (6/04)

☐ AMENDED REPORT

|               |     |      |             |               |                 |             |            |                           |                                     |   |
|---------------|-----|------|-------------|---------------|-----------------|-------------|------------|---------------------------|-------------------------------------|---|
| Accident Date |     |      | Day of Week | Military Time | No. of Vehicles | No. Injured | No. Killed | Not Investigated at Scene | <input type="checkbox"/> Left Scene | Police Photos   |
| Month         | Day | Year |             |               |                 |             |            | Accident Reconstructed    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 8             | 21  | 2019 | Wednesday   | 12:15         | 2               | 0           | 0          |                           |                                     |   |



NOT TO SCALE

New York State Department of Motor Vehicles  
**REPORT OF MOTOR VEHICLE ACCIDENT**  
**POLICE LINE OF DUTY ACCIDENT**

☐ **AMENDED REPORT**

Page 1 of 1 Pages

|                                   |
|-----------------------------------|
| Precinct                          |
| Local Accident Number<br>19-32082 |
| J0PC519WJGQN                      |

**IMPORTANT:** If you are the officer in charge, complete and sign this form, and attach it to the MV-104A or MV-104AN.

|                                 |                        |        |
|---------------------------------|------------------------|--------|
| Accident Date                   | Accident Time          | County |
| 8 / 21 / 2019<br>Month Day Year | In Military Time 12:15 | ONEIDA |

**NAMES OF DRIVERS: (Please Print or Type)**

| *     | Last      | First | M.I. | State of Veh. Reg. | Plate Number | Driver License State | Driver License Number |
|-------|-----------|-------|------|--------------------|--------------|----------------------|-----------------------|
| VEH 1 | TARTAGLIA | M     |      |                    |              |                      |                       |
| VEH 2 |           |       |      |                    |              |                      |                       |
| VEH 3 |           |       |      |                    |              |                      |                       |
| VEH 4 |           |       |      |                    |              |                      |                       |
| VEH 5 |           |       |      |                    |              |                      |                       |
| VEH 6 |           |       |      |                    |              |                      |                       |

Pursuant to Section 605 of the New York State Vehicle and Traffic Law, the attached Police Accident Report is also the motorist report for vehicle number(s) 1.

\* Pursuant to Section 605(a)(4) of the Vehicle and Traffic Law, check **only** the box for each police officer operating a police vehicle (as defined by V & T Section 132-a) **during emergency operation** (as defined by V&T Section 114-b) when the accident occurred.

|      |   |                |
|------|---|----------------|
| Date | Signature of Owner of Police Vehicle/Police Agency Representative | NCIC#<br>03202 |
|------|---|----------------|

# **POLICE ACCIDENT REPORT**

|   |  |                       |  |                                 |                                 |  |   |                               |                                     |  |                           |  |
|---|--|-----------------------|--|---------------------------------|---------------------------------|--|---|-------------------------------|-------------------------------------|--|---------------------------|--|
| <b>SUMMARY</b>  | Case Number<br><b>J0PC519WJGQN</b>                                 |                       | Amended Report<br><input type="checkbox"/> |                                 | Original Case Number            |  | All information contained in this report is for Law Enforcement Purposes and Police Officer Use only. |                               |                                     |  |                           |  |
|   | Date of Accident<br><b>08/21/2019</b>                              |                       | Time of Accident<br><b>12:15</b> Hrs.      |                                 | Day of Week<br><b>Wednesday</b> |  | No. Of Vehicles<br><b>2</b>   |                               | No. Injured<br><b>0</b>             |  | Number Killed<br><b>0</b> |  |
|   | Investigated at Scene<br><b>YES</b>                                |                       | Officer Involved<br><b>YES</b>             |                                 | Involved Agency<br><b>YES</b>   |  | Accident Reconstructed<br><b>NO</b>   |                               | Reconstructed - Shield<br><b>NO</b> |  | Left Scene<br><b>NO</b>   |  |
|   | Police Photo<br><b>YES</b>   |                       | No. Witnesses<br><b>0</b>                  |                                 |                                 |  |   |                               |                                     |  |                           |  |
|   | C/T/V Name Where Accident Occurred<br><b>UTICA, CITY OF - 3302</b> |                       |  |                                 |                                 |  | County<br><b>ONEIDA</b>   |                               |                                     |  |                           |  |
|   | On Road, Street or Highway<br><b>[REDACTED]</b>                    |                       |  |                                 |                                 |  |   |                               |                                     |  |                           |  |
| X Coordinate(Longitude/Easting)                             |  |                       |  | Y Coordinate(Latitude/Northing) |                                 |  |   | Reference Marker              |                                     |  |                           |  |
| At Intersection<br><b>NO</b>                                |  | At Intersection with: |  |                                 |                                 |  |   |                               |                                     |  |                           |  |
| Distance Type<br><b>1 - FEET</b>                            |  |                       |  | Distance<br><b>200</b>          |                                 |  |   | Direction<br><b>1 - NORTH</b> |                                     |  |                           |  |
| Milepost, Nearest Intersection, Route Number or Street Name |  |                       |  |                                 |                                 |  |   |                               |                                     |  |                           |  |
| Description<br><b>GENESEE ST</b>                            |  |                       |  |                                 |                                 |  |   |                               |                                     |  |                           |  |

## **ACCIDENT ENVIRONMENT**

|   |  |  |  |
|---|--|--|--|
| Description of accident<br><b>02 - SIDESWIPE - SAME DIRECTION</b> |  | Cost of Repair to any one vehicle more than \$1,000?<br><b>UNKNOWN</b>             |  |
| Location of First Event<br><b>1 - ON ROADWAY</b>                  |  | Type of Accident - Collision With (First Event)<br><b>01 - OTHER MOTOR VEHICLE</b> |  |
| Light Conditions<br><b>1 - DAYLIGHT</b>                           |  | Road Surface Condition<br><b>2 - WET</b>   |  |
| Weather Conditions (up to two)<br><b>3 - RAIN</b>                 |  |  |  |
| Pedestrian Involved<br><b>NO</b>                                  |  | Was Pedestrian/Bicyclist/Other at the Intersection?<br><b>NOT APPLICABLE</b>       |  |
| Pedestrian/Bicyclist/Other Action<br><b>77 - NOT APPLICABLE</b>   |  |  |  |

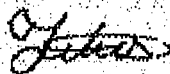
## **ROADWAY CHARACTERISTICS**

|   |  |                                     |  |
|---|--|-------------------------------------|--|
| Roadway<br><b>3 - STRAIGHT AT HILLCREST</b> |  | Traffic Control<br><b>01 - NONE</b> |  |
|---|--|-------------------------------------|--|

## **FATAL AND TRUCK/BUS**

|   |                           |  |                         |
|---|---------------------------|--|-------------------------|
| Is this a Fatal Accident?<br><b>NO</b>  |                           | CMV Vehicles/Persons<br><b>5 - NONE OF THE ABOVE</b> |                         |
| Number of Qualifying Vehicles Involved: |                           |  |                         |
| No. Towed                               | No. of Fatal Injuries     | No. Vehicles Emergency Assist.                       | No. Persons Transported |
| No. Trucks                              | No. Trucks Hazmat Placard | No. Buses  |                         |
| Roadway Surface                         |                           | No. of Lanes   | Speed Limit             |
| Roadway Flow                            |                           | Work Related   |                         |

## **INCIDENT INFORMATION**

|  |  |                                       |                             |
|--|--|---------------------------------------|-----------------------------|
| Local Codes (Incident Number)<br><b>19-32082</b>   |  |                                       |                             |
| Officer's Signature<br> |  | Officer's Last Name<br><b>CICCONE</b> |                             |
|  |  | Officer's First Name<br><b>TITUS</b>  |                             |
|  |  | MI<br><b>[REDACTED]</b>               |                             |
| NCIC/ORI<br><b>UTICA POLICE DEPARTMENT - 03202</b>   |  | Div/Troop                             | Pct/Zone                    |
| Reviewing Officer's Signature  |  | Sector/Station                        | Badge/Shield<br><b>1372</b> |
| Reviewing Officer's Name   |  | Date Reviewed                         | Time Reviewed               |

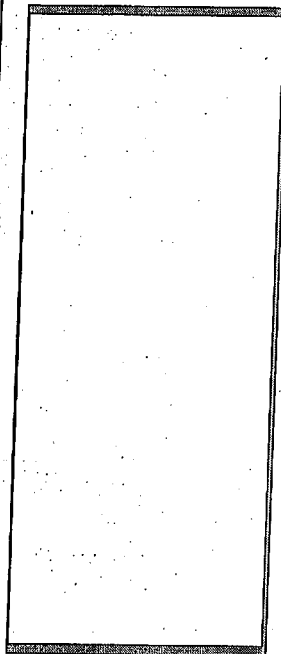
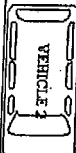
|   |   |   |  |  |
|---|---|---|--|--|
| UNIT  | Describe this Vehicle/Driver<br><b>3 - OCCUPIED BY DRIVER</b> |   | Was this a Vehicle, Bicyclist or Pedestrian?<br><b>1 - VEHICLE</b> |  |
|   | <b>DRIVER INFORMATION</b>                                     |   |  |  |
|   | Driver's Name - Last<br><b>TARTAGLIA</b>                      |   | First<br><b>M</b>  | Middle<br><b>J</b>                                       |
|   | Address<br><b>413 ORISKANY ST W</b>                           |   | City<br><b>UTICA</b>   | State<br><b>NY</b> Zip<br><b>13502-0000</b>              |
| Date of Birth   |   | Sex   | Unlicensed?  | Driver's License ID Number                               |
|   |   |   |  | License State  |
|   |   |   |  | License Class  |
|   |   |   |  | Driver Ejected   |
| Police Officer?<br><b>YES</b>   |   |   |  | Driver Injured?<br><b>NO</b>                             |
| Emergency Operation<br><b>N</b>   |   |   |  |  |
| Driver Safety Equipment Used<br><b>1 - NONE</b>                                 |   | Location of Most Severe Physical Complaint<br><b>77 - NOT APPLICABLE</b>        |  | Type of Physical Complaint<br><b>77 - NOT APPLICABLE</b> |
| Deceased  |   |   |  |  |
| Driver Physical Emotional Status<br><b>7 - NOT APPLICABLE</b>                   |   | Injured Taken by (Source of Transport)  |  | Injured Taken To (Medical Facility)                      |
|   |   |   |  |  |
| Out of State Hospital Name  |   | Other Hospital County Name  |  | State  |
|   |   |   |  | EMS Response Plate #                                     |
| Driver Date of Death  |   | Extricated  | Type of Extrication Equipment Used                                 |  |
|   |   |   |  |  |
| Air Bag Deployed?   |   | Air Bags Not In Vehicle?  |  |  |
|   |   |   |  |  |
| <b>OWNER INFORMATION</b>  |   |   |  |  |
| Address Same as Driver? <b>NO</b>   |   | Name - Last (exactly as printed on registration)<br><b>UTICA</b>                |  | First<br><b>CITY OF</b>                                  |
| Middle  |   |   |  |  |
| Date of Birth<br><b>1/1/1985</b>  | Address<br><b>413 ORISKANY ST W</b>                           |   | City<br><b>UTICA</b>   | State<br><b>NY</b> Zip<br><b>13502</b>                   |
| <b>VEHICLE INFORMATION</b>  |   |   |  |  |
| License Plate #<br><b>UNIT62</b>  | State<br><b>NY</b>  | Vehicle Year<br><b>2017</b>   | Make<br><b>FORD</b>  | Type<br><b>4DSD</b>                                      |
| VIN #   |   | Insurance Company and Code<br><b>238 - NY MUNICIPAL INS RECIPROC</b>            |  |  |
| Pre-Accident Vehicle Action<br><b>09 - ENTERING PARKED POSITION</b>             |   | Type of Accident - Collision With (Second Event)<br><b>77 - NOT APPLICABLE</b>  |  | Direction<br><b>5 - SOUTH</b>                            |
| Point of Impact<br><b>06 - REAR QUARTER PANEL R</b>                             |   |   |  |  |
| Most Damaged Area<br><b>06 - REAR QUARTER PANEL RIGHT</b>                       |   | Damaged Area (Enter up to 3 more damaged areas)                                 |  | Total Occupant<br><b>01</b>                              |
| Apparent Contributing Factor (Primary) Driver<br><b>18 - TURNING IMPROPERLY</b> |   | Apparent Contributing Factor (Secondary) Driver<br><b>60 - OTHER VEHICULAR*</b> |  | Vehicle Towed By   |
| Vehicle Towed To  |   | Vehicle Model   |  | Estimated Speed  |
|   |   |   |  | Speed Unknown  |
| <b>DRIVER VIOLATIONS</b>  |   |   |  |  |
| Ticket Number   |   | Violation Section and Subsection  |  | Ticket Number  |
|   |   |   |  | Violation Section and Subsection                         |
| Ticket Number   |   | Violation Section and Subsection  |  | Ticket Number  |
|   |   |   |  | Violation Section and Subsection                         |
| Ticket Number   |   | Violation Section and Subsection  |  | Ticket Number  |
|   |   |   |  | Violation Section and Subsection                         |
| <b>COMMERCIAL MOTOR VEHICLE INFORMATION</b>                                     |   |   |  |  |
| Comm. Trailer Lic. Plate #  | Attached to Trailer #1:                                       | State   | Year   | Attached to Trailer #2:                                  |
| State   | Year  | Cargo Body Type   |  |  |
| Vehicle Configuration   |   | Driver Apparent Condition - Truck/Bus   |  | Veh. Type  |
| Access Control  |   |   |  |  |
| Number of Axles   | Gross Vehicle Weight  | Total Weight All Trailer(s)   | Carrier Source   | Over 95 Inches Wide<br><b>NO</b>                         |
| Over 35 Feet Long<br><b>NO</b>  |   |   |  |  |
| Over/Weight Permit<br><b>NO</b>   | OverDimension Permit<br><b>NO</b>                             | Weight Rating   | Carrier Name   |  |
| Address   |   | City  | State  | Zip  |
| U.S. DOT Number   |   | ICC MC Number   |  |  |
| Issuing Authority   | Does Vehicle have Haz. Mat. Placard?<br><b>NO</b>             | Placard #   | Haz. Mat. Released<br><b>NO</b>                                    | Haz. Mat. Type   |
| First Event   |   | Second Event  |  |  |
| Third Event   |   | Fourth Event  |  |  |
| Carrier Explanation   |   |   |  |  |

|   |   |  |  |
|---|---|--|--|
| Describe this Vehicle/Driver<br><b>2 - PARKED</b>                           |   | Was this a Vehicle, Bicyclist or Pedestrian?<br><b>1 - VEHICLE</b>                         |  |
| <b>DRIVER INFORMATION</b>   |   |  |  |
| Driver's Name - Last<br>[REDACTED]  |   | First<br>[REDACTED]  | Middle<br><b>G</b>                                       |
| Address<br>[REDACTED]   |   | City<br>[REDACTED]   | State<br>[REDACTED] Zip<br>[REDACTED]                    |
| <b>002</b> Date of Birth<br>[REDACTED]                                      | Sex<br>[REDACTED]                                 | Unlicensed?<br>[REDACTED]  | Driver's License ID Number<br>[REDACTED]                 |
| License State<br>[REDACTED]   |   | License Class<br>[REDACTED]  | Driver Ejected<br>[REDACTED]                             |
| Police Officer?<br><b>NO</b>  |   | Driver Injured?<br><b>NO</b>   |  |
| Emergency Operation<br>[REDACTED]   |   |  |  |
| Driver Safety Equipment Used<br><b>N - NOT APPLICABLE</b>                   |   | Location of Most Severe Physical Complaint<br><b>77 - NOT APPLICABLE</b>                   | Type of Physical Complaint<br><b>77 - NOT APPLICABLE</b> |
| Deceased<br>[REDACTED]  |   |  |  |
| Driver Physical Emotional Status<br><b>7 - NOT APPLICABLE</b>               |   | Injured Taken by (Source of Transport)<br>[REDACTED]                                       |  |
| Injured Taken To (Medical Facility)<br>[REDACTED]                           |   |  |  |
| Out of State Hospital Name<br>[REDACTED]                                    |   | Other Hospital County Name<br>[REDACTED]   | State<br>[REDACTED]                                      |
| EMS Response Plate #<br>[REDACTED]  |   |  |  |
| Driver Date of Death<br>[REDACTED]  | Extricated<br>[REDACTED]                          | Type of Extrication Equipment Used<br>[REDACTED]   | Air Bag Deployed?<br>[REDACTED]                          |
| Air Bags Not In Vehicle?<br>[REDACTED]                                      |   |  |  |
| <b>OWNER INFORMATION</b>  |   |  |  |
| Address Same as Driver?<br>[REDACTED]                                       |   | Name - Last (exactly as printed on registration)<br>[REDACTED]                             | First<br>[REDACTED]                                      |
| Middle<br>[REDACTED]  |   |  |  |
| Date of Birth<br>[REDACTED]   | Address<br>[REDACTED]                             |  | City<br>[REDACTED]                                       |
| State<br>[REDACTED]   |   | Zip<br>[REDACTED]  |  |
| <b>VEHICLE INFORMATION</b>  |   |  |  |
| License Plate #<br>[REDACTED]   | State<br>[REDACTED]                               | Vehicle Year<br>[REDACTED]   | Make<br>[REDACTED]                                       |
| Type<br>[REDACTED]  | VIN #<br>[REDACTED]                               | Insurance Company and Code<br>[REDACTED]   |  |
| Pre-Accident Vehicle Action<br><b>10 - PARKED</b>                           |   | Type of Accident - Collision With (Second Event)<br><b>77 - NOT APPLICABLE</b>             | Direction<br><b>5 - SOUTH</b>                            |
| Point of Impact<br><b>12 - FRONT QUARTERPANEL LEFT</b>                      |   | Total Occupant<br><b>00</b>  |  |
| Most Damaged Area<br><b>12 - FRONT QUARTERPANEL LEFT</b>                    |   | Damaged Area (Enter up to 3 more damaged areas)<br>[REDACTED]                              |  |
| Apparent Contributing Factor (Primary) Driver<br><b>77 - NOT APPLICABLE</b> |   | Apparent Contributing Factor (Secondary) Driver<br><b>17 - TRAFFIC CONTROL DISREGARDED</b> | Vehicle Towed By<br>[REDACTED]                           |
| Vehicle Towed To<br>[REDACTED]  |   | Vehicle Model<br>[REDACTED]  | Estimated Speed<br>[REDACTED]                            |
| Speed Unknown<br>[REDACTED]   |   |  |  |
| <b>DRIVER VIOLATIONS</b>  |   |  |  |
| Ticket Number<br>[REDACTED]   |   | Violation Section and Subsection<br>[REDACTED]   | Ticket Number<br>[REDACTED]                              |
| Violation Section and Subsection<br>[REDACTED]                              |   |  |  |
| Ticket Number<br>[REDACTED]   |   | Violation Section and Subsection<br>[REDACTED]   | Ticket Number<br>[REDACTED]                              |
| Violation Section and Subsection<br>[REDACTED]                              |   |  |  |
| Ticket Number<br>[REDACTED]   |   | Violation Section and Subsection<br>[REDACTED]   | Ticket Number<br>[REDACTED]                              |
| Violation Section and Subsection<br>[REDACTED]                              |   |  |  |
| <b>COMMERCIAL MOTOR VEHICLE INFORMATION</b>                                 |   |  |  |
| Comm. Trailer<br>Lic. Plate #<br>[REDACTED]                                 | Attached to Trailer #1:<br>[REDACTED]             | State<br>[REDACTED]  | Year<br>[REDACTED]                                       |
| Attached to Trailer #2:<br>[REDACTED]                                       | State<br>[REDACTED]                               | Year<br>[REDACTED]   | Cargo Body Type<br>[REDACTED]                            |
| Vehicle Configuration<br>[REDACTED]   |   | Driver Apparent Condition - Truck/Bus<br>[REDACTED]  | Veh. Type<br>[REDACTED]                                  |
| Access Control<br>[REDACTED]  |   |  |  |
| Number of Axles<br>[REDACTED]   | Gross Vehicle Weight<br>[REDACTED]                | Total Weight All Trailer(s)<br>[REDACTED]  | Carrier Source<br>[REDACTED]                             |
| Over 95 Inches Wide<br><b>NO</b>  |   | Over 35 Feet Long<br><b>NO</b>   |  |
| OverWeight Permit<br><b>NO</b>  | OverDimension Permit<br><b>NO</b>                 | Weight Rating<br>[REDACTED]  | Carrier Name<br>[REDACTED]                               |
| City<br>[REDACTED]  |   | State<br>[REDACTED]  | Zip<br>[REDACTED]  |
| U.S. DOT Number<br>[REDACTED]   |   | ICC MC Number<br>[REDACTED]  |  |
| Issuing Authority<br>[REDACTED]   | Does Vehicle have Haz. Mat. Placard?<br><b>NO</b> | Placard #<br>[REDACTED]  | Haz. Mat. Released<br><b>NO</b>                          |
| Haz. Mat. Type<br>[REDACTED]  |   |  |  |
| First Event<br>[REDACTED]   |   | Second Event<br>[REDACTED]   |  |
| Third Event<br>[REDACTED]   |   | Fourth Event<br>[REDACTED]   |  |
| Carrier Explanation<br>[REDACTED]   |   |  |  |

DIAGRAM



714 WASHINGTON ST



NOT TO SCALE

**ACCIDENT DESCRIPTION/OFFICER'S NOTES**

OPERATOR/POLICE OFFICER MICHAEL TARTAGLIA [REDACTED] OF VEHICLE 1, UPD CAR 52, 2017 FORD TAURUS STATES THAT HE WAS RESPONDING TO [REDACTED] REGARDING AN IN PROGRESS CALL FOR SERVICE. TARTAGLIA STATES THAT WHEN HE ARRIVED TO [REDACTED] HE PULLED INTO A PARKING SPOT ON THE WEST SIDE OF WASHINGTON ST. TARTAGLIA STATES THAT HE CUT THE TURN TOO MUCH WHILE PARKING AND SIDE SWIPE THE FRONT LEFT OF A PARKED VEHICLE (VEHICLE 2) WITH THE RIGHT REAR DOOR OF CAR 52.

OWNER, [REDACTED] OF VEHICLE 2, NY REG [REDACTED] 2008 CHEVROLET [REDACTED] STATES THAT HE PARKED HIS VEHICLE ON THE WEST SIDE OF WASHINGTON ST IN FRONT OF 714 WASHINGTON ST. GORDON'S VEHICLE WAS NOT OCCUPIED AND HE WAS NOT PRESENT DURING THE COLLISION.

VEHICLE 1 SUSTAINED MINOR COSMETIC/DENTING TO THE RIGHT REAR DOOR. THE RIGHT REAR WHEEL LUG NUT COVER WAS ALSO DENTED DURING THE COLLISION.

VEHICLE 2 SUSTAINED MINOR COSMETIC/DENTING TO THE FRONT LEFT BUMPER.

NO INJURIES WERE REPORTED.

PHOTOGRAPHS WERE SECURED.

THE OPERATOR OF VEHICLE 1 IS AT FAULT FOR TURNING IMPROPERLY HOWEVER VEHICLE 2 WAS PARKED ILLEGALLY WHICH IS A ANCILLARY CONTRIBUTING FACTOR TO THIS MOTOR VEHICLE ACCIDENT. THE AREA WHERE VEHICLE 2 WAS PARKED AT THE TIME OF THE COLLISION WAS CLEARLY SIGNED NO PARKING AND THE CURB IS ALSO PAINTED YELLOW.

NO CITATIONS ISSUED.

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**Carbone Collision Center**  
5718 HORATIO STREET, UTICA, NY 13502  
Phone: (315) 736-1275  
FAX: (800) 515-4254

Workfile ID:  
Federal ID:  
License Number:

f02ea8c4

**Preliminary Estimate**

**Customer: utica police vehicle 52**

**Job Number:**

Written By: Mike Hughes

Insured: utica police vehicle 52  
Type of Loss:  
Point of Impact:

Policy #:  
Date of Loss:

Claim #:  
Days to Repair: 0

**Owner:**  
utica police vehicle 52  
(000) 000-0000 Business

**Inspection Location:**  
Carbone Collision Center  
5718 HORATIO STREET  
UTICA, NY 13502  
Repair Facility  
(315) 736-1275 Business

**Insurance Company:**

**VEHICLE**

2018 FORD Police Interceptor Sedan FWD (Fleet) 4D SED 6-3.5L Flex Fuel Sequential MPI

VIN: 1FAHP2L85JG104185  
License:  
State:

Interior Color:  
Exterior Color:  
Production Date:

Mileage In: 1  
Mileage Out:  
Condition:

Vehicle Out:  
Job #:

**TRANSMISSION**

Automatic Transmission

**POWER**

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Power Driver Seat  
Power Adjustable Pedals

**DECOR**

Dual Mirrors

Tinted Glass

Overhead Console

**CONVENIENCE**

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Message Center  
Steering Wheel Touch Controls  
Telescopic Wheel  
Backup Camera

**RADIO**

AM Radio  
FM Radio  
Stereo  
Search/Seek  
CD Player  
**SAFETY**  
Drivers Side Air Bag  
Passenger Air Bag  
Anti-Lock Brakes (4)  
4 Wheel Disc Brakes  
Front Side Impact Air Bags

Head/Curtain Air Bags

**SEATS**

Cloth Seats  
Bucket Seats  
Reclining/Lounge Seats

**WHEELS**

Styled Steel Wheels

**PAINT**

Clear Coat Paint

**OTHER**

Traction Control  
Stability Control

Get live updates at [www.carwise.com/e/3E4Y5V](http://www.carwise.com/e/3E4Y5V)

# Preliminary Estimate

Customer: utica police vehicle 52

Job Number:

2018 FORD Police Interceptor Sedan FWD (Fleet) 4D SED 6-3.5L Flex Fuel Sequential MPI

| Line                            | Oper | Description                           | Part Number  | Qty | Extended Price \$ | Labor       | Paint      |
|---------------------------------|------|---------------------------------------|--------------|-----|-------------------|-------------|------------|
| <b>WHEELS</b>                   |      |                                       |              |     |                   |             |            |
| 2                               | Repl | RT/Rear Center cap                    | 6F2Z1130B    | 1   | 16.53             | 0.0         | 0.0        |
| <b>QUARTER PANEL</b>            |      |                                       |              |     |                   |             |            |
| 4                               | *    | Rpr RT Quarter panel                  |              | 0   | 0.00              | 1.0         | 2.2        |
| 5                               |      | Add for Clear Coat                    |              | 0   | 0.00              | 0.0         | 0.9        |
| 6                               | *    | Rpr RT Lower molding                  |              | 0   | 0.00              | 1.0         | 0.3        |
| 7                               |      | Add for Clear Coat                    |              | 0   | 0.00              | 0.0         | 0.1        |
| <b>REAR LAMPS</b>               |      |                                       |              |     |                   |             |            |
| 9                               | R&I  | RT Tail lamp assy w/o special service |              | 0   | 0.00              | 0.4         | 0.0        |
| <b>REAR BUMPER</b>              |      |                                       |              |     |                   |             |            |
| 11                              | R&I  | R&I bumper cover                      |              | 0   | 0.00              | 1.3         | 0.0        |
| <b>REAR DOOR</b>                |      |                                       |              |     |                   |             |            |
| 13                              | *    | Rpr RT Door shell                     |              | 0   | 0.00              | 4.0         | 2.3        |
| 14                              |      | Overlap Major Adj. Panel              |              | 0   | 0.00              | 0.0         | -0.4       |
| 15                              |      | Add for Clear Coat                    |              | 0   | 0.00              | 0.0         | 0.4        |
| 16                              | R&I  | RT Belt w/strip                       |              | 0   | 0.00              | 0.3         | 0.0        |
| 17                              | R&I  | RT R&I outside handle                 |              | 0   | 0.00              | 0.4         | 0.0        |
| 18                              | R&I  | RT R&I trim panel                     |              | 0   | 0.00              | 0.4         | 0.0        |
| 19                              | R&I  | RT R&I door assy                      |              | 0   | 0.00              | 1.0         | 0.0        |
| <b>STRIPE TAPE &amp; DECALS</b> |      |                                       |              |     |                   |             |            |
| 21                              | Repl | RT Decal rear door white              | DG1Z5420000C | 1   | 427.58            | 0.0         | 0.0        |
| 22                              | #    | Rpr Color sand and buff               |              | 0   | 0.00              | 1.0         | 0.0        |
| 23                              | **   | Repl A/M CAR COVER                    |              | 1   | 5.00              | 0.2         | 0.0        |
| 24                              | **   | Repl A/M COROSION PROTECTION          |              | 1   | 5.00              | 0.2         | 0.0        |
| <b>SUBTOTALS</b>                |      |                                       |              |     | <b>454.11</b>     | <b>11.2</b> | <b>5.8</b> |

## ESTIMATE TOTALS

| Category             | Basis      | Rate         | Cost \$         |
|----------------------|------------|--------------|-----------------|
| Parts                |            |              | 454.11          |
| Body Labor           | 11.2 hrs @ | \$ 50.00 /hr | 560.00          |
| Paint Labor          | 5.8 hrs @  | \$ 50.00 /hr | 290.00          |
| Paint Supplies       | 5.8 hrs @  | \$ 30.00 /hr | 174.00          |
| Subtotal             |            |              | 1,478.11        |
| <b>Grand Total</b>   |            |              | <b>1,478.11</b> |
| Deductible           |            |              | 0.00            |
| <b>CUSTOMER PAY</b>  |            |              | <b>0.00</b>     |
| <b>INSURANCE PAY</b> |            |              | <b>1,478.11</b> |

MyPriceLink Estimate ID / Quote ID:

593490525571522560 / 53378839

**Preliminary Estimate**

**Customer: utica police vehicle 52**

**Job Number:**

2018 FORD Police Interceptor Sedan FWD (Fleet) 4D SED 6-3.5L Flex Fuel Sequential MPI

2610 DISCLAIMER: PURSUANT TO SECTION 2610 OF THE INSURANCE LAW, AN INSURANCE COMPANY CANNOT REQUIRE THAT REPAIRS BE MADE TO THE MOTOR VEHICLE IN A PARTICULAR PLACE OR REPAIR SHOP. YOU HAVE THE RIGHT TO HAVE YOUR VEHICLE REPAIRED IN THE SHOP OF YOUR CHOICE.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR COMMERCIAL INSURANCE OR A STATEMENT OF CLAIM FOR ANY COMMERCIAL OR PERSONAL INSURANCE BENEFITS CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, AND ANY PERSON WHO, IN CONNECTION WITH SUCH APPLICATION OR CLAIM, KNOWINGLY MAKES OR KNOWINGLY ASSISTS, ABETS, SOLICITS OR CONSPIRES WITH ANOTHER TO MAKE A FALSE REPORT OF THE THEFT, DESTRUCTION, DAMAGE OR CONVERSION OF ANY MOTOR VEHICLE TO A LAW ENFORCEMENT AGENCY, THE DEPARTMENT OF MOTOR VEHICLES OR AN INSURANCE COMPANY, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE VALUE OF THE SUBJECT MOTOR VEHICLE OR STATED CLAIM FOR EACH VIOLATION.

You are entitled to the return of all replaced parts, except warranty and exchange parts, but you must ask for them in writing before any work is done. If you authorize work by phone, the shop must keep any replaced parts, and make them available when you pick up the vehicle.

THE PREPARATION OF THIS ESTIMATE MAY HAVE BEEN BASED ON THE USE OF CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. THERE ARE WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS. THESE WARRANTIES ARE PROVIDED BY THE MANUFACTURER AND/OR DISTRIBUTOR OF THE PARTS RATHER THAN BY THE ORIGINAL MANUFACTURER OF YOUR VEHICLE.

## Preliminary Estimate

**Customer: utica police vehicle 52**

**Job Number:**

2018 FORD Police Interceptor Sedan FWD (Fleet) 4D SED 6-3.5L Flex Fuel Sequential MPI

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide DR2JN10, CCC Data Date 08/16/2019, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2020 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

### SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

### SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

### OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Information Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

# DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 ORISKANY STREET WEST

UTICA, NEW YORK 13502

Date: May 11, 2019

Subject: Arrest of [REDACTED] (19-15580)

To: Chief of Police: Mark Williams

### Summary:

On May 6, 2019 [REDACTED] came to the Utica Police Department wanting \$250.00 to get this vehicle out of impound after Ofc. Tartaglia had it towed on May 4<sup>th</sup> when [REDACTED] was arrested under MHL 22.09. Upon researching the incident it was discovered that Ofc. Tartaglia had mishandled the call with [REDACTED] and while [REDACTED] refused to cooperate with a Civilian Complaint, the issues observed on Ofc. Tartaglia's video were serious enough to warrant an investigation into his conduct.

---

### Investigative Facts:

On May 4, 2019 at around 1350 hours Oneida County Dispatch received a call to check on a black male in front of [REDACTED] who was in a vehicle playing loud music and appeared to be falling asleep. The male had reportedly been there for approximately 15 minutes already. At the time the zone car 55, Ofc. Tartaglia, was tied up on another call and he was not able to respond until around 1415 hours.

According to Ofc. Tartaglia's report upon his arrival he observed a black male passed out in a gray in color Jeep Compass bearing NY [REDACTED] (later determined to actually be NY: [REDACTED]) that was legally parked. Ofc. Tartaglia stated that he struggled to wake the male and observed numerous alcohol containers inside the vehicle. He stated that once he was finally able to arouse the male it was obvious that the male was intoxicated, and he was

uncooperative and refusing to give Ofc. Tartaglia any information. Ofc. Tartaglia stated in his report that because the male was so intoxicated and could not provide him with any information that he felt it necessary to have the male, later identified as [REDACTED] transported to St. Luke's Hospital under MHL 22.09 law and subsequently had [REDACTED]'s vehicle towed due to his arrest.

Upon reviewing Ofc. Tartaglia's BWC footage from the call it is clear that the circumstances surrounding the incident were quite different from what his report portrayed. The video shows that when Ofc. Tartaglia arrives [REDACTED] is legally parked and is passed out in the vehicle, however the video also shows that [REDACTED] is seat belted into the driver's seat, the keys are in the ignition and the vehicle's engine is running. Once [REDACTED] is awake and speaking it is clear that [REDACTED] is intoxicated due to the way he is speaking (slowed, slurred speech), the way he looks (glassy, bloodshot eyes), and the way he had difficulty dividing his attention between answering Ofc. Tartaglia's questions as well as following his directions to turn the vehicle off. All of these factors should have lead Ofc. Tartaglia immediately down the path for a DWI arrest. [REDACTED] although intoxicated, was not incapacitated and could communicate with Ofc. Tartaglia he was just choosing to be uncooperative and did not want to identify himself.

During what was essentially a vehicle stop Ofc. Tartaglia displayed tactics that were contrary to officer safety. He conducted all of his initial interview of [REDACTED] from directly in front of the driver's door, was leaning into the vehicle and had his hands, including his shooting hand, inside of the vehicle while he spoke with [REDACTED]. Ofc. Tartaglia had no command presence and did not sound or appear in control of the conversation or situation at any time. When [REDACTED] began arguing with Ofc. Tartaglia about not giving him ID and the reason for the stop Ofc. Tartaglia would jump around from saying that he was just checking to make sure that [REDACTED] was "safe" and that he wasn't in trouble and that he wasn't going to arrest him for DWI because he's parked.

At this point Ofc. Tartaglia knew what was going on with [REDACTED] and knew or should have known that [REDACTED] was not unsafe. He knew that the issue with [REDACTED] was that he was drunk and even stated this to Bakarr several times and argued with him about it, but then reiterated that he wasn't going to arrest him for DWI. Ofc. Tartaglia appeared to either be unaware or unwilling to state to [REDACTED] that there was reasonable cause to believe that [REDACTED] had been driving while intoxicated and that he was conducting an investigation into same. Instead Ofc. Tartaglia kept telling [REDACTED] over and over that he didn't do anything wrong and he just needed his identification and to make sure he was "safe". This information was not accurate [REDACTED] there was no rhyme or reason to this deception and instead it caused confusion, further argument, and for [REDACTED] to

have the upper hand in the situation as he continued to say that he was "safe" and he was not driving.

At no point did Ofc. Tartaglia take charge of the situation, advise [REDACTED] that he believed him to be driving under the influence and having open alcohol containers in the vehicle both of which are illegal and were being investigated and that if he didn't comply with providing his pedigree information he could face further charges. If [REDACTED] didn't comply at that point then Ofc. Tartaglia should have escalated by having [REDACTED] step out of the vehicle and place him into handcuffs. Instead Ofc. Tartaglia continued to argue with [REDACTED] and give him false information that he "hadn't done anything wrong" and that he needed his ID to ensure his safety. Just checking someone's safety is not enough to compel them into providing us with pedigree information. It is the suspected criminal activity that gives police the ability to require ID be provided.

During Ofc. Tartaglia's argument with [REDACTED] he radioed that he was 'Code 4' but to have another unit respond and assist due to the male being uncooperative. He continued his back and forth with [REDACTED] and then at one point appeared to get frustrated and walked away from [REDACTED] who he knew was still intoxicated and behind the wheel of a vehicle with the keys in the ignition. The backup officer had not yet arrived. Ofc. Tartaglia then got into his own vehicle, turned around in the roadway and positioned his police car behind [REDACTED]'s vehicle. It is unknown for what purpose Ofc. Tartaglia decided to do this but it was extremely unsafe from an officer safety stand point as well as possibly creating a danger to the public if [REDACTED] decided to leave. By the time Ofc. Tartaglia had parked his vehicle behind [REDACTED] had exited his own vehicle and was standing in the roadway. At that time Ofc. Tartaglia told [REDACTED] to get back in his vehicle. This is again against officer safety as he is telling a suspect to reenter a vehicle that he has no idea what could be inside and he's advising a drunk person to get back behind the wheel of a vehicle with the keys in it. Ofc. Tartaglia should have wanted [REDACTED] out of the vehicle in the first place so that he could conduct further observations of [REDACTED]'s behavior relevant to intoxication, perform SFSTs, and take him into custody. [REDACTED] refused to get back into the vehicle and at that point Ofc. Tartaglia stopped pushing the issue, again showing [REDACTED] that he, not the officer, had control in the situation.

There is no clear reason why Ofc. Tartaglia would take the route of an MHL 22.09 arrest. [REDACTED] was speaking clearly (though slurred), was able to argue and compose logical thoughts and statements. [REDACTED] was able to exit his vehicle under his own power and was able to walk unassisted. He could have communicated any information to Ofc. Tartaglia that he asked, [REDACTED] just chose not to. [REDACTED] was not incapacitated to the point where he could not care for himself, could not speak, or was a danger to himself or anyone else. The only thing possibly

making [REDACTED] a danger to himself or anyone else was the fact that he could have been operating a motor vehicle while intoxicated – in which case the DWI was the appropriate charge and not an MHL 22.09. Once backup arrived (Car 56 / Ofc. Anken) Ofc. Tartaglia put [REDACTED] into handcuffs and advised him that he was being detained. Ofc. Tartaglia continued to incorrectly tell [REDACTED] that he hadn't done anything wrong and that he was being handcuffed because Ofc. Tartaglia needed his name and to make sure he's safe. He requested UFD respond for a 22.09 transport. Ofc. Tartaglia and Ofc. Anken then attempted to get [REDACTED] to sit in the back seat of Car 55. He verbally and physically refused to do so and continued to argue with both officers. Ofc. Tartaglia then began to back track and give up on having [REDACTED] sit in the vehicle since UFD was on the way – again showing [REDACTED] that he was getting his way as long as he continued to protest. Ofc. Tartaglia then left Ofc. Anken alone with an argumentative and uncooperative prisoner who was refusing to get into his police car just so he could do a Radio Log. Again, his officer safety is questionable.

While waiting for UFD to arrive Ofc. Tartaglia asks Dispatch who the vehicle comes back to and is advised that it belongs to [REDACTED], which Ofc. Tartaglia determines is [REDACTED] mother who lives just a few blocks away. Ofc. Tartaglia makes no attempt to make contact with the Registered Owner which he could have done even without [REDACTED] cooperation. He does not attempt to call [REDACTED] and does not send another unit to [REDACTED] house and give her the opportunity to retrieve her vehicle which could have helped deescalate some of the situation. An officer is not required to have a vehicle towed if the operator has a licensed third party that can take custody of the vehicle per policy. Ofc. Tartaglia was aware of this policy as he had just had Roll Call training on this same morning regarding Tow Procedures.

Once UFD arrives on scene Ofc. Tartaglia begins to escort [REDACTED] to the ambulance. While walking with him Ofc. Tartaglia tells [REDACTED] "To your credit you were cool, calm, collected but as it went on you became more uncooperative." [REDACTED] had been disorderly, rude, uncooperative, and non-compliant the entire time Ofc. Tartaglia had dealt with him and now for an unknown reason Ofc. Tartaglia is giving him praise which yet again gives the appearance that Ofc. Tartaglia is cowering to [REDACTED] and [REDACTED] is in control. [REDACTED] then doesn't want to get in the ambulance and starts throwing a fit and making a scene. During this a male and a female come out and identify themselves as friends of [REDACTED] and ask what is going on. Both parties try to calm [REDACTED] down and find out what's going on. Ofc. Tartaglia's explanation to these "friends" is the same as he gave to [REDACTED] – that he's not being arrested for DWI but he's "too drunk" and has to go to the hospital. Meanwhile [REDACTED] makes oral admissions regarding driving and asks Ofc. Tartaglia to "give me a breathalyzer". At this point even if [REDACTED] met the criteria for MHL 22.09 (which he did not) a logical and frequent solution to this type of situation that would prevent wasting resources at the Fire Department and Emergency Department

would be to turn [REDACTED] over to sober, responsible friends who could monitor him. They also could have taken over custody of [REDACTED] vehicle with permission. Ofc. Tartaglia continued with the MHL 22.09 custody which was an inappropriate arrest. He then had the vehicle towed from the scene off rotation.

---

Investigative Findings:

Based on my investigation, reviewing the reports and BWC video, reviewing the Policy and Procedure and NYS law I have determined that Ofc. Tartaglia did violate the Policy and Procedure of the Utica Police Department.

Ofc. Tartaglia's conduct would fall under the following section of the Utica Police Department Policy and Procedure:

*General Order*

*Traffic Enforcement*

*Chapter 4 – Article 9*

***9.15 TRAFFIC ENFORCEMENT DISCRETION:***

*H. Officers shall not have any discretion when:*

- 2. Dealing with compliance of department rules and regulations*
- 3. Dealing with specific laws mandating certain actions by the police*
- 4. Sufficient probable cause exists to support a charge of:*
  - a. Driving while intoxicated*

Ofc. Tartaglia violated this section when with sufficient probable cause to support a charge of Driving While Intoxicated he used discretion and did not make such an arrest even though department policy dictates that he will make such arrest.

#### 9.15

*F. When approaching the stopped vehicle, officers should:*

- 1. Observe the occupants at all times*
- 5. Keep their shooting-hand free.*
- 7. Stand to the rear of the driver's door*
- 10. Never reach into a stopped vehicle*
- 11. Not turn their back on the occupants of the vehicle*
- 12. be alert and businesslike*
- 13. Explain the reason for the stop and the nature of the violation*
- 14. Not argue with the violator*
- 15. Check for signs of physical impairment or illness, emotional distress, alcohol or drug abuse*

Ofc. Tartaglia violated the above section upon approaching this stopped vehicle that was pulled over on a public highway. Ofc. Tartaglia displayed tactics that were contrary to officer safety. He conducted all of his initial interview of [REDACTED] from directly in front of the driver's door, was leaning into the vehicle and had his hands, including his shooting hand, inside of the vehicle while he spoke with [REDACTED]. Ofc. Tartaglia had no command presence and did not sound or appear in control of the conversation or situation at any time. When [REDACTED] began arguing with Ofc. Tartaglia about not giving him ID and the reason for the stop Ofc. Tartaglia would argue back and wouldn't give a clear answer. He would jump around from saying that he was just checking to make sure that [REDACTED] was "safe" and that he wasn't in trouble and that he wasn't going to arrest him for DWI because he's parked. It was clear to Ofc. Tartaglia that [REDACTED] was intoxicated (as he stated to [REDACTED], yet he did not run [REDACTED] through Field Sobriety Tests.

#### 9.17 **DWI ENFORCEMENT:**

*A. Officers shall properly administer the standard field sobriety tests.*

*B. A certified breath analysis operator shall administer the chemical breath test.*

*C. The arresting officer shall ensure that the arrestee's vehicle is either towed from the scene or released to a responsible third party of the arrestee's choosing at the officer's discretion.*

*D. The arresting officer will follow the DWI procedures set forth in the Police Academy during the Standard Field Sobriety Testing Course.*

*E. Officers shall ensure that their BWC's are activated during the entirety of their DWI investigations. This includes the administration of: S.F.S.T. and the alco-sensor, transport of prisoners to HQ, datamaster administration, and Miranda Warning / Bill of Particulars interview while in custody at HQ. And as otherwise outlined in the body worn camera policy of this manual, Chapter 4, Article 2.*

Ofc. Tartaglia failed to take any DWI enforcement against [REDACTED] who was clearly intoxicated and operating a motor vehicle on a public highway.

#### **9.18 OFFICER Demeanor DURING TRAFFIC STOPS:**

*A. Officers must act to minimize the tension during the enforcement process. Methods of controlling conflict on traffic stops include, but are not limited to:*

- 1. Presenting a professional image via the officer's language, bearing, and tone of voice*
- 2. Displaying calmness and emotional stability when confronted by angry violators*
- 3. Demonstrating with certainty that the officer has observed the violation*

*B. When speaking to violators, officers should:*

- 2. Respectfully explain the reason for the stop and the nature of the violation*
- 5. Politely disengage the conversation if the driver becomes argumentative*

Ofc. Tartaglia did not display a professional image with his bearing or tone of voice. He appeared timid and unsure of himself. When [REDACTED] became angry and argumentative Ofc. Tartaglia did not remain calm and take control of the situation, he went back and forth with [REDACTED] and wavered on why he was stopping and speaking with him. Ofc. Tartaglia admits to [REDACTED] that he knows he is intoxicated but states he is not going to arrest [REDACTED] for it.

*Vehicle Tow, Impound, and Release*

*Chapter 4 – Article 10*

**10.13 TOWING PROCEDURES:**

*G. Violation of the Vehicle and Traffic Law - Officers are required to tow vehicles that are in violation of certain sections of the New York State Vehicle and Traffic Law if the operator of the vehicle does not have a licensed third party to take control of the vehicle.*

*Towing vehicles is required when the condition of the operator or vehicle, or restrictions regarding the operator render continued operation of the vehicle unsafe or unlawful. Such violations may include, but are not limited to, driving while intoxicated or impaired, unlicensed or aggravated-unlicensed operators, switched plates, and suspended registration.*

Ofc. Tartaglia made no attempt to contact the RO of the vehicle that [REDACTED] had been operating even after he identified that the RO was [REDACTED] mother who lived down the street. There were also licensed drivers that were identified as friends of [REDACTED]s on scene who also could have taken possession of the vehicle and prevented the need for a tow.

Ofc. Tartaglia failed to effect arrests for the below applicable offenses committed by [REDACTED]

Vehicle and Traffic Law

§ 1192. Operating a motor vehicle while under the influence of alcohol or drugs. 1. Driving while ability impaired. No person shall operate a motor vehicle while the person's ability to operate such motor vehicle is impaired by the consumption of alcohol.

3. Driving while intoxicated. No person shall operate a motor vehicle while in an intoxicated condition.

§ 1227. Consumption or possession of alcoholic beverages in certain motor vehicles. 1. The drinking of alcoholic beverages, or the possession of an open container containing an alcoholic beverage, in a

motor vehicle located upon the public highways or right-of-way public highway is prohibited.

Utica City Code

Sec. 2-15-43 Open containers.

[Code 1964, § 16-13.3(a)—(d)]

(c) Prohibition.

(1) Except as otherwise provided by law or ordinance duly adopted by the Common Council, no person shall carry, transport or have in the person's possession on or in any public land within the City any open or unsealed container containing an alcoholic beverage.

(2) No person shall consume any alcoholic beverage on any public land within the City.

(3) No person shall have within the person's possession for the purposes of consumption on public lands by either the person or another person any open or unsealed container containing an alcoholic beverage on any public lands within the City.

Ofc. Tartaglia instead took [REDACTED] into custody for the below Mental Hygiene Law which was not applicable:

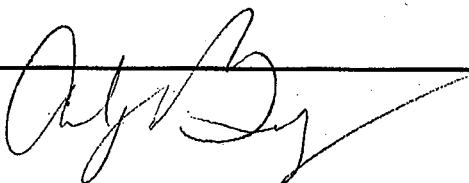
*Dealing with Emotionally Disturbed Persons & People in Crisis*

*Chapter 4 – Article 39*

**39.17 22.09 REFERRALS:**

*A. Under circumstances where a person appears to be incapacitated by alcohol and/or substances to the degree that there is a likelihood to result in harm to themselves or to others, that person may be directed by officers to be taken to a general hospital or to any other place authorized by the commissioner of mental health for immediate observation, care, and emergency treatment.*

Respectively Submitted,  
Name: Ashley E. Berger



Rank: Sergeant B-3

# Department of Public Safety

## BUREAU OF POLICE

413 Oriskany Street West, Utica New York 13502

Date: June 27<sup>th</sup> 2019

Subject: 22.09 MHL Arrest of [REDACTED]

To: Chief of Police  
Mark W. Williams

### Summary:

On June 27<sup>th</sup> 2019, I reviewed a precautionary investigation completed by Sgt. Ashley Berger in relation to the 22.09 MHL arrest of [REDACTED]

### Investigation:

On May 4<sup>th</sup> 2019 at approximately 1410hrs, PO Michael Tartaglia was dispatched to [REDACTED] for a black male playing loud music, from a motor vehicle, who appeared to be "nodding off". Upon arrival, Tartaglia found [REDACTED] passed out, in the driver's seat of his vehicle (a gray Jeep Compass). [REDACTED] vehicle was running and he was wearing his seatbelt. While Tartaglia was attempting to wake [REDACTED] he observed multiple containers of alcoholic beverages inside the vehicle and could smell an odor of an alcoholic beverage emanating from [REDACTED]. When Tartaglia was finally able to rouse [REDACTED] he was uncooperative and refused to give Tartaglia his name.

Based on a review of the BWC footage, it's apparent that [REDACTED] is intoxicated (slurred speech, glassy eyes and difficulty with attention). Instead of taking or ordering [REDACTED] off the vehicle, Tartaglia delays and continues to ask [REDACTED] for identification. As [REDACTED] continues to be non-compliant, asking why Tartaglia wants his identification, Tartaglia "beats around the bush" so to speak and says that he just wants to make sure [REDACTED] is "safe". Tartaglia also tells [REDACTED] that he wasn't in trouble and he wasn't going to arrest him for DWI. It appeared that Tartaglia was unable to confront [REDACTED] about the real reason for the stop and as a result he allowed [REDACTED] to dictate what was happening.

Tartaglia eventually called for backup and proceeded to move his patrol vehicle, leaving an obviously intoxicated [REDACTED] unattended, behind the wheel. While Tartaglia was re-positioning his patrol vehicle, [REDACTED] exited his vehicle and continued to dictate the situation. Finally, instead of detaining [REDACTED] and conducting SFST's, Tartaglia decided to take [REDACTED] into custody for section 22.09 of the mental health law, which was inappropriate for the circumstances.

While Tartaglia was attempting to convince [REDACTED] to get into the fire department ambulance, for transport, [REDACTED] friends show up on scene and asked Tartaglia what's happening. Tartaglia tells them that [REDACTED] is not being arrested for DWI, but he's too drunk and has to go to the hospital. Meanwhile, [REDACTED] is making oral admissions about driving and asking Tartaglia to "give him a breathalyzer".

After [REDACTED] is put on a stretcher and placed in the ambulance, Tartaglia arranges for his vehicle to be towed off rotation (which was the reason [REDACTED] sought restitution from the police department on May 6<sup>th</sup> 2019/see my BWC footage from that date re: same).

#### **Findings:**

Based upon her investigation into the matter, Berger cited several sections of our procedural manual, which were violated by Tartaglia during the aforementioned vehicle stop/call for service. They deal with enforcement/discretion, officer safety/tactics, conducting DWI investigations, demeanor/professionalism, towing procedures and knowledge of the NYS mental health law. The following sections are the ones I find most pertinent:

#### **Chapter Four, Article Nine: Traffic Enforcement**

##### ***9.15 TRAFFIC ENFORCEMENT DISCRETION:***

##### **H. Officers shall not have any discretion when:**

##### **4. Sufficient probable cause exists to support a charge of:**

##### **b. Driving While Intoxicated**

#### **Chapter Eight, Article One: Professional Standards of Conduct and Ethics**

##### ***1.13 ORDERS AND DISCIPLINE:***

##### **B. Familiarity with the Laws, Ordinances, Rules:**

1. Employees shall be held personally responsible for knowing and adhering to the Rules and Regulations, orders, current directives, procedures and policies of the Department, City Ordinances, and State and Federal Laws affecting their duties.

b. Unfamiliarity No Defense; Unfamiliarity with or ignorance of laws, ordinances, rules and regulations, current directives, procedures, policies or orders shall not constitute a defense.

##### ***1.14 PERFORMANCE AND ATTENTION TO DUTY:***

##### **A. General Duties:**

1. Members shall protect life and property, preserve the peace, prevent violations of the law, detect and arrest violators of the law and enforce those laws of the United States, The State of New York, and local laws and ordinances of the City of Utica over which the department has jurisdiction.

2. Employees shall perform their duties in a competent manner.

**W. Unsatisfactory Performance:**

**1. Unsatisfactory performance may be demonstrated by a lack of knowledge, unwillingness, inability, or failure to perform assigned tasks, or failure to take appropriate action. Employees shall maintain sufficient competency, both physically and mentally, to properly perform their duties and assume the responsibilities of their positions.**

**\*After reviewing Tartaglia's disciplinary history (see attached), I recommend that he forfeits one vacation day from his 2019 time bank and also receives remedial DWI/SFST training.**

  
**Lt. Sean Dougherty #2553**



# CITY OF UTICA

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF POLICE

413 ORISKANY STREET WEST

UTICA, NEW YORK 13502

Robert Palmieri  
Mayor

Mark Williams  
Chief of Police

August 29, 2018

[REDACTED]

Dear Sir/Madam:

On March 23, 2017, you filed a Civilian Complaint Report with the Utica Police Department. As a result of your civilian complaint, an internal investigation was conducted by the Supervisory Staff of the Utica Police Department. The final disposition of this case has been registered with the Professional Standards Office as "Sustained", which means the evidence is sufficient to prove the allegation, which was addressed through our disciplinary system. Should you wish to discuss the disposition of this complaint, or have any additional questions or concerns please feel free to contact the Office of Professional Standards by the phone number or email address attached below.

Please be advised that State and Federal Laws prohibit us from disclosing any "Discipline" issued to an employee. We can only share with you that discipline was given.

Sincerely,

Sergeant Hiram Rios  
Professional Standards Investigation Unit  
(315) 223-3405  
Email: [professionalstandards@uticapd.com](mailto:professionalstandards@uticapd.com)

Robert Palmieri  
Mayor

1 Kennedy Plaza  
Utica, NY 13502  
(315)792-0100

Constituent Casework Form

Please provide us with the following information

Name: Robert Carey

Date: 4/11/18

Mailing Address: \_\_\_\_\_

Cell: [REDACTED]

E-Mail: \_\_\_\_\_

Explanation of Assistance Desired

wrongfully arrested for tickets that weren't  
his on December 7th. Says it was his  
son's tickets who is also named Robert.

Mayor Palmieri's Office use ONLY:

Sent by (Date and Time): \_\_\_\_\_

Sent to (Date and Time): \_\_\_\_\_

Action Taken

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sent Back To Sonny (Date and Time): \_\_\_\_\_

From:

Sent:

To:

██████████  
Wednesday, August 29, 2018 10:16 AM  
hrios

|        |             |   |
|--------|-------------|---|
| 2/6/18 | Sgt. Wooden | <p>On 1/30/18 Robert Carey Sr. ██████████ responded to Headquarters and made an Informal Complaint regarding the procedure which took place on 3/23/17 during a motor vehicle accident resulting in Officer Tartaglia arresting Robert Carey Jr. (██████████) for AUO 3<sup>rd</sup>, but completing Traffic Tickets with Robert Carey Sr.'s pedigree information. As a result of this procedural mistake a warrant was issued for Robert Carey Sr.'s arrest due to Robert Carey Jr. failing to show up in court. Robert Carey Sr.'s complaint is that he was falsely arrested due to the warrant. Upon further looking into the incident it was learned that PO Tartaglia did indeed make the mistake of putting Robert Carey Sr.'s pedigree information on the traffic tickets (Note: Robert Carey Jr.'s booking for that arrest was correct). As a result of the follow up with this incident, Utica City Court advised that Robert Carey Sr. needed to have his lawyer request a coram nobis writ of error with the court to rectify the courts records and further clear DMV records.</p> <p>PO Tartaglia was spoken to regarding the procedural mistake, received a verbal counseling regarding the same, and this note was placed in his E-File.</p> |
|--------|-------------|---|

To: Lt. Holt



# Utica Police Department

## Compliment/Complaint Form

413 Oriskany St. West

Utica, N.Y. 13502

**Instructions:** If you would like to praise a Utica Police Department employee, or file a complaint against a police employee, please write legibly and fill out this form. Personal information will not be disclosed to the public, unless required by law. You can submit this form by mailing it to the address given at the top of this page or by returning it to the Utica Police Department.

If you are filing a complaint, please indicate the type of complaint you wish to file.

- **Formal Complaint:** Involves a serious allegation of misconduct, to be officially investigated, for which discipline may be imposed, if the allegation(s) are sustained.
- **Informal Complaint:** Involves a minor complaint or concern, for informational purposes only and will not be formally investigated. However the matter will be discussed with the employee(s) involved.

I wish to file a (please check one): Compliment \_\_\_ Formal Complaint X Informal Complaint \_\_\_

### Information about you

|                         |                      |            |                  |
|-------------------------|----------------------|------------|------------------|
| LAST NAME<br>Carey Sr.  | FIRST NAME<br>Robert | M.I.       | DATE OF BIRTH    |
| STREET ADDRESS and APT# | CITY                 | STATE      | ZIP CODE         |
| HOME PHONE              | WORK PHONE           | CELL PHONE | SEX (circle one) |

Are you filing this on behalf of someone else? Yes \_\_\_ No X If Yes, please complete this section

|                                      |            |                   |                         |
|--------------------------------------|------------|-------------------|-------------------------|
| WHAT IS HIS/HER LAST NAME?           | FIRST NAME | AGE               | SEX (circle one)<br>M F |
| STREET ADDRESS and APT#              | CITY       | STATE             | ZIP CODE                |
| WHAT IS HIS/HER RELATIONSHIP TO YOU? | HOME PHONE | WORK / CELL PHONE |                         |

### Information about the incident

|  |                                    |  |                         |
|--|------------------------------------|--|-------------------------|
| LOCATION OR ADDRESS OF INCIDENT<br>Burrstone Rd Utica NY 13502 | DATE OF INCIDENT<br>3/23/17        | APPROXIMATE TIME OF INCIDENT<br>5:34 AM / PM |                         |
| WITNESS LAST NAME  | FIRST NAME                         | AGE  | SEX (circle one)<br>M F |
| WITNESS ADDRESS  | CITY                               | STATE  | PHONE                   |
| NAME OR ID# OF OFFICER OR EMPLOYEE<br>Michael Tartaglia        | NAME OR ID# OF OFFICER OR EMPLOYEE |  |                         |

Nature of action: Check all that apply

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Extremely helpful      | <input type="checkbox"/> Excessive and/or improper use of force | <input type="checkbox"/> Rudeness, discourtesy, and offensive language |
| <input type="checkbox"/> Very caring/empathetic | <input checked="" type="checkbox"/> False arrest                | <input type="checkbox"/> Violation of civil rights                     |
| <input type="checkbox"/> Professional conduct   | <input type="checkbox"/> Unlawful search and/or seizure         | <input type="checkbox"/> Bias-based profiling                          |
| <input type="checkbox"/> Did a great job        | <input type="checkbox"/> Dishonesty and untruthfulness          | <input checked="" type="checkbox"/> Department procedures or tactics   |
| <input type="checkbox"/> Made an extra effort   | <input type="checkbox"/> Corruption                             | <input type="checkbox"/> Other   |

**Statement of Facts:** (Describe in detail the action(s) of the officer(s) that led you to file this compliment/complaint and sign and date below in the space provided.)

Robert Corey Senior stated that because the wrong DOB was entered on (3) tickets issued to his son Robert Corey Junior at an accident scene, his license was suspended and a warrant was issued for his arrest. The case has already been adjudicated however Corey Senior would like his record wiped clean through the DMV and City Court.

False or incorrect statements made herein are punishable as a class A misdemeanor pursuant to section 210.45 of the New York State Penal Law.

I attest under penalty of perjury, that the above information is true and correct to the best of my recollection.

Signature: Robert E. Corey Sr.

Date: 1-30-18

**FOR DEPARTMENT USE ONLY: To be completed by the Supervisor or Unit receiving or initiating a complaint**

Signature of Supervisor receiving/initiating the complaint

RMS# 17-12206

Officer:

Det. Sean Dougherty

ID#:

2553

Date:

1/30/18

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

08-29-2017

**INTRA-AGENCY MEMORANDUM****SUBJECT:** Assistance With Transportation of Hector McClain [REDACTED]**TO:** Chief of Police: Mark W. Williams

On August 25th, 2017, I PO Dewey reported for duty to the Utica Police Department for the 0745-1600 Hrs. Special Investigations Unit shift. I was assigned as Tac uniform assistance to the SIU Investigators. I was assigned to Car 25 in full uniform attire per Unit Commander Lt. B. Bansner.

At around 1503 Hrs. while I was transporting a party for Inv. Penree into Police Hq I heard PO Manion (call sign #293) call out over the air ways that he was currently watching wanted party Hector McClain [REDACTED] standing at the corner of Kemble Street @ Hobart Street. I knew McClain to have open charges signed against him for Burglary by Inv. Singe.

I also know McClain to be extremely hostile towards Police due to past Police experiences with him and immediately dropped my transport off at Police HQ and immediately responded to the area with other patrol units.

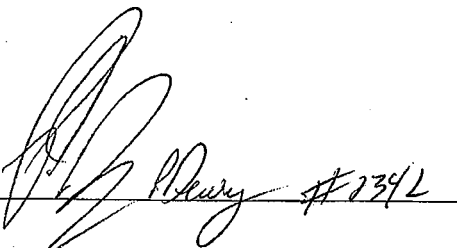
As I arrived on scene, McClain was already in custody and was led to Car 55 by PO Mahaffey. Sgt. S. Berger was on scene and advised me to follow Car 55 into Police HQ.

I followed PO Mahaffey into Police HQ (Sally Port) and assisted with walking him into the booking area cage. Both PO Panelli and PO Lange were advised that McClain was in custody for CID Inv. Singe.

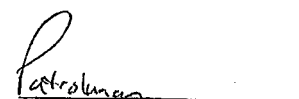
This completed my involvement with this matter.

Respectfully,  
PO Dewey #2342

NAME:



RANK:



# DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 Oriskany Street West

Utica, New York 13502

8/28/17

### INTRA-AGENCY MEMORANDUM

**SUBJECT:** Hector McClain RMS 17-38190

**TO:** Chief of Police: Mark W. Williams

On August 25<sup>th</sup> 2017 I assisted other units with locating wanted party Hector McCalin on Kemble St. at Hobart St. I stood by for officer safety until cleared from the scene. This was my only involvement with Hector McClain and I did not have any further dealings with him after clearing the scene.

NAME:

*[Signature]* #8860 Sr. White

RANK:

*Plon*

# DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 Oriskany Street West

Utica, New York 13502

8/28/17

### INTRA-AGENCY MEMORANDUM

**SUBJECT:** RMS 17-38190

**TO:** Chief of Police: Mark W. Williams

On August 25th, 2017 I, PO Daniel Mahaffy, reported to the Utica Police Department for the 0745-1600 hours' shift. I was assigned to car 55 under Platoon Commander Lt. Dougherty.

At approximately 1306 hrs I cleared animal control call RMS 17-38186 to assist other units at the intersection of Remble St and Hobart St with taking Hector McClain into custody. The call originated from the Squad Commanders office as PO Manion advised that he could see him on the camera in this area wearing a backwards hat and that there was an open MVCAC investigation on him and he needed to be taken into custody. Once myself car's 57, 56 and car 25 were in position I heard Lt. Bansner advise to move in on McClain which we did. We advised McClain to stay where he was and then placed him in handcuffs double-locked and to the rear at which time I conducted a pat search of McClain and escorted him to the rear of my patrol vehicle. I transported McClain to headquarters and was advised to place him in the cage which I did and he was TOT booking officer PO Fanelli.

Respectfully submitted,

PO D. Mahaffy #5182

NAME: *Daniel Mahaffy*

RANK: *PO*

# DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 Oriskany Street West

Utica, New York 13502

8/28/2017

### INTRA-AGENCY MEMORANDUM

**SUBJECT:** Regarding RMS 17-38190 - Arrest of Hector McClain

**TO:** Chief of Police: Mark W. Williams

On August 25th, 2017 I, Patrolman Aaron Llewellyn, was working the 0745-1600 shift assigned to the Uniformed Patrol Division, Platoon B, Squad 3, assigned to Car and Zone 56, using BWC 4974, per the Squad Commander Lt. Dougherty.

On 8/25/2017 at approximately 1503 hours, several units and I were dispatched to the intersection of Hobart St @ Kemble St in an attempt to locate and arrest Hector McClain [REDACTED]. PO Manion advised that McClain is wanted in connection with a burglary investigation. The units on scene coordinated with Lt. Bansner and subsequently located/placed McClain under arrest. McClain was handcuffed and searched by PO Mahaffy (Car55) while I stood by for officer safety and scene security. McClain was then transported by PO Mahaffy to UPD HQ while PO Dewey (Car 25) followed in his patrol vehicle.

NAME:

*Aaron Llewellyn* 4974

RANK:

*Patrolman*

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

8/31/2017

**INTRA-AGENCY MEMORANDUM****SUBJECT:** RMS 17-38190**TO:** Chief of Police: Mark W. Williams

On Friday August 25, 2017 I, Officer Richard Lange, was working the 0745-1600 hour shift assigned to the Patrol Division, Platoon B, Squad 2. On that day, I was assigned as the chauffeur, per the Squad Commander; Lt. Dougherty.

On the above date, the booking area was extremely busy and both myself and PO Fanelli were going back and forth from the booking area to Utica City Court to assist with prisoner arraignments. PO Fanelli was teaching me what the chauffeur detail entails, as I am still learning about it and have only done it a few times prior. The interaction between both McClain and I was minimal and the only contact I had with McClain was him yelling through the holding cage asking for a phone call. I am unsure as to who transported McClain or why McClain was placed into the holding cell, which I was not present for. I assumed McClain's property had already been secured.

This concludes my involvement with this incident.

Respectfully submitted,

PO Lange #4779

NAME: RANK: PT/ 4779

## DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 Oriskany Street West

Utica, New York 13502

9/26/17

## INTRA-AGENCY MEMORANDUM

SUBJECT: RMS 17-38208 - EDP / Suicide Attempt - Hector McClain [REDACTED]

TO: Chief of Police: Mark W. Williams

On Friday August 25, 2017 I, Officer Donald Talerico arrived to work at the Utica Police Department in the Uniformed Patrol Division assigned to Car/Zone 56 Body Worn Camera 8311, for the 1600-0000 hour's tour of duty. Sergeant Cimpi was the Squad Commander.

At approximately 1715 hours I responded to HQ with Irhad Rascic ([REDACTED]) who was taken into custody regarding him being an active File 5 out of The Oneida County Sheriff's Office and VTL charges.

As I entered the door the leads from the sally port into the booking area I observed a B/M who I now know to be Hector McClain ([REDACTED]) pacing in the cage screaming "I want my phone call! I want my phone call!". Once I arrived in the booking room with Rascic I advised PO Tartaglia of his charges and that he was a File 5 out of the sheriff's office and they were going to be responding shortly to take custody of him. As I was advising PO Tartaglia of this I observed 3 other unknown B/M's sitting on the bench in the booking room and could still hear McClain yelling in the background about wanting to make a phone call. I then began to assist PO Tartaglia with Rascic due to him being extremely busy with the other prisoners. After I completed assisting PO Tartaglia I began to fill out the booking sheet for my arrest of Rascic. As I was doing this PO Tartaglia left the booking room. Moments later I heard PO Tartaglia yell "Oh Shit" at that time I stopped what I was doing and observed PO Tartaglia run into the booking room, grab the keys to the cage and run back out. I then responded to the cage to assist PO Tartaglia with this unknown issue. Once I turned the corner I observed PO Tartaglia trying to open the door to the cage. I then observed McClain sitting on the floor of the cage with some type of string or rope around his neck that was attached to the cage door. At that time, I assisted PO Tartaglia and began to pull the door to the cage open. I then observed that McClain had tied a shoe lace to the cage door and wrapped it around his neck. I immediately cut the shoe lace so that McClain was able to breathe. Once the shoe lace was cut McClain began gasping for air and vomiting. At that Time Sgt Cimpi arrived and began assisting us. He was informed about what had just occurred as well. McClain then sat on the floor of the cage and continued taking deep breathes of air. Once he stopped gasping for air he was placed on the bench of the cage and his sneakers and jacket were secured. At that time dispatch was advised to have UFD respond to evaluate McClain.

As I was waiting for UFD to arrive I attempted to speak with McClain but he would not respond to any of my questions. McClain then placed his hands over his face, began to cry and started to rock back and forth. Once UFD arrived on scene Capt. Baranowski and FF Kain began to check McClain's vitals. I was advised that his vitals were normal but he was still unwilling to speak with anyone. As I was looking at McClain's neck I could observed redness around both side and the imprint of the shoe lace. I was then advised by Sgt Cimpi that McClain is going to be transported to the hospital for MHL 9.41. UFD advised dispatch to have a rescue vehicle respond. I continued to attempt to speak with McClain but he was still unwilling to speak with me. At one point, he stated that he couldn't take it anymore and he wanted to die, but he was mumbling these statements. When I asked him to repeat what he

NAME: Don Talerico #8311 / Don TalericoRANK: PHM

said he would just sit on the floor and cry with his hands over his face. Once the UFD Rescue rig arrived on scene McClain was shackled and handcuffed. When McClain was advised that he was going to be transported to the hospital he would not move and had to be carried from the cage to the sally port where FF Zongrone and FF Durr were awaiting with a stretcher. McClain was then placed in the stretcher and into the Rescue vehicle. I advised dispatch I was following UFD to St Luke's Hospital for MHL 9.41 transport.

Upon arrival at St Luke's Hospital I informed the hospital staff regarding this incident. They were also advised that McClain has pending Burglary charges against him and they must contact the Squad Commander Office when he is being released. They were also given the number of the Squad Commanders Office. I was further advised by the hospital staff that they were going to give McClain a sedative due to him possibly being combative and uncooperative. The Mandatory Oneida County Mental Health Behavioral and Commitment paperwork for MHL 9.41 was completed, signed, and faxed.

I was advised by Sgt Cimpi that PO Balio was going to be responding to my location to watch McClain. Once PO Balio arrived I briefed him on this incident. I also advised PO Balio that I was only able to obtain pictures of the side and back of McClain's neck. He was advised to secure more photographs once the sedative begins to take effect. I then cleared the hospital and responded back to HQ.

My BWC was tagged regarding this incident.

Photographs were placed in the Crime Scene Everyone folder under this RMS by PO Tartaglia and PO Balio.

Case Closed by Arrest

Respectfully Submitted

Det. Donald Talerico

NAME: Don Talerico #8311 / Don Talerico

RANK: Det

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

August 30<sup>th</sup>, 2017**INTRA-AGENCY MEMORANDUM****SUBJECT:** Hector McClain suicide attempt**TO:** Chief of Police: Mark W. Williams

On Friday, August 25th, 2017, I, PO Michael J Tartaglia III, reported for duty to the Uniform Patrol Division of the Utica Police Department for the 1600-0000 hour shift. I was assigned to be the Booking Officer, BWC 8366, by the acting platoon commander, Sgt Cimpi.

Upon beginning my shift at 1600 hours I met with Officer Fanelli who was the Booking Officer for the 0800-1600 hour shift. Officer Fanelli advised me of a female that had been transported in, who I later identified as Tammy Joynt, [REDACTED], a male who was in the cage, that I was later able to identify as Hector M McClain, [REDACTED], and two other males that were on the bench, whom I later identified as Gary J Bowman, [REDACTED] and Amadeo J Deblasiis, DOB [REDACTED]. I observed that Bowman was not cuffed to the bench and that the cage door had been locked and secured at this time. McClain was walking freely inside of the cage and wanted to know why he was arrested. Officer Fanelli advised me that as of this time that only Bowman had been entered into the system and was not booked. However Officer Fanelli also informed me that he had searched all persons held in the booking area at this time and he had all of their property in the Booking Officer's room and all of the property was separated and labeled who it belonged to. Officer Fanelli then left for the night. At this time Matron Zampa was still here and was asked to start booking Joynt while I started to book McClain and Deblasiis. It was at this time I learned that three people had not been taken out of the system and released, one being a juvenile record, and that Deblasiis had been arrested at approximately 1430 hours and McClain had been brought in between 1500 hours and 1600 hours.

Between 1600 hours and approximately 1710 hours I was trying to enter in Deblasiis and McClain and enter in the charges for Bowman. McClain was very uncooperative in the cage, asking why he was arrested and that he wanted his phone call. I informed McClain multiple times that he would be able to make a phone call once I had his charges and when he was completely booked. McClain continued to yell repeatedly that he wanted a phone call. McClain kept repeatedly yelling that he wanted a phone call for approximately 20 minutes. At approximately 1630 hours Ahmad J Boyd, DOB [REDACTED] was transported in for domestic related charges and I began to enter him into the system.

At approximately 1710 hours PO Talerico transported in a male that I learned to be Irhad Rascic, [REDACTED], for AUO 3rd and a Warrant out of Oneida County Sheriff's Department. McClain at this time was still yelling that he wanted a phone call. I was beginning to search Rascic for contraband and to secure whatever property he had on him when I noticed that McClain had stopped yelling. I also noticed that McClain was no longer standing and I could hear a raspy gurgling sound. I went to the other side of the booking area to check on McClain and I could observe that he had shoes on. McClain had taken the shoe lace off of his left shoe and tied one end of it to the cage door and tied a loop around his neck and sat down trying to hang himself. I immediately ran and grabbed the cage door key and unlocked the door to cut McClain loose. PO Talerico was with me and cut the lace McClain was

NAME: PO Michael J Tartaglia III #8366RANK: Patrolman

hanging himself with and Sgt Cimpi ran out to assist us. The lace that was around McClain's neck was removed and McClain began to gasp for air and vomited on the cage floor. UFD was requested to respond to the Booking Area for a medical and mental health evaluation. Sgt Cimpi was informed on the situation at this time. McClain's sneakers and jacket were removed from him and secured at this time.

While waiting for UFD to arrive McClain sat on the cage floor with his knees up and his face in his hands.

McClain was crying and refused to answer any questions asked by myself and PO Talerico. At this time I was attempting to secure photographs of McClain's injuries and he would not move and continued to cry. I did what I could to secure photographs of the side and back of McClain's neck. McClain speak once and a while, however he was mumbling and I could only make out that he did not care and that he wanted to die. UFD arrived on scene and again McClain refused to answer any questions asked to him at this time and continued to keep his face in his hands and continued to cry. I was advised by Sgt Cimpi to place feet shackles and cuffs on McClain and to also utilize a belly chain. McClain was secured at this time and asked to stand up and walk outside to the ambulance that would take him to the hospital. McClain continued to sit and cry and had to be lifted to his feet and carried outside. Once outside McClain was placed on a stretcher and placed in the back of an ambulance where he was transported to St Luke's on 9.41 related charges.

I then secured photographs of the cage, McClain's shoe and the lace he had used attempting to hang himself. I then downloaded and tagged my body camera footage related to this incident. All photographs were then downloaded to the Crime Scene Photos folder. The floor of the cage was then mopped.

At approximately 2310 hours PO Balio transported McClain back to Police HQ to complete his booking. I spoke with McClain briefly about his time here and he stated he was mad because he felt that everyone else's booking was not completed before they could make phone calls. I explained to him that per my training I was taught that a person could not make any phone calls until their booking was completed. McClain then stated that felt like he was here for a while before he even saw me report for duty today and when I asked how long he had been here before I came in and he saw me stated that he wasn't sure. I asked if it had been anywhere from 15 to 20 minutes and he stated that he felt like it was longer than that. McClain's booking was then completed and met constant watch criteria.

Respectfully,

PO Michael J Tartaglia III, #8366

C-2

NAME: PO Michael J Tartaglia III #8366

RANK: PO Michael J Tartaglia III

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

Monday, August 28, 2017**INTRA-AGENCY MEMORANDUM****SUBJECT:** Hector McClain Investigation. RMS 17-38190**TO:** Chief of Police: Mark W. Williams

On Friday, August 25, 2017, I was working 0745-1600 hours, assigned to B-Platoon. I was assigned to Car 40 as a street supervisor.

At or about 1500 hours, I heard Lt Dougherty (from the squad commander's office) request a car to check the area of Kemble St and Hobart St, for the CAC, for a male named Hector McClain. I believe Car 56 (Llewellyn) and Car 57 (White) were initially dispatched. PO Manion then got on channel 5 and relayed that he had a visual of McClain on the pole camera and PO Manion gave a clothing description of McClain. PO Manion also stated that McClain was wanted for two burglaries. A short time later, I heard Car 31 (Deputy Chief Noonan) request the description of McClain and once that was given, I believe Car 31 stated that he was in the area of Oneida St and Hobart St. After this, I heard Car 36 (Lt Bansner) state that he was in the area and he began coordinating the response of the officers.

I proceeded to the area and before I arrived, I heard the command (from Car 36) for the officers to move in and a short time later, at approximately 1511 hours, it was reported that the cars on scene had one in custody. I arrived a short time after and I observed a male I now know to be Hector McClain in handcuffs and several officers were in the area. Lt Bansner also appeared to be in command. At that point, I turned my back to the officers and McClain and acted as perimeter security. McClain was placed in Car 55 (Mahaffy) and transported to headquarters. Car 25 (Dewey) followed the transport. At that point, I cleared all remaining patrol cars from the call.

At or about 1600 hours, I was in the Squad Commander's Office at the end of my shift. McClain was in the holding cage and was screaming over and over again that no one told him he was under arrest, he wasn't read his rights, and he wanted a phone call. He continued to scream and yell for quite some time. I would say, at least 30 minutes. I then left the police station for the day.

Respectfully Submitted,

Scott M. Berger  
Sergeant  
#0620  
Squad: B-3

NAME:

 Scott M. Berger

RANK:

Sgt. #0620

**DEPARTMENT OF PUBLIC SAFETY****BUREAU OF POLICE**

413 Oriskany Street West

Utica, New York 13502

9/17/17

**INTRA-AGENCY MEMORANDUM****SUBJECT:** RMS 17-38208; Prisoner Hector McClain attempted suicide**TO:** Chief of Police: Mark W. Williams**Summary:**

On 08/25/17 at approximately 1710 hours, Ptlm. Tartaglia who was assigned to the doorman position heard a gurgling noise coming from the holding cage area. Upon going over to check the holding cage area, Ptlm. Tartaglia observed the male prisoner, Hector M. McClain ( [REDACTED] ) who was in the cage sitting on the floor near the holding cage door with one end of a shoe lace tied around his neck while the other end was tied around the holding cage door. PO Tartaglia immediately yelled to alert me, as I was in the office, while he ran back to the booking area to grab the key for the lock on the holding cage.

After grabbing the key, Ptlm. Tartaglia along with the assistance of Ptlm. Talerico and I cut the shoe string and then removed the other end from around McClain's neck. At this point, McClain who was still conscious and breathing began to gasp, cry and vomit.

UFD was then dispatched to the station for medical treatment. The on call Duty Commander, Capt. Mickle was contacted and advised of the incident. McClain was then transported by UFD to St. Luke's Hospital regarding an MHL 9.41 while car 56, Ptlm. Talerico followed.

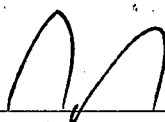
Photographs were secured of McClain and the scene as well as the shoelace. Narratives were completed by all officers involved including officers from B-Platoon. B-Platoon was on duty at the time McClain was transported into the station and placed in the holding cage. A NYS Commission of Corrections Reportable Incident form was completed on E-Justice.

An Investigation was initiated under RMS 17-38208.

**Investigation:**

As part of my investigation I spoke with Ptlm. Tartaglia and Ptlm. Talerico on scene. I also was on scene and witnessed much of the incident. McClain was already in the holding cage upon C-Platoons arrival for their shift. McClain's property was already in the booking area in a plastic bin. McClain for hours was hostile, yelling and screaming as well as hitting his hands on the cage at periods. He was observed sitting on the bench and it was assumed that he had calmed down. It was a short time after, approximately 1714 hours that McClain untied his shoe lace from his shoe placed it around his neck and used it to try and hang himself from the holding cage.

NAME:

  
1415  
Joseph C. Murphy

RANK:

SGT

Further investigation showed that McClain was transported into the station at 1521 hours by Ptlm. Mahaffey and Ptlm. Dewey, regarding incident number 17-38190. A citizen stop of McClain was conducted at Kemble and Hobart St. due to open Burglary charges from Inv. Singe. Video footage of the holding cage area shows Ptlm. Mahaffey and the booking officer for B-Platoon, Ptlm. Fanelli taking property from McClain but not his shoes. The holding cage is then locked and McClain is left in the cage until shift change. Prior to C-Platoon taking over, McClain was not even entered into RMS booking at all therefore there were no documented cell checks completed every 15 minutes by Ptlm. Fanelli. A check of RMS also shows that Ptlm. Tartaglia entered McClain into RMS at 1620 hours but no cell checks are documented in RMS until 23:23 when McClain returns from the hospital meaning Ptlm. Tartaglia did not document a cell check from 1620 until 1714 hours when McClain began to hang himself.

Narratives were completed by Ptlm. White who assisted on the initial stop of McClain, Ptlm. Dewey (initial stop of McClain), Sgt. Scott Berger (initial stop of McClain), Ptlm. Mahaffey (initial stop of McClain and transport of same to the station), Ptlm. Llewellyn (initial stop of McClain), Ptlm. Lange (Chauffer for B-Platoon), Ptlm. Fanelli (doorman for B-Platoon), Ptlm. Talerico (present during suicide attempt), and Ptlm. Tartaglia (doorman during suicide attempt).

All in station camera footage was reviewed as part of this investigation. A NYS Commission of Corrections Reportable Incident form was completed on E-Justice. On call Duty Commander, Capt. Mickle was notified of incident. An email was sent to all proper command staff and professional standards regarding incident.

#### Findings:

Based on my investigation I determine that Ptlm. Fanelli violated the following policy and procedures:

#### 11.19 TRANSPORTATION OF A PRISONER TO HEADQUARTERS:

P. The proper entry shall be made in the prisoner log book upon the arrival of any prisoner(s), male or female. If a matron is not working the female prisoner logbook will be maintained at the doorman's desk.

-Ptlm. Fanelli violated this policy when he did not enter Hector McClain into RMS upon McClain's arrival into the station at 1521 hours. McClain was not entered into RMS until Ptlm. Tartaglia did so at 1620 hours.

#### 11.27 BOOKING PROCEDURES:

A. Upon intake of a prisoner the doorman/matron shall take their personal items (i.e. money, rings, watches, necklaces) as well as any belts, neckties, shoelaces or shoes, drawstrings, clothing items such as jackets, hooded sweatshirts, overcoats or other similar outer garments, and place it in a prisoner property bin. If an item(s) is too large for the prisoner property bin or there are no bins available the doorman/matron may use a large plastic bag to store the items. The doorman/matron shall note in the prisoner log book that the prisoner's property was secured and record the bin number.

-Ptlm. Fanelli violated this policy as he did not take all of McClains property off of his person which included his shoes and shoe laces.

#### 11.28 DETENTION FACILITY (LOCKUP) OPERATIONS:

A. Before being placed in a cell or holding cage the clothing and person of each prisoner shall be thoroughly searched.

NAME: Joseph C. [Signature]

RANK: Sgt.

Joseph C. [Signature]

-Ptlm. Fanelli violated this policy when he placed McClain in the holding cage without thoroughly searching McClain and securing and removing all the proper property from McClain.

G. The condition of prisoners, in the cellblock, shall be checked by the doorman, matron or other sworn officer by actual visits to the cell, at intervals not to exceed fifteen (15) minutes. All checks and activity of a prisoner shall be entered into each prisoners booking in RMS under the detainee tracking module by use of the electronic scanner. The prisoner's condition and other notations considered relevant should be noted by the officer and/or matron. Under no circumstances will anyone enter either cellblock area while carrying a weapon. Except upon initial entry with a prisoner, no personnel shall enter the booking or holding area, where prisoners are being detained, while armed.

-Ptlm. Fanelli violated this policy when he did not enter McClain in RMS and therefore did not document any of the required 15 minute cell checks from 1521 until he was relieved by the next shift.

-Ptlm. Tartaglia violated this policy as he did not document any cell checks for McClain until 2323 hours after he had already returned from the hospital. McClain did not document any checks from when he entered McClain into RMS at 1620 hours until his attempted suicide attempt at 1714 hours.

Ancillary Issues:

None.

Respectfully Submitted,

Name: Joseph W. Cimpi

Rank: Sergeant C-2

NAME:

Joseph Cimpi

RANK:

Sgt.

## DEPARTMENT OF PUBLIC SAFETY

## BUREAU OF POLICE

413 Oriskany Street West

Utica, New York 13502

08/31/2017

## INTRA-AGENCY MEMORANDUM


SUBJECT: Hector McClain

TO: Chief of Police: Mark W. Williams

On 08/25/2017 I Reported to work at the Utica Police Department. I was assigned to work as the doorman. My  
ur of duty was the 0800 to 1600 hours shift.

During the time frame of 1530 hours to 1550 hours I recall units bringing in a few prisoners at once and specifically Tammy Joynt [REDACTED] and Hector M McClain, [REDACTED] Gary J Bowman, [REDACTED] and Amadeo J Deblasiis, [REDACTED] were already in Utica Police custody on the rear bench. I recall the female Mrs. Joynt being placed onto the bench and the bench was full. Joynt was irate and crying. At this time I was sitting at my desk and remember the Officers bringing in McClain were placing him in the holding cell because there was little room on the bench. I then got up to assist Officer Mahaffy and started to secure McClain's property from inside the cage. Mahaffy advised me that this arrest was for Inv. Manion regarding a burglary investigation. I remember Officer Mahaffy asking me specifically if I wanted him to take McClain's shoes and I said no because I was under the impression that McClain was going upstairs to CID. I also thought McClain was going to be in the cage temporarily until the bench cleared. I made sure he was deemed safe for officer safety reasons and closed the cage and placed his personal property in a bag. At this time I would estimate the time being 1545 hours and realized it was to late to start any booking information in the computer. I then wrote all the names of the prisoners in custody in the yellow tags and sorted the property out for my relief. All other prisoners here besides Joynt and McClain were booked as far as possible but I remember Inv. Singe had not brought down Gary Bowman's charges yet. It was a very busy time period for a shift change and I tried to advise my relief, Officer Tartaglia of what was going on as best as possible. I then left for my shift and all was in order.

NAME:



FANCII

RANK:

PRM

# Department of Public Safety

## BUREAU OF POLICE

413 Oriskany Street W.  
Utica, New York 13502

**Subject:** Internal Investigation: Attempted Suicide Incident re: Prisoner Hector McClain

**RMS:** 17-38208

**Investigating Supervisor:** C Platoon Supervisor Sgt. Cimpi

**Reviewing Supervisor:** C Platoon Commander Lt. J. Holt Jr.

### Summary:

On 8/25/17 at approximately 1714 hours, C Platoon Booking Officer / Doorman PO Tartaglia heard a gurgling noise coming from the prisoner holding cage. PO Tartaglia immediately checked on a male prisoner Hector M. McClain ( [REDACTED] ) who was being held in the prisoner holding cage awaiting arrest processing / booking for Burglary related charges. PO Tartaglia found McClain sitting on the holding cage floor near the holding cage door with one end of a shoelace tied around his neck while the other end of the shoelace was tied around the holding cage door. It was obvious that McClain was attempting to commit suicide by hanging = suffocation. McClain was choking and gasping for air hence the suspicious noises that caught PO Tartaglia's attention. PO Tartaglia immediately alerted the C Platoon Squad Commander Sgt. Cimpi by yelling to him while running back to the booking area to grab the key for the lock on the prisoner holding cage door. PO Talerico heard the commotion and offered his assistance. After gaining access to the prisoner holding cage, PO Tartaglia cut the shoelace and removed same from around McClain's neck. McClain who was still conscious and breathing began to gasp for air, cry and vomit. The Utica Fire Department was promptly requested for emergency medical evaluation / treatment of McClain. The Utica Fire Department Emergency Medical Services transported McClain to St. Luke's Hospital via an ambulance regarding additional medical evaluation / treatment as well as a mandatory mental health evaluation pursuant to MHL 9.41. PO Talerico accompanied McClain to the hospital and completed the necessary paperwork pursuant to a MHL 9.41 arrest.

The Duty Commander Captain Mickle was notified regarding the incident. Sgt. Cimpi initiated an internal investigation regarding the above prisoner attempted suicide incident (RMS 17-38208).

### Investigative Facts:

Sgt. Cimpi initiated a fact finding internal investigation regarding the incident. Sgt. Cimpi obtained surveillance camera footage from all the Booking Area cameras to assist with his investigation. Sgt. Cimpi interviewed PO Tartaglia and PO Talerico regarding the incident. After interviewing PO Tartaglia and PO Talerico, Sgt. Cimpi directed them

to complete comprehensive Officer Narratives regarding the incident. Sgt. Cimpi learned that Hector McClain was being held in the prisoner holding cage when PO Tartaglia took over the C Platoon Booking Officer / Doorman position at shift change from the B Platoon Booking Officer / Doorman PO Fanelli. PO Tartaglia noted that McClain's personal property was in a plastic bin which was sitting in the booking office therefore PO Tartaglia assumed McClain had been searched, stripped of all pertinent personal property, the property was logged, and secured in a plastic bin per departmental policy/procedure. McClain had been arrested during the B Platoon Shift as he was wanted by Inv. Singe regarding impending Burglary related charges. McClain was transported to the Utica Police Department at 1521 hours by B Platoon PO Mahaffy and placed into the prisoner holding cage with the assistance of Tactical Unit PO Dewey. Custody of McClain was turned over to the B Platoon Booking Officer / Doorman PO Fanelli at which time PO Fanelli searched McClain and secured some of his personal property however he did not secure his shoes and shoelaces which is contrary to departmental policy/procedure. PO Fanelli secured the prisoner holding cage door and McClain was left until PO Fanelli's tour ended at 1600 hours. PO Fanelli did not create an RMS Booking Module upon McClain's intake therefore there were no documented 15 minute cell checks completed by PO Fanelli all of which is contrary to departmental policy/procedure. A check of RMS shows that PO Tartaglia completed an RMS Booking Module for McClain at 1620 hours. Sgt. Cimpi found no documented cell checks of McClain until 2323 hours when McClain returns from the hospital meaning PO Tartaglia did not document a cell check from 1620 hours until 1714 hours when McClain was found attempting to commit suicide in the prisoner holding cage.

PO Tartaglia secured pictures of the scene as well as the shoelace that McClain utilized to hang himself. A NYS Commission of Corrections Reportable Incident Form regarding the incident was completed via E-Justice. An email was sent to all pertinent command staff and professional standards personnel regarding incident. As previously noted, Sgt. Cimpi obtained and reviewed all surveillance camera footage from the Booking Area cameras to assist with his fact finding internal investigation.

### **Investigative Findings:**

After reviewing all the facts and circumstances regarding this incident, it was determined that the following departmental policies and procedures were violated:

#### Chapter 4, Article 11 ARREST, TRANSPORT, BOOKING

##### **11.19 TRANSPORTATION OF A PRISONER TO HEADQUARTERS:**

P. The proper entry shall be made in the prisoner log book upon the arrival of any prisoner(s), male or female. If a matron is not working the female prisoner logbook will be maintained at the doorman's desk.

- PO Fanelli violated said policy when he did not create an RMS Booking Module for prisoner Hector McClain upon intake at 1521 hours. An RMS Booking Module was not completed for McClain until PO Tartaglia completed same at 1620 hours.

#### 11.27 BOOKING PROCEDURES:

A. Upon intake of a prisoner the doorman/matron shall take their personal items (i.e. money, rings, watches, necklaces) as well as any belts, neckties, shoelaces or shoes, drawstrings, clothing items such as jackets, hooded sweatshirts, overcoats or other similar outer garments, and place it in a prisoner property bin. If an item(s) is too large for the prisoner property bin or there are no bins available the doorman/matron may use a large plastic bag to store the items. The doorman/matron shall note in the prisoner log book that the prisoner's property was secured and record the bin number.

- PO Fanelli violated said policy as he did not secure all of McClain's personal property from his person, specifically his shoes and shoelaces.

#### 11.28 DETENTION FACILITY (LOCKUP) OPERATIONS:

A. Before being placed in a cell or holding cage the clothing and person of each prisoner shall be thoroughly searched.

- PO Fanelli violated said policy when he secured McClain in the prisoner holding cage without thoroughly searching his person and securing / removing all his prisoner property, specifically his shoes and shoelaces.

G. The condition of prisoners, in the cellblock, shall be checked by the doorman, matron or other sworn officer by actual visits to the cell, at intervals not to exceed fifteen (15) minutes. All checks and activity of a prisoner shall be entered into each prisoners booking in RMS under the detainee tracking module by use of the electronic scanner. The prisoner's condition and other notations considered relevant should be noted by the officer and/or matron. Under no circumstances will anyone enter either cellblock area while carrying a weapon. Except upon initial entry with a prisoner, no personnel shall enter the booking or holding area, where prisoners are being detained, while armed.

- PO Fanelli violated said policy when he did not create an RMS Booking Module for the prisoner McClain therefore none of the required 15 minute cell checks were completed from McClain's intake at 1521 hours until PO Fanelli was relieved at shift change around 1600 hours by PO Tartaglia.
- PO Tartaglia violated said policy as he did not document any of the required 15 minute cell checks for prisoner McClain from 1620 hours when he created a RMS

Booking Module for McClain until 1714 hours when McClain was discovered attempting to commit suicide.

**Ancillary Issues:**

No ancillary issues were noted during this investigation.

**Recommendations:**

As a result of the above noted departmental policy and procedure violations, I recommend that PO Fanelli receive a Letter of Reprimand as well as the forfeiture of 5 days of benefit time which will serve as punitive discipline in full satisfaction of the above matter. Furthermore, I recommend that PO Tartaglia receive a Letter of Reprimand which will serve as punitive discipline in full satisfaction of the above matter.

Respectfully Submitted,

James R. Holt Jr.

LT. J. Holt Jr. / 4016

# Utica Police Department

## Internal Investigative Packet re: Prisoner Hector McClain Attempted Suicide Incident

RMS: 17-38208

Investigating Supervisor: Sgt. J. Cimpi

Reviewing Supervisor: Lt. J. Holt Jr.

- LOR + 3 days for Fanelli
  - LOR for Tartaglia
- Approved



# CITY OF UTICA

DEPARTMENT OF PUBLIC SAFETY

BUREAU OF POLICE

413 ORISKANY STREET WEST

UTICA, NEW YORK 13502

ROBERT PALMIERI

Mayor

MARK WILLIAMS

Chief of Police

11/10/2017

Officer M. Tartaglia

C Platoon

Patrol Division

Officer M. Tartaglia:

On 8/25/17 at approximately 1714 hours, C Platoon Booking Officer / Doorman PO Tartaglia heard a gurgling noise coming from the prisoner holding cage. PO Tartaglia immediately checked on a male prisoner Hector M. McClain [REDACTED] who was being held in the prisoner holding cage awaiting arrest processing / booking for Burglary related charges. PO Tartaglia found McClain sitting on the holding cage floor near the holding cage door with one end of a shoelace tied around his neck while the other end of the shoelace was tied around the holding cage door. It was obvious that McClain was attempting to commit suicide by hanging = suffocation. McClain was choking and gasping for air hence the suspicious noises that caught PO Tartaglia's attention. PO Tartaglia immediately alerted the C Platoon Squad Commander Sgt. Cimpi by yelling to him while running back to the booking area to grab the key for the lock on the prisoner holding cage door. PO Talerico heard the commotion and offered his assistance. After gaining access to the prisoner holding cage, PO Tartaglia cut the shoelace and removed same from around McClain's neck. McClain who was still conscious and breathing began to gasp for air, cry and vomit. The Utica Fire Department was promptly requested for emergency medical evaluation / treatment of McClain. The Utica Fire Department Emergency Medical Services transported McClain to St. Luke's Hospital via an ambulance regarding additional medical evaluation / treatment as well as a mandatory mental health evaluation pursuant to MHL 9.41. C Platoon Supervisor Sgt. Cimpi initiated an internal investigation regarding the above prisoner attempted suicide incident (RMS 17-38208) to determine whether any involved officer violated any department policy / procedure.

The internal investigation found that PO Tartaglia violated departmental policy / procedure as he did not document any of the required 15 minute cell checks for prisoner McClain from 1620 hours when he created a RMS Booking Module for McClain until 14 hours when McClain was discovered attempting to commit suicide.

As a result of the investigation it was determined that you have violated Department Procedural Manual as follows:

Chapter 4, Article 11 ARREST, TRANSPORT, BOOKING

1.1 DETENTION FACILITY (LOCKUP) OPERATIONS:

The condition of prisoners, in the cellblock, shall be checked by the doorman, matron or other sworn officer by actual visits to the cell, at intervals not to exceed fifteen (15) minutes. All checks and activity of a prisoner shall be entered into each prisoners booking in RMS under the detainee tracking module by use of the electronic scanner. The prisoner's condition and other notations considered relevant should be noted by the officer and/or matron. Under no circumstances will anyone enter either

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tellblock area while carrying a weapon. Except upon initial entry with a prisoner, no personnel shall enter the booking or holding area, where prisoners are being detained, while armed.

On 11/10/2017, a Command Discipline hearing was commenced. You were offered PBA representation and you accepted/denied. Also present during this hearing was ...declined PBA Representation. We came to the following resolution.

- A) You accept the findings of the investigation.
- B) You accept responsibility for violating the Departmental Procedural Manual.
- C) You accept this Letter of Reprimand.
- D) You also understand that in the future, this behavior or any other violation of Departmental Rules or Regulations of a similar nature will be subject to further disciplinary action.

You are being furnished a copy of this letter. The original with acknowledgment, signed by you, will be placed in your personnel file.

Capt. D. Cinque  
Capt. D. Cinque

James R. Holt Jr.  
Lt. J. Holt Jr.

Officer M. Tartaglia  
Officer M. Tartaglia

MST  
Declined PBA Rep.

I acknowledge the content of this letter  
and a copy of it has been provided to me.